

# Dr R D Gilmore and Partners

## Inspection report

Bellmount Close  
Bramley  
Leeds  
LS13 2UP  
Tel: 01132394416  
[www.manorparksurgery.co.uk](http://www.manorparksurgery.co.uk)

Date of inspection visit: 26 May 2021  
Date of publication: 18/06/2021

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



# Overall summary

We carried out an announced review of Dr R D Gilmore and Partners on 26 May 2021. Overall, the practice is rated as Good.

Dr R D Gilmore was inspected on 15 March 2018 and rated as good overall, and requires improvement for providing well led services. A follow up inspection 8 November 2018, rated the practice as good for providing well led services and the practice remained good overall. However, the practice was rated as requires improvement for providing services to people within the population group of long-term conditions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Dr R D Gilmore and Partners on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## **Why we carried out this review.**

This was a follow-up review of concerns identified during the last inspection in November 2018.

The focus of this review was:

- To review the services provided to people with long-term conditions and the outcomes for these patients using Quality and Outcomes Framework (QOF) performance.

## **How we carried out the inspection/review**

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 reviews differently.

This review was carried out off site. This was with consent from the provider and in line with all data protection and information governance requirements.

Our approach included:

- Conducting staff interviews via tele-conference.
- Reviewing performance data available at the time of our inspection.

## **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.

**This practice remains rated as good overall. Following this focused review, we have rated the practice as good for providing care for the population group, long-term conditions.**

We found that:

- For those patients with long-term conditions; their needs were risk assessed, and care and treatment was delivered in line with current legislation, standards and evidence-based guidance supported by clear pathways and tools.

# Overall summary

- The practice continually reviewed and adjusted how it delivered services to meet the needs of patients with long-term conditions during the COVID-19 pandemic. Patients could access care and treatment in a timely way. Outcomes for patients with long-term conditions were comparable to local clinical commissioning group (CCG) and national averages.
- Throughout the pandemic, patients with long-term conditions were recalled as appropriate. Patients were proactively contacted using text messages and latterly were contacted personally by healthcare assistants (HCAs) as the practice noted a positive response to this. Clinicians opportunistically used all patient contacts to carry out reviews.
- Face-to-face appointments were offered when clinically necessary.
- Focusing on healthy living principles, the practice worked in a multidisciplinary manner to ensure that patient needs were met. Working collaboratively with their local Primary Care Network (PCN) and utilising digital technologies, patients could access appointments with occupational therapists, social prescribers, dieticians and domestic violence workers. We were given an example of where, when safeguarding concerns were highlighted with a patient, a multi-disciplinary video conference was convened with relevant professionals within two hours.

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

- Continue to closely monitor personalised care adjustments for patients with diabetes.

## **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

<b>Older people</b>	<b>Not inspected</b> 
<b>People with long-term conditions</b>	<b>Good</b> 
<b>Families, children and young people</b>	<b>Not inspected</b> 
<b>Working age people (including those recently retired and students)</b>	<b>Not inspected</b> 
<b>People whose circumstances may make them vulnerable</b>	<b>Not inspected</b> 
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Not inspected</b> 

## Our inspection team

This inspection was led by a CQC lead inspector who spoke with staff using telephone conferencing facilities.

## Background to Dr R D Gilmore and Partners

Dr R D Gilmore and Partners provide services from Manor Park Surgery, which is located on Bellmount Close, Bramley, Leeds, LS13 2UP.

The surgery is a purpose built, two storey building with on-site parking facilities, including dedicated spaces for those with limited mobility.

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

The practice is situated within the Leeds Clinical Commissioning Group (CCG) and delivers Personal Medical Services (PMS) to a patient population of about 14,505. This is part of a contract held with NHS England.

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

The National General Practice Profile states that 94% of the practice population is from a White British background, approximately 6% of the population are from a black, Asian or mixed background. Male life expectancy is 76.4 years, compared to the national average of 79 years. Female life expectancy is 81.5 years, compared to the national average of 83 years.

Figures show that 62.9% of patients are in paid work or full-time education, this is comparable to the national average of 63.7% but lower than the CCG average of 66.8%. The percentage of patients who experience a long-standing health condition is 68.7%, which is higher than the CCG average of 51.5% and the national average of 52.4%.

The age distribution of the practice population generally mirrors the national averages. However, there are more patients aged 25-39 than the national average and less female patients aged 15-29 than the CCG average.

The service is provided by four GP partners (three male and one female) and six salaried GPs (all female). The GPs are supported by an advanced nurse practitioner, a senior practice nurse, four practice nurses and six health care assistants (HCAs) (two of which are apprentice HCAs), and are all female. The clinical team are supported by a subsidiary company which provides all non-clinical support services including booking services, front desk reception staff, human resources, payroll and practice management functions.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments are telephone consultations. Face to face appointments are offered when clinically necessary in line with government guidance and social distancing measures.

The practice reception desk is open between 7.30am and 7pm Monday to Thursday and 7.45am and 7pm on Fridays. Appointments with clinicians are available between 7.30am and 6pm. After 6pm the practice has a contract with Local Care Direct, who provide out of hours services for patients. Extended access appointments are available at the surgery between the hours of 7.30am and 8am Monday to Friday.

The practice is part of the West Leeds Primary Care Network (PCN). This offers patients access to appointments in the evenings through the week Monday to Friday from 6.30pm to 8pm and from 8am until 1pm on Saturday and 8am until 12pm on Sunday at the Gables Surgery in Swinnow, Leeds.