

Gladstone Medical Centre

Inspection report

5 Dollis Hill Lane London NW2 6JH Tel: 02081029108 www.gladstonemedicalcentre.nhs.uk

Date of inspection visit: 20 November 2019 Date of publication: 10/01/2020

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? | Good | |
| Are services well-led? | Good | |

Overall summary

We carried out an announced comprehensive inspection at Gladstone Medical Centre on 20 November 2019 as part of our inspection programme.

At this inspection, we followed up on breaches of regulations identified at a previous inspection on 3 October 2018. Previous reports on this practice can be found on our website at: https://www.cqc.org.uk/location/1-646669600.

At this inspection, we found that the practice had demonstrated improvements in most areas.

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 and good for all population groups, with the exception of working age people (including those recently retired and students) which is rated as requires improvement.

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- The practice routinely reviewed the effectiveness and appropriateness of the care it provided.
- The practice's uptake of the national screening programme for cervical, breast and bowel cancer screening and childhood immunisations rates were below the national averages.
- The practice did not have any formal monitoring system in place to assure themselves that blank prescription forms for use in printers were recorded correctly, and records were maintained as intended in line with national guidance.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

- The practice organised and delivered services to meet patients' needs. Feedback from most patients reflected that they were able to access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care.
- Staff had the skills, knowledge and experience to deliver effective care and treatment.
- Information about services and how to complain was available.
- The practice was aware of and complied with the requirements of the Duty of Candour.
- There was a strong focus on continuous learning and improvement at all levels of the organisation.

We rated all population groups as **good** for providing responsive services. We rated all population groups as **good** for providing effective services, with the exception of working age people (including those recently retired and students) which are rated as **requires improvement**, because of low cervical screening rates.

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

- Continue to encourage and monitor the childhood immunisation, cervical, breast and bowel cancer screening uptake.
- Promote the awareness of the documented fire evacuation plan.
- Review the governance arrangements to ensure effective monitoring of blank prescription forms in line with national guidance.
- Continue to review and monitor the exception reporting for diabetes related indicators.
- Consider to carry out formal analysis of internal surveys carried out by the practice and develop an action plan if required.

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

| Older people | Good | |
|---|-----------------------------|--|
| People with long-term conditions | Good | |
| Families, children and young people | Good | |
| Working age people (including those recently retired and students) | Requires improvement | |
| People whose circumstances may make them vulnerable | Good | |
| People experiencing poor mental health (including people with dementia) | Good | |

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor, a practice manager specialist advisor and second CQC inspector.

Background to Gladstone Medical Centre

Gladstone Medical Centre is a GP practice located in North West London and is part of the Brent Clinical Commissioning Group (CCG). The practice is located in converted premises. The practice is part of the Primary Care Network (PCN) since July 2019.

The practice provides NHS services through a General Medical Services (GMS) contract to 9,260 patients. This is a contract between general practices and NHS England for delivering services to the local community.

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

The practice is in discussion with the NHS North West London and the Care Quality Commission to resolve the ongoing commissioning and contracting arrangements which affect the provider's registration. On the day of the inspection, we find only one of the three partners (according to the current CQC registration) has been managing the practice as a principal GP.

Currently, there is one principal GP, supported by two salaried GPs, three locum GPs and two trainee GPs at the practice. The practice offers 40 GP sessions per week (including 12 trainee GP sessions). The practice employs two practice nurses, a phlebotomist and two health care assistants. The principal GP is supported by three senior administrators and a team of administrative and reception staff. The practice does not employ a practice manager.

This is a training practice, where a doctor who is training to be qualified as a GP has access to a senior GP throughout the day for support. We received positive feedback from the trainee GP we spoke with.

The practice population of patients aged between 5 to 14 and under 18 years old is higher than the national average and there is a lower number of patients aged above 65 years old compared to the national average.

Ethnicity based on demographics collected in the 2011 census shows the patient population is ethnically diverse and 61% of the population is composed of patients with an Asian, Black, mixed or other non-white background.

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.