

# Bramingham Park Medical Centre

## Inspection report

Lucas Gardens  
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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 responsive?

Good



# Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Bramingham Park Medical Centre on 25 October 2017. The overall rating for the practice was good with requires improvement for providing responsive services. The full comprehensive report on the October 2017 inspection can be found by selecting the 'all reports' link for Bramingham Park Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced focused inspection carried out on 10 August 2018 to confirm that the practice had made the recommended improvements that we identified in our previous inspection on 25 October 2017. This report covers our findings in relation to those improvements made since our last inspection.

Overall the practice is rated as good.

Our key findings were as follows:

- An action plan had been put in place to make improvements to the practice which included access and appointments, the telephone system and customer service.
- The practice and the patient participation group had completed their own surveys and questionnaires to identify areas for improvements.
- The NHS Friends and Family Test (FFT) was actively used to monitor patient satisfaction.

Additionally, where we previously told the practice they should make improvements our key findings were as follows:

- The practice had reviewed their list of carers and found that some were incorrectly identified. They now had 30 patients identified as carers which was less than 1% of the practice list size. These patients had an alert on their electronic computer record and they were informed of a bypass telephone number so they could contact the practice without waiting in a queue for the for their call to be answered. The practice had an identified carers champion, a carers noticeboard in the waiting area and written information was available to direct carers to the various avenues of support available to them. There was a carers café held every other month. All carers were offered an annual health check and flu vaccination.

There were areas of practice where the provider should make improvements:

- Continue to review patient satisfaction in response to changes made in the practice following the national GP patient survey.
- Continue to identify patients with caring responsibilities.

**Professor Steve Field** CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

## Population group ratings

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

## Our inspection team

The inspection was carried out by a CQC inspector.

## Background to Bramingham Park Medical Centre

Bramingham Park Medical Centre provides a range of primary medical services to the residents of Luton. The practice provides services from its purpose-built location of Bramingham Park Medical Centre, Lucas Gardens, Luton, Bedfordshire, LU3 4BG. The registered provider is Phoenix Primary Care Limited who have merged with The Practice Group, a company that provides services on behalf of the NHS. The practice has a registered manager in place. A registered manager is an individual registered with CQC to manage the regulated activities provided.

The practice population is predominantly white British with a higher than average number of patients under 19 years and between 30 to 35 years of age. There is a below average number of patients over 60 years of age. National data indicates the area is one of mid deprivation. The practice has approximately 5,900 patients and services are provided under an Alternative Provider Medical Services (APMS) contract, a locally agreed contract with NHS England and GP Practices.

### Why we carried out this inspection

We undertook a comprehensive inspection of Bramingham Park Medical Centre on 25 October 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good with requires improvement for providing responsive services. The full comprehensive report following the inspection in October 2017 can be found by selecting the 'all reports' link for Bramingham Park Medical Centre on our website at .

The practice employs one salaried GP, male, and two GPs, one male and one female, who are employed by The Practice Group on a sessional basis. The nursing team consists of an advanced nurse practitioner (ANP), two practice nurses and a health care assistant (HCA), all female. There is a team of reception and administrative staff led by a part time practice manager and an assistant practice manager.

The practice is open from 8am to 8pm on Mondays, Wednesdays and Thursdays, from 7.30am to 8pm on Tuesdays and Fridays and from 8.30am to 12.30pm on Saturdays and bank holidays apart from Christmas Day.

When the practice is closed out of hours services are provided by Herts Urgent Care and can be accessed via the NHS 111 service.

# Are services responsive to people's needs?

At our previous inspection on 25 October 2017, we rated the practice as requires improvement for providing responsive services as results from the national GP patient survey, published July 2017, showed that patient's satisfaction with how they could access care and treatment was below average in some areas.

