

The Gamston Medical Centre

Inspection report

Gamston District Centre
Gamston
Nottingham
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Date of inspection visit: 24 May 2022
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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 

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 The Gamston Medical Centre on 24 May 2022. Overall, the practice is rated as Good.

Set out the ratings for each key question

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

Why we carried out this inspection

This was a comprehensive inspection as this location had been registered by CQC following a change in service provider.

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 clinical 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:

- 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:

Overall summary

- 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.
- The culture of the practice and the way it was led and managed drove the delivery and improvement of high-quality, person-centred care.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- There was a strong emphasis on learning and sharing outcomes with the whole team and external organisations to promote best practice.
- All opportunities for learning from internal and external incidents were maximised. All learning was shared with staff regularly.
- Leaders demonstrated they had the capacity and skills to deliver high quality, sustainable care.
- There was effective leadership at all levels which supported innovation, implementation of processes and the continuous monitoring of patient care.
- There was continuous commitment to patients and external stakeholders to share information, ideas and improvements. This included the development of new services and an audit programme to drive quality improvement.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. This included enhanced infection control procedures.
- There was emphasis on staff wellbeing, and this was demonstrated through discussions with staff and evidence of appraisals. Staff were encouraged to develop and were provided with training opportunities.
- Risk management processes were in place and we found assessments of risks had been completed. These included fire safety, health and safety, and infection control. This ensured that risks had been considered to ensure the safety of staff and patients and to mitigate any future risks.

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

- Strengthen current systems for the reviewing of medicines before prescribing.

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 and undertook a site visit. The team included a GP specialist advisor who spoke with clinical staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to The Gamston Medical Centre

The Gamston Medical Centre is located in Nottingham at:

Gamston District Centre

Gamston

West Bridgford

Nottingham

NG2 6PS

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 Nottingham and Nottinghamshire Clinical Commissioning Group (CCG) and delivers General Medical Services (**GMS**) to a patient population of about 6000. This is part of a contract held with NHS England.

The practice is part of PartnersHealth, a group of eleven practices in the Nottinghamshire area. Due to the size of PartnersHealth, they have formed their own primary care network. PartnersHealth provides a senior management and leadership team to support the practices within the organisation. This includes access to human resources and access to centralised resources. At Gamston Medical Centre there is a Lead GP, who is supported by five GPs. There are three nurses, including a nurse prescriber and a health care assistant. The clinical team is supported by a team of administration and reception staff and an team leader who oversees the day to day running of the practice and a practice manager who provides managerial oversight.

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

According to the latest available data, the ethnic make-up of the practice area is 88.2% White, 7.9% Asian, 1.1% Black, 2.8% Mixed. The age distribution of the practice population is lower for ages 65 years and above in comparison to the local and national averages.

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 were telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered an appointment.

When practice is closed, patients could access appointments through the primary care network from 6.30pm to 8pm Monday to Friday and 8.30am to 12.30pm Saturday and Sunday. Outside of these hours patients were directed to NHS 111.