

# Brigstock Medical Centre

## Inspection 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 location

Good



Are services safe?

Good



# Overall summary

We carried out an announced desk based, focussed inspection on 4 June 2020 at Brigstock Medical Centre as a follow up of our inspection carried out in May 2019. We are mindful of the impact of COVID-19 pandemic on our regulatory function. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so.

At the inspection carried out in May 2019 we rated the service as good overall and as requires improvement in Safe because we identified one regulation 12 breach (safe care and treatment). This was because we found that disclosure and barring checks had not been completed for some clinical staff.

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

- what we found when we inspected from what the provider sent us
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

**Following this inspection we have rated the Safe key question as good. The ratings for other key questions remained good and the practice remained rated good overall and good for all population groups.**

We rated this service as good for providing safe services because:

- All staff members had DBS checks completed and logged at the service.

- Areas of high QOF exception reporting and low QOF scoring were being audited and reviewed to improve performance and ensure that exception reporting is appropriate.

- The service had improved its uptake of childhood immunisations and bowel screening.

- Non clinical staff had been given training in gaining child consent.

- New mechanisms had been implemented to engage with patients and obtain feedback used to improve the quality and satisfaction with the service provided.

- Systems had been improved to record minutes of meetings.

- Alternative premises were noted as part of the practice's business continuity arrangements and included contact information for all staff.

- Arrangements were in place to assess and address risks associated with legionella and to monitor the work undertaken by contract cleaning staff.

- Information for organisations who can escalate complaints from patients was included in complaint responses.

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

**Please refer to the detailed report and the evidence tables for further information.**

## Our inspection team

Our inspection was lead and completed by one inspector.

## Background to Brigstock Medical Centre

Brigstock Medical Centre is located at 141 Brigstock Road, Thornton Heath, London, CR7 7JN

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

Brigstock Medical Centre is situated within Croydon Clinical Commissioning Group (CCG) and provides services to approximately 16,000 patients under the terms of a personal medical services (PMS) contract. This is a contract between general practices and NHS England for delivering services to the local community. Six doctors work at the practice: four male and two female. Four of the doctors are partners, with a pharmacist partner, and there are two salaried GPs (one male and one female). Some of the GPs work part-time. The combined GP working hours are the equivalent of five full-time GPs.

The (all female) nursing team is made up of a nurse prescriber, three practice nurses and three health care assistants. In addition to the pharmacist partner,

there is also a salaried pharmacist. The practice also employs a full-time physician associate. The practice trains junior doctors as GPs, and takes medical students, student nurses and physician associates for placements.

The practice has a higher proportion of children and working age patients compared to the local and national average. The proportion of patients over the age of 65 is half the national average. The percentage of patients not in employment is around three times the national average and the practice has a slightly lower proportion of patients with long standing health conditions. The National General Practice Profile states that 60% of the practice population is from a black or minority ethnic background with 34% identifying as black and 25% as Asian. Information published by Public Health England rates the level of deprivation within the practice population group as three, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. The practice has comparable levels of deprivation affecting older people and higher rates of deprivation affecting young people compared to the national average.