**Although the practice remains below others in some areas of the GP patient survey, published August 2018, they had put in place many actions to make improvements when we undertook a follow up inspection on 10 August 2018. The practice is now rated as good for providing responsive services.**

## Timely access to the service

At the inspection in October 2017 results from the national GP patient survey, published July 2017, showed that patient's satisfaction with how they could access care and treatment was below the local and national averages in some areas. For example,

- 51% of patients said they could get through easily to the practice by phone compared to the CCG average of 57% and the national average of 71%.
- 55% of patients said that the last time they wanted to speak to a GP or nurse they were able to get an appointment compared with the CCG average of 75% and the national average of 84%.
- 48% of patients said their last appointment was convenient compared with the CCG average of 69% and the national average of 81%.
- 48% of patients described their experience of making an appointment as good compared with the CCG average of 60% and the national average of 73%.

The practice completed their own questionnaire in January and February 2018 that looked at access and appointments. They had 127 patient responses to the questionnaire which equated to approximately 2% of the practice population. The questionnaire was designed to gather views from patients to inform an action plan that the practice developed to make improvements. Questions included what types of appointments were usually booked, how appointments were booked and if patients would be happy to have an appointment with an advanced nurse practitioner (ANP).

The questionnaire also asked patients how easy it was to book the appointment they had made for the day they completed the questionnaire. The responses showed 83% found it average, easy or very easy to book the appointment.

The questionnaire asked if patients had seen any improvements at the practice in the past six months. The results showed 40% of respondents answered yes and 25% said they did not use the service frequently enough to comment. Positive comments included there were more consistent doctors at the practice and staff were more positive with greater efficiency. There were 35% of respondents who said they had not seen any improvements, with appointment booking the theme for negative comments.

Following the results of the GP patient survey and the practice's own questionnaire they completed an action plan that covered three themes,

- Access and appointments
  - They introduced an ANP role that provided approximately 25 appointments a day for minor illnesses and patients who could not attend during normal opening hours.
  - Early morning, evening and Saturday appointments were made available for patients to see a GP or a nurse.
  - Child Emergency appointments were created for children who had developed a sudden illness.
- The telephone system
  - Data available from the new telephone system identified the peak times that patients tried to access the service. Additional reception staff were recruited to answer the telephones at these times. Unverified data supplied by the practice showed that there had been an increase in calls answered from January when an average of 68% of calls were answered, to July when an average of 89% of calls were answered.
  - An SMS cancellation service was introduced to reduce calls into the practice when patients wanted to cancel an appointment.
  - SMS text messaging had also been introduced to inform patients of normal test results that had been reviewed by a GP.
  - The practice advertised the online booking of appointments.
- Customer service

## Are services responsive to people's needs?

- All members of the reception team had attended an external customer service training course for telephone etiquette. The practice informed us they had noticed a reduction in the number of verbal complaints received regarding customer service.
- Templates had been developed for the reception team to help them identify emergency symptoms and how to respond. They also had guidance to ensure they made the correct appointment, either with a GP, ANP or practice nurse, for patients.

Patients were kept informed of changes the practice have made via a 'You Said' 'We Did' noticeboard in the patient waiting area.

The patient participation group (PPG) had been involved in helping the practice make improvements. The PPG completed their own survey of patients in May 2018 that looked at patients' awareness of services offered and their use of the practice website, including online appointment booking. In response to the PPG survey the practice recorded patient email addresses in addition to telephone numbers to aid communication and they have limited

online appointment booking availability to two weeks in advance. The practice leaflet and display screens in the patient waiting area promoted the use of the website for online appointment booking.

We were informed at the October 2017 inspection that the practice made use of the NHS Friends and Family Test (FFT), however, at the time of the inspection they had no responses or data to share with us. (The NHS Friends and Family Test is a feedback tool that supports the principle that people who use NHS services should have the opportunity to provide feedback on their experience). At the inspection in August 2018 we noted that the practice had been promoting the FFT via text message and the reception staff. Between January and July 2018, the practice had received 322 responses. The results showed that 71% of patients said they would recommend our surgery to friends and family. Positive comments included that they reception staff were welcoming and tried to help patients, there had been improvements made with customer service and all staff are friendly.

**Please refer to the evidence tables for further information.**