

# Bredbury Medical Centre

## Quality Report

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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



# Key findings

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## Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection on Bredbury Medical Centre on 26 July 2017. The overall rating for the practice was good, although the practice was rated as requires improvement for effectiveness. The full comprehensive report on the July 2017 inspection can be found by selecting the 'all reports' link for Bredbury Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was a desk-based review carried out on 19 February 2018 to confirm that the practice had carried out their plan to make improvements following the last inspection

The practice is now rated as good for effective services, and overall the practice is rated as good.

Our key findings were as follows:

- The practice had improved achievements with the screening of patients.
- A programme of clinical audit and reaudit was now in place.
- Recommendations made at the previous inspection, such as promotion of the patient participation group and carers register continued.

The areas where the provider should make improvements are:

- Continue work to identify and support patients who have caring responsibilities.

**Professor Steve Field (CBE FRCP FFPH FRCGP)**

Chief Inspector of General Practice

# Bredbury Medical Centre

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

This review was led by a CQC lead inspector.

## Background to Bredbury Medical Centre

Bredbury Medical Centre (1 Auburn Avenue, Stockport, SK6 2AH) is situated in a purpose built building in Bredbury, in Stockport. We did not visit the practice during this inspection but conducted a desk top review of evidence sent to us by the practice.

Since the last inspection renovation work had continued to upgrade and update sections of the building. Plans were in place to upgrade the building and facilities further.

The practice has a patient list size of 4636. The practice is part of the NHS Stockport Clinical Commissioning Group (CCG) and services are provided under a Personal Medical Services Contract (PMS).

The age profile of the practice population broadly mirrors those of local and national averages, although the practice does have a slightly higher proportion of patients over the age of 65 years (19.9% compared to the national average of 17.2%). The proportion of the practice's patient list who suffer from a long standing health condition is higher at 64% than the local and national averages of 53% and 54% respectively.

Information published by Public Health England rates the level of deprivation within the practice population group as five on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

There are two male GP partners. The practice also employs a practice nurse and health care assistant (both female) as well as a pharmacist for one day per week. Non-clinical staff consisted of a practice manager, a Quality and Outcomes Framework (QOF) manager, a finance manager, office manager and a number of administrative and reception staff. One of the reception staff team has commenced training to become a phlebotomist (taking blood samples).

Bredbury Medical Practice is a teaching practice, supporting medical students.

The practice reception opens at 8.00am Monday to Friday, and closes at 6.30pm on Tuesdays and Thursdays. The practice closed its doors at 6.00pm on Mondays, Wednesdays and Fridays, however patients could still telephone the practice for an appointment or advice until 6.30pm.

GP appointments are offered between 7.30am and 11.30am each morning on Tuesdays, Wednesdays and Thursdays and on Fridays and Mondays between 8.00am and 12 midday. Afternoon GP appointments are offered from 3.30pm on Mondays and Fridays, from 4.00pm on Tuesdays and Thursdays and from 5pm on Wednesdays.

Appointments are provided until 6pm each evening except on Tuesdays when appointment are available until 9pm. Routine appointments are not offered on a Wednesday afternoons, but the reception and GPs are available for patients visiting the practice and requiring an urgent appointment.

The practice provides a range of on the day, urgent and prebookable routine appointments and there is provision for children to be seen the same day. The practice provides online patient access that allows patients to book appointments and order prescriptions.

## Detailed findings

When the practice is closed, patients are able to access out of hour's services offered locally by the provider Mastercall.

# Are services effective?

(for example, treatment is effective)

## Our findings

### **We rated the practice as good for providing effective services.**

At our previous inspection on 26 July 2017, we rated the practice as requires improvement for providing effective services as there was no planned program of clinical audit and further improvements regarding reviews of patients, including those with long term conditions, were required.

These arrangements had significantly improved when we undertook a desk top follow up inspection on 19 February 2018. The practice is now rated as good for providing effective services.

### **Management, monitoring and improving outcomes or people.**

- At the inspection in July 2017, achievements in undertaking reviews of patients with long term conditions required further improvement.
- When we inspected in February 2018 we saw that the practice had taken further action to address and monitor this. The practice used the information collected for the Quality and Outcomes Framework (QOF) and performance against national screening programmes to monitor outcomes for patients (QOF is a system intended to improve the quality of general practice and reward good practice). A QOF Manager was appointed with responsibility for monitoring the

practice's progress and operating the patient recall system. Monthly clinical meetings focussed on current QOF figures were used to review and assign actions to improve this.

Unverified figures for 2017/2018 submitted by the practice showed an overall improvement. Despite not being yet at year end, 95% of the total number of points available had been achieved in comparison to 92% in 2016/2017. A sample of indicators for Cervical Screening, COPD (Chronic Obstructive Pulmonary Disease) and Depression all showed local targets were exceeded over a month prior to the end date for submission. For example, the practice uptake for cervical screening programme currently stood at 82%, an increase of 10% from 2016/2017 figures.

- In June 2017, two clinical audits demonstrated quality improvement, but there was no planned programme of clinical audit and reaudit.
- When we inspected in February 2018 we found that a comprehensive plan of audit and reaudit in areas such as COPD rescue medication and UTI (Urinary Tract Infection) treatment, was in place.

We also found that the practice was continuing to promote the Patient Participation Group (PPG) with patients. A Carers Champion had been appointed to oversee and encourage patients to register as carers. The current number of patients identified as carers was 36 however this was still less than 1% of the patient list.