

Bilborough Medical Centre

Inspection report

48 Bracebridge Drive
Nottingham
NG8 4PN
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www.ncgpa.org.uk

Date of inspection visit: 11 November 2021
Date of publication: 11/01/2022

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 Bilborough Medical Centre on 11 November 2021. Overall, the practice is rated as Good.

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

Following our previous inspection on 16 January 2020, the practice was not rated for effective and responsive services, and rated good for safe, caring and well led services.

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

Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on:

- All key questions in order to give the practice an overall rating
- Areas identified as 'shoulds' at the previous inspection

How we carried out the inspection

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:

- Conducting staff interviews using video conferencing
- Completing clinical searches on 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 short site visit.

Our findings

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

Overall summary

- 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 have rated this practice as Good overall.

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.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- 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 timely way.
- The leadership, governance and culture were used to drive and improve the delivery of high quality person-centred care.
- Leaders had an inspiring shared purpose and strived to deliver and motivate staff to succeed. They actively promoted a culture of innovation and continuous improvement. For example, the practice piloted an automatic booking system for booking appointments for specific clinics such as cervical screening. They sent text messages containing a link to the appointment slots available. This enabled patients to choose convenient times for them and book the appointment instantly without having to telephone the practice first. The booking system was further used to invite patients to COVID-19 vaccinations. This resulted in increased uptake of cervical screening and vaccinations and reduced non-attendance drastically.
- The strategy and supporting objectives were stretching, challenging and innovative, while remaining achievable. The vision and values of the provider organisation were mirrored and embedded in the practice.

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

- Establish a patient participation group to enhance engagement with patients.
- Continue their work to improve uptake of childhood immunisations and 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

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. 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 Bilborough Medical Centre

Bilborough Medical Centre is located in Nottingham City at:

48 Bracebridge Drive

Bilborough

Nottingham

Nottinghamshire

NG8 4PN

The practice has a branch surgery at:

Assarts Farm Medical Centre

8 Upminster Road

Nuthall

Nottingham

Nottinghamshire

NG16 1PT

Only the Bilborough Medical Centre site was visited as part of this inspection activity.

The provider, Nottingham City GP Alliance (NCGPA) is a federation of 41 member practices in the Nottingham City area, and is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury, family planning and surgical procedures. These are delivered from both sites.

The practice offers services from both a main practice and a branch surgery. Patients can access services at either surgery.

The practice is situated within the Nottingham City Clinical Commissioning Group (CCG) and delivers Alternative Provider Medical Services (**APMS**) to a patient population of about 10,700. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices called the BACHS primary care network (PCN).

Information published by Public Health England shows that deprivation within the practice population group is in the lowest decile (one of 10). The lower the decile, the more deprived the practice population is relative to others.

The age distribution of the practice population closely mirrors the local and national averages. There are slightly more male patients registered at the practice compared to females.

The clinical team is led a clinical lead who is non-patient facing GP. There is a team of eight GPs who provide cover at both practices, two pharmacists and an advanced nurse practitioner who is also the nurse manager. The practice has a team of three nurses who provide nurse led clinics for long-term conditions, two healthcare assistants and a phlebotomist. The GPs are supported at the practice by a team of reception/administration staff. The practice operations manager is supported by a systems manager and a development lead manager. Additional staff who are employed through the PCN also work at the practice. These include pharmacists, a pharmacy technician and social prescribing link worker.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, GP appointments included telephone consultations. Patients were offered face-to-face appointments if they needed one at either the main GP location or the branch surgery.

Extended access is provided by the practice themselves, and locally through their PCN and by the NCGPA GP+ service, where late evening and weekend appointments are available. Out of hours services are provided by 111.