

Park View Medical Centre

Quality Report

Cranfleet Way, Long Eaton, Nottingham,
Nottinghamshire NG10 3RJ
Tel: 0115 946 2690
Website: www.parkviewmedicalcentre.co.uk

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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

Ratings

Overall rating for this service

Good



Are services effective?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of Park View Medical Centre on 8 December 2015. During that inspection we found that an effective audit system was not in place to monitor and improve the quality of care and the services provided, including complete audit cycles.

Overall the practice was rated as good with are services effective requiring improvement in view of the above.

After the comprehensive inspection, the practice wrote to us to say what action they had taken to meet the legal requirement in relation to the above breach.

We undertook this desk based review on 30 September 2016 to check that the provider had completed the required improvements, and now met the legal requirement. We did not visit the practice as part of this inspection.

This report only covers our findings in relation to the above requirement and areas requiring improvement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Park View Medical Centre on our website at www.cqc.org.uk.

Our finding across the area we inspected was as follows:

- The practice had taken appropriate action to meet the legal requirement.
- Effective systems were in place to monitor and improve the quality of care and the services provided, including a programme of complete audit cycles.

Professor Steve Field (CBE FRCP FFPH FRCGP)
Chief Inspector of General Practice

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services effective?

The practice is rated as good for providing effective services.

- Systems were in place to monitor and improve the quality of care and the services provided including a programme of complete audit cycles, where the improvements made are implemented and monitored.

Good



Park View Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC inspector undertook the desk based review of Park View Medical Centre.

Background to Park View Medical Centre

Park View Medical Centre provides primary medical services to approximately 4836 patients through a general medical services (GMS) contract. The practice is located in Long Eaton in Nottinghamshire.

The practice is managed by a sole GP who is in the process of applying to change the current registration from a partnership to an individual following the retirement of two partners.

The clinical team includes one lead GP, two salaried GPs, two practice nurses, a nurse practitioner and a healthcare assistant. The lead GP and practice manager form the management team. The team is supported by a medical secretary, two administrators and four receptionists including a senior receptionist.

The practice is open Monday to Friday from 8.30am to 7pm. The practice provides extended hours on a Tuesday, Wednesday and Thursday morning from 8am to 8.30am.

The practice also offers appointments Monday to Friday from 6pm to 8pm at a medical centre in Long Eaton, to accommodate those patients who are unable to attend the practice in the normal and extended working hours.

When the surgery is closed, patients are advised to dial the local out of hours service which is provided by Derbyshire Health United.

Why we carried out this inspection

We undertook a desk based review of Park View Medical Centre on 30 September 2016. This was carried out to check that improvements had been made to meet a legal requirement following our comprehensive inspection on 8 December 2015. We reviewed the practice against one of the five questions we ask about services: are services effective. This is because the service was not meeting certain legal requirements.

How we carried out this inspection

We did not visit the practice as part of this review. We reviewed the information the practice sent us, which detailed the actions they had taken to meet the legal requirements in relation to Regulation 17: Good Governance. We also spoke with the practice manager.

Are services effective?

(for example, treatment is effective)

Our findings

A comprehensive inspection on 8 December 2015 found that an effective system was not in place to monitor and improve the quality of care and the services provided, including complete audit cycles.

Overall the practice was rated as good, with are services effective requiring improvement in view of the above. Following the inspection, the practice told us what action they had, and were taking to ensure the services are effective.

This inspection found that the following improvements had been made to meet the legal requirement, and to improve patient care and outcomes.

- There was evidence of quality improvement including an ongoing audit programme and complete audit cycles.
- Records showed that a clinical meeting was held in June 2016 to discuss and agree the audit programme for the next 12 months with relevant clinical staff. This set out various audits and re-audit dates, and who was leading on these. The programme was planned in response to incidents and key areas requiring improvement.
- The above audit programme was in the early stages of implementation. Records showed that three audits had been completed in the last six months, which included

one complete audit cycle. The audit findings had been collated, and shared with the practice team to improve the quality of the service and to ensure that patients received appropriate care and treatment. Further audits were planned, including full audit cycles.

- Audits completed in the last six months included an audit to review prescribing practice, recognition and management of patients with pre-diabetes and patients who do not attend appointments.
- The practice was undergoing changes in preparation for one of the GPs becoming a GP trainer in January 2017, and the practice taking GP registrars in the future.
- Clinical staff had taken on additional responsibilities and lead roles for specific areas, to ensure the services are effective and to drive continuous improvements.
- The practice had adopted more proactive ways of working to ensure effective systems were in place, including the use of the electronic task system.
- A range of meetings took place to aid communication and continuously improve how the practice delivered services to patients.
- Records showed that the learning from significant events and complaints received were shared with the staff team in order to further improve the service.
- The practice had put an annual patient satisfaction survey in place, and had set up a Patient Participation Group, to seek and act on feedback from patients and the public.