

# Neasden Medical Centre

## Inspection report

21 Tanfield Avenue  
London  
NW2 7SA  
Tel: 02082080306

Date of inspection visit: 22 June 2023  
Date of publication: 01/11/2023

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	Requires Improvement	
Are services safe?	Good	
Are services effective?	Requires Improvement	
Are services caring?	Good	
Are services responsive to people's needs?	Requires Improvement	
Are services well-led?	Good	

# Overall summary

We carried out an announced comprehensive inspection at Greenhill Medical Centre from 21-23 June 2023. Overall, the practice is rated as requires improvement.

Safe - good

Effective - requires improvement

Caring - good

Responsive – requires improvement

Well-led - good

We have not previously inspected the practice since it became a partnership. Prior to that the service was provided by one of the current partners as an individual provider and was inspected. We previously inspected the practice on 7 December 2020 when it was rated requires improvement overall. It was rated requires improvement for providing safe, effective, caring, responsive and well-led services. We carried out a follow-up visit on 21 October 2022 to check that the practice had addressed breaches of regulations. We did not rate the practice at that time.

During the inspection process, the practice highlighted efforts they are making to improve access to the service in response to increased patient demand after the COVID-19 pandemic. These had only recently been implemented so there was not yet verified evidence to show the impact, for example, in the national GP patient survey results.

## Why we carried out this inspection

The practice partnership was newly registered in April 2023. This inspection was the first inspection following the change in registration. At this inspection, we covered all key questions:

- Are services safe?
- Are services effective?
- Are services caring?
- Are services responsive?
- Are services well-led?

## How we carried out the inspection/review

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit.

# Overall summary

The service operates from a main and branch surgery. The branch surgery is registered as a separate location with CQC although patients may use either location. The findings of this report relate primarily to the service provided at Neasden Medical Centre where these can be separated, for example, in relation to premises-based observations and risk assessments.

## 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.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs. However, the practice was still underperforming on cervical cancer screening and childhood immunisation targets.
- Staff were able to provide examples of how they treated patients with kindness and respect. The practice had improved its scores in relation to patient experience.
- Patients could access care and treatment in a timely way, prioritising patients with more urgent needs. However, patient feedback about access was variable. The practice had adjusted its appointment system in response to patient feedback.
- The way the practice was led promoted the delivery of high-quality, person-centre care..

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

- Continue to monitor patient experience of access and make adjustments as required.
- Follow-up patients with asthma in line with guidelines if they have received 2 or more courses of rescue steroids in the previous 12 months.
- Take action to improve its performance in relation to cervical screening and childhood immunisation targets.
- Make arrangements to inform staff about a freedom to speak up guardian.
- Take action to expand the patient participation group.

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

**Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA**

Chief Inspector of Health Care

## Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit with a second CQC inspector. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to Neasden Medical Centre

The Neasden Medical Centre is located at 21 Tanfield Avenue, London, NW2 7SA.

The provider also runs a branch practice at Greenhill Park, London, NW10 9AR which is registered with CQC as a separate location.

The practice provides NHS services through a General Medical Services (GMS) contract to around 9000 patients living in the areas of Harlesden and Neasden in North West London. The practice is part of the North West London Integrated Care Service and part of the North Brent Primary Care Network.

The practice is run by a partnership of two GPs and employs 5 sessional GPs, two practice nurses and two clinical pharmacists. The administration team is led by a practice manager and includes several administrators and reception staff. Two receptionists are trained to carry out phlebotomy duties and one is a trained healthcare assistant. The practice also has access to associated staff through its membership of the primary care network, for example an additional clinical pharmacist, mental health worker and a social prescriber.

The practice population is in the seventh most deprived decile in England. There is a higher than average proportion of patients between 15 and 44 years of age. The population is ethnically diverse with around a third of patients identifying as white.

The practice reception is open at the main and branch sites Monday to Friday between 8.00am and 6.30pm. Patients may book appointments by telephone, through an online 'e-consultation' form or in person. Weekend and evening primary care appointments are also available at other sites in Brent.

When the practice is closed, patients are directed to contact the local out of hours service via NHS 111. This information can be accessed on the practice website.

The practice is registered with CQC to carry out the following regulated activities: diagnostic and screening procedures; treatment of disease, disorder or injury and surgical procedures.