

# Ashwell Medical Centre

## **Inspection report**

Ashwell Road Manningham Bradford BD8 9DP Tel: 01274495879 www.ashwellmedicalcentre.co.uk

Date of inspection visit: 28 September 2021 Date of publication: 14/10/2021

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?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Good	

## Overall summary

We carried out an announced inspection at Ashwell Medical Centre on 23 and 28 September 2021. Overall, the practice is rated as Good.

The ratings for each key question are:

Safe - good

Effective – good

Caring - good

Responsive - good

Well-led - good.

The practice was inspected on 13 February 2019 and was rated as requires improvement overall and requires improvement for providing caring and responsive services. All of the population groups were rated as requires improvement.

A comprehensive follow-up inspection was completed on 10 March 2020. Following this inspection, the practice was rated as requires improvement overall and requires improvement for providing safe, effective and well-led services. The population groups; families, children and young people and working age, were also rated as requires improvement. We rated caring and responsive as good.

The full reports for previous inspections can be found by selecting the 'all reports' link for Ashwell Medical Centre on our website at www.cqc.org.uk

At this inspection we rated the practice as good overall and good in all five key questions. We rated all the population groups as good.

#### Why we carried out this inspection

This inspection was a comprehensive follow-up inspection to check that improvements had been made in respect of concerns and issues identified at our previous inspection.

At the last inspection in March 2020, breaches of regulation 12, safe care and treatment and regulation 17, good governance of the Health and Social Care Act 2008 (regulated activities) Regulations 2014 were found and it was noted that the practice should make the following improvements:

- Continue to encourage and improve uptake rates for childhood immunisations.
- Continue to encourage and improve uptake rates for cancer screening programmes, particularly those relating to cervical screening.
- Develop systems to monitor and track referrals.
- Improve systems for reviewing complaints and concerns to ensure learning arising from these is captured and embedded into processes for continuous improvement.

#### How we carried out the inspection.

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Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

#### This included:

- Completing clinical searches of the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A site visit
- Requesting staff complete feedback forms.

During the site visit we conducted interviews with the registered manager and lead GP, the business manager, the assistant manager, the lead nurse, patient engagement lead, the referrals lead and the data quality manager.

#### **Our findings**

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, the public and other organisations.

#### At this inspection we found:

- At this inspection we found that the provider had responded to the previous concerns and breaches of legislation. We saw that improved systems and processes supported good governance.
- During the inspection we found that the actions which the practice were taking to encourage the uptake of immunisations and cancer screening supported good care. We found that improvements had been made in the uptake rates for childhood immunisations, bowel and breast screening.
- The provider had developed a system to monitor and track referrals. We saw that patients were supported through the process of choosing and making an appointment in secondary care.
- The support offered by the team to a local nursing home was described by the home manager as exceptionally positive. We were told that nothing was too much trouble for the team, weekly reviews were carried out and visits made on request throughout the COVID-19 pandemic.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a variety of ways at a time to suit them.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.
- We saw that the practice was managing complaints as per their policy and these were used to drive improvement.

#### We saw an area of outstanding practice:

• End of life care was person-centred, family orientated and delivered in a culturally sensitive and coordinated manner. When a terminal diagnosis was received, the GP, patient engagement lead and a community team member visited the

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patient at home. This appointment aimed to identify a named family contact to ease communication with the practice and begin difficult conversations regarding the person's wishes. For example, this included offering advice regarding benefits and available support, do not resuscitate orders and a preferred place of death discussion. The family were also offered a copy of the newly implemented practice protocol for managing bereavement and continued support.

Whilst we found no breaches of regulations, the provider **should**:

- Review historical safety alerts to reduce the potential for error with patients who take a combination of medicines which may interact with each other.
- Take steps to improve the recording of meeting minutes, to provide enough information to update those staff who were unable to attend the meeting.
- Continue to encourage and improve uptake rates for childhood immunisations.
- Continue to encourage and improve uptake rates for cancer screening programmes, particularly those relating to cervical screening.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

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	Good
Families, children and young people	Good
Working age people (including those recently retired and students)	Good
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 inspector and a second CQC inspector who undertook a site visit. The team also included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and a records review without visiting the location.

## Background to Ashwell Medical Centre

Ashwell Medical Centre is located in the city of Bradford, West Yorkshire at:

Ashwell Road,

Manningham,

Bradford.

West Yorkshire,

BD8 9DP

Tel:01274495879

www.ashwellmedicalcentre.co.uk

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease and disorder or injury and surgical procedures.

The practice is situated within the NHS Bradford District and Craven Clinical Commissioning Group (CCG) and delivers Personal Medical Services (PMS) to a patient population of 7,914 people.

The practice is part of a wider Primary Care Network (PCN) of four local GP practices. This is a group of practices who work together to focus and improve local patient care and provide care closer to patients' homes.

Ashwell Medical Centre is a training practice and staff within the team are accredited GP trainers and appraisers. The nursing team are also able to offer opportunities for newly qualified nursing staff to train as practice nurses.

Information published by Public Health England report deprivation within the practice population group as level one, on a scale of one to 10. Level one represents the highest levels of deprivation and level 10 the lowest.

At the time of our inspection in September 2021, extensive improvement and building works were in place at the practice. This will allow the provider to improve facilities and increase capacity for service delivery.

The age profile of the practice population shows a higher than average number of younger people, with 33.5% of the practice population being aged under 18 years, compared to the CCG average of 24% and a national average of 20%.

Average life expectancy for the practice population is 75.4 years for males and 80.3 years for females (CCG average is 77.7 years and 81.8 years respectively, and the England average is 79 years and 83 years respectively). The ethnicity of the practice population is predominantly Asian (71%) with 78.5% of the local population belonging to a BAME (black and minority ethnic) population group.

There is a team of three GP partners and two salaried GPs, three of whom are female. The practice has a team of two nurses who provide nurse-led clinic's for long-term conditions with PCN led pharmacy support. There is also a female advanced pharmacy practitioner and two part-time healthcare assistants.

The clinical team are supported by a business manager, an assistant manager, a data quality lead and a team of reception and administration staff.

Due to the enhanced infection prevention and control measures in place since the COVID-19 pandemic and in line with the national guidance, GP appointments are offered following clinical triage of the patient's needs. When required, face-to-face appointment are available.

Patients can also access services via e-consultations, telephone consultations and video calls.

Extended access appointments are available between 6.30pm and 8pm on weekdays and between 9am and 11am at weekends. These are provided at three hub locations within the city.

Out of hours services are provided by Local Care Direct.