

# West Bridgford Medical Centre

## Quality Report

97 Musters Road  
West Bridgford  
Nottingham  
NG2 7PX

Tel: 0115 8837380

Website: [www.westbridgfordmedicalcentre.nhs.uk](http://www.westbridgfordmedicalcentre.nhs.uk)

Date of inspection visit: 6 June 2016

Date of publication: 23/06/2016

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 service

Good



Are services well-led?

Good



# Summary of findings

## Contents

### Summary of this inspection

	Page
Overall summary	2
The five questions we ask and what we found	3

### Detailed findings from this inspection

Our inspection team	4
Background to West Bridgford Medical Centre	4
Why we carried out this inspection	4

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of West Bridgford Medical Centre on 15 September 2015. We found that some requirements were not in place or sufficiently robust, and supporting evidence was not always available. After the comprehensive inspection, the practice wrote to us to say what they would do to meet the legal requirements and ensure that effective procedures were followed.

We undertook this focused inspection of the practice on 6 June 2016, to check that improvements had been made to meet legal requirements following our comprehensive inspection. We spoke with the practice manager and reviewed documents to demonstrate that the provider had taken action to address the issues identified at the last inspection.

Overall the practice is rated as good. Our findings across the areas we inspected were as follows:

- The practice had strengthened systems for assessing environmental and health and safety related risks. Monthly meetings were in place between the practice

manager and site manager to discuss site related issues. The practice was developing its own risk assessments when practice-specific concerns were identified.

- A designated infection control lead had been appointed. Infection control policies had been updated, and an infection control audit had been completed. Staff induction had been revised to include infection control awareness for all new staff.
- All staff had now received an annual appraisal. Appraisals had been documented and included personal objectives and a review of any training requirements.
- The appointment of a Practice Administrator had strengthened managerial capacity in the practice. The provider had reviewed succession planning arrangements for the future.
- The practice had a governance framework which supported the delivery of good quality care.

**Professor Steve Field (CBE FRCP FFPH FRCGP)**  
Chief Inspector of General Practice

# Summary of findings

## The five questions we ask and what we found

We always ask the following five questions of services.

### **Are services well-led?**

The practice is rated as good for being well-led.

The systems in place to enable the provider to have effective oversight of risk, enabling issues to be identified, assessed and mitigated had improved since our inspection on 15 September 2016.

For example, systems to manage the prevention and management of infection control had been enhanced by the appointment of a designated practice lead. Annual staff appraisals had been completed for all members of the team. Regular meetings had been established between the practice manager and site manager to facilitate communications on environmental and premises concerns. Succession planning arrangements had been reviewed to ensure service continuity and managerial capacity had been enhanced by the recruitment of a Practice Administrator.

**Good**



# West Bridgford Medical Centre

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection team included a CQC Inspector.

## Background to West Bridgford Medical Centre

The West Bridgford Medical Centre is located within West Bridgford Health Centre which also hosts a number of community based health care services. It is in a residential area close to the city centre of Nottingham.

There are approximately 4,279 patients on the practice list which is showing an increase in numbers of around 10% per year. There are a higher proportion of young children, and adults aged between their late twenties and early forties on the patient list compared with other practices in England. There is also a student population residing in the local area.

The practice has two GP partners (one male and one female) and a male salaried GP who provides input on one day each week. The practice are currently seeking further

GP recruitment to increase their capacity. There is a practice manager, a practice administrator, two practice nurses, phlebotomists, a pharmacist, medical secretaries, reception and administration staff.

The practice is open between 8.00am and 6.30pm Monday to Friday, with extended opening hours every Wednesday morning from 7am. Telephone and urgent appointments are available from 8.00am and general appointments are from 8.30am to 11.30am every morning, and 2pm to 6.00pm every afternoon.

The practice has a Personal Medical Service (PMS) contract and offers a range of enhanced services including minor surgery.

## Why we carried out this inspection

We undertook a focused inspection of West Bridgford Medical Centre on 6 June 2016. This inspection was carried out to check that improvements had been made to meet legal requirements following our comprehensive inspection on 15 September 2015. We inspected the practice against one of the five questions we ask about services: are services well-led? This was because the practice was not meeting certain legal requirements.

# Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

## Our findings

### Overview of well-led systems and processes

A comprehensive inspection of West Bridgford Medical Centre on 15 September 2015 found that some systems were not effective and did not enable the provider to have effective oversight of quality and risk. Following the inspection, the practice wrote to us to say what they would do to address the concerns, and said that changes would be put in place by 31 March 2016.

The inspection found that the following systems had been put in place to ensure that the provider had achieved a satisfactory level of compliance:

- Arrangements for identifying, assessing and monitoring risks had improved in that the practice was developing effective systems to ensure risk was identified, assessed and mitigated. For example, monthly meetings had been established with the site manager. A set agenda covered key issues such as building maintenance, fire protection and safety, and cleaning arrangements. Other items were added to the agenda as required, and notes were kept as a record of the discussions. The provider continued to find communications with their landlord problematic. However, we saw evidence that the provider had made significant efforts to improve this, and had engaged their Local Medical Committee (LMC) to support them with this task. The practice had started to develop its own practice specific risk assessments for areas such as manual handling. A fire evacuation had been arranged to take place in June 2016 to test the efficacy of fire procedures on site.
- A practice nurse had been identified as the infection control lead with clearly defined responsibilities, and these had been amended in the nurse's job description. The provider had developed links with the local infection prevention and control team, and the infection control lead at a neighbouring GP practice. This provided guidance and support with any emerging infection control concerns. An infection control course had been arranged for the practice nurse to enhance her skills and knowledge in the lead role. Practice infection

control policies had been updated since our previous inspection, and reflected the revised arrangements. An infection control audit had been completed and we observed clearly identified actions to address all of the issues that had been identified. Staff induction programmes had been updated to ensure that infection control was included as a topic to be covered for all new staff. The practice manager and practice nurse had a scheduled weekly meeting to review progress.

- The practice manager had received an appraisal in February 2016. Personal objectives had been agreed and the practice manager had been supported in attending a leadership event organised by the East Midlands Leadership Academy.
- The practice had made good progress with succession planning arrangements. A Practice Administrator had been appointed since our previous inspection. This had created additional managerial capacity and enabled the practice manager to focus on specific tasks. The Practice Administrator appointment had been acknowledged by other staff as being supportive to their own roles. The practice was proactively seeking the recruitment of an additional salaried GP, and the practice was reviewing their future requirements for practice nursing.
- The systems in place to ensure records for people working at the practice had been strengthened. For example, we observed that checks for locum GPs were robust and documented evidence was readily accessible.
- The practice had developed an effective system to cascade all alerts to relevant staff. The system ensured that staff members had to sign to say that they had read the alert and taken any action required.
- We saw certification that the provider had ensured that all medical equipment had been checked to ensure it was working properly in October 2015.
- Practice policies had been reviewed, for example to include local safeguarding contacts and referral details.
- Alerts had been added to the practice manager's calendar as a reminder for when any actions were required, for example, to complete an infection control audit.