

Conway PMS

Inspection report

Conway Medical Centre
44 Conway Road, Plumstead
London
SE18 1AH
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<http://www.conwaypms.nhs.uk/>

Date of inspection visit: 29 October 2019
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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 location

Good 

Are services safe?

Good 

Are services effective?

Requires improvement 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

This inspection was carried out in response to our findings during our on-going monitoring of the practice. The inspection was an announced focussed inspection, which we undertook on 29 October 2019, under Section 60 of the Health and Social Care Act 2008. This report covers our findings in relation to the effective, responsive and well-led key questions. The ratings for the safe and caring key questions will be carried through from the previous inspection on 13 September 2017, when the practice was rated as good overall and in the safe, effective, caring and well-led key question. The responsive key question was rated as requires improvement.

At this inspection, the practice was rated requires improvement in effective and good in the responsive and well led key questions. Three of the six population groups were rated good. Families, children and young people, people with long-term conditions and working age people were all rated requires improvement.

The reports of all the previous inspections of Conway PMS can be found by selecting the 'all reports' link for Conway PMS on our website at www.cqc.org.uk.

We based our judgement of the quality of care at this service on a combination of:

- What we found when we inspected
- Information from our ongoing monitoring of data about services and;
- Information from the provider, patients and the public.

We rated the practice as **requires improvement** for providing effective services because:

- The practice is below the CCG and national target in several 2018/19 QOF performance indicators; namely, families, children and young people, People with long-term conditions and working age people. The practice had identified these areas and had a plan to improve their performance but was not yet able to demonstrate improved outcomes.
- The practice was unable to demonstrate that it always monitored and obtained consent appropriately.

We rated the practice as **good** for providing responsive services because:

- Feedback from patients was acted upon and as a result, extended opening hours from 7am have been introduced on a long-term basis, as well as a new telephone system and online booking feature.
- The practice actively sought input from external organisations and charities to improve services offered.
- The practice actively offered patient choice with regards to care and treatment options. All nine of the patients interviewed stated they felt involved in the decisions made at the practice.

We rated the practice as **good** for providing well-led services because:

- The practice had been responsive to feedback from our previous inspection and had addressed all our findings.
- Governance of the practice promoted the delivery of high-quality and person-centred care, supported learning and innovation, and promoted an open and fair culture.
- Staff understood the practice's vision, values and strategy, and their role in achieving them.
- Arrangements with partners and third-party providers were governed and managed effectively to encourage appropriate interaction and promote coordinated, person-centred care.

There were areas where the practice **should** make improvements:

- Improve the process in place for the recording and monitoring of patient consent.
- Continue to take steps to improve cervical cancer screening and childhood immunisation uptake.
- Improve patient satisfaction with booking appointments further into the future.
- Improve the process in place for reception staff knowing which type of appointments to book.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good 
People with long-term conditions	Requires improvement 
Families, children and young people	Requires improvement 
Working age people (including those recently retired and students)	Requires improvement 
People whose circumstances may make them vulnerable	Good 
People experiencing poor mental health (including people with dementia)	Good 

Our inspection team

Our inspection team was led by a CQC lead inspector accompanied by a GP specialist adviser.

Background to Conway PMS

Conway PMS is based at 44 Conway Road, Plumstead, SE18 1AH. They also provide services from a smaller branch surgery at 142-146 Bellegrave Road, Welling, DA16 3QR, (two miles from the Plumstead branch). Greenwich Clinical Commissioning Group (CCG) are responsible for commissioning services for patients of this practice. The practice is registered with the Care Quality Commission as a partnership of three partners (two clinical) to provide the regulated activities of diagnostic and screening procedures, family planning services, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.

The main site (Plumstead) operates over two floors of a converted house providing a ground floor waiting area, reception office, two consulting and treatment rooms and a patient toilet. A third consulting and treatment room and staff rooms are on the top floor. There is wheelchair access throughout the ground floor and baby changing facilities are available. The branch site operates from a one storey property that is shared with two private medical practices.

At the branch site there are two consulting and treatment rooms and a small reception office and waiting area. A wheelchair accessible patient toilet with baby changing facilities is shared with the two private practices.

GP sessions are provided by two GP Partners, two salaried GPs and one locum GP providing a total of 25 sessions per week. Additional clinical services are provided by a salaried practice nurse and a locum specialist diabetes and respiratory nurse. Administrative services are provided by a full-time practice manager, an administrative manager and eight reception and administrative staff.

The practice has approximately 4,837 registered patients and is based in an area with a deprivation score of 6 out of 10 (with 1 being the most deprived and 10 being the least deprived). The age distribution at the practice is slightly higher than average for the number of patients in the 0 to 4 year age group and there is a slightly higher number of people with their working status as unemployed.