

# Dr Peter Gini

## Quality 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 service

Good



Are services effective?

Good



# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out a focussed review inspection at Dr Peter Gini also known as Broadway Health Centre on 22 July 2016. The practice had previously been inspected in June 2015 and was rated as requires improvement for providing effective services. Staff performance and training needs were not identified and documented through a regular programme of annual appraisals for nursing staff. Following the inspection the practice sent us an action plan detailing the action they were going to take to improve.

We returned to the practice to consider whether improvements had been made in response to our previous inspection. We found the practice had made

improvements and is now rated as good for providing effective services. This report should be read in conjunction with our previous inspection report for the practice.

Overall the practice is rated as good.

Our key findings across all the areas we inspected were as follows:

- Staff performance and training needs reviews were being carried out through a regular programme of annual appraisals.

**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 effective?**

The practice was able to demonstrate that they had made sufficient changes to improve.

Specifically:

- The practice had systems in place to ensure reviews of staff performance and training needs were being carried out through a regular programme of annual appraisals.

**Good**



# Summary of findings

## The six population groups and what we found

We always inspect the quality of care for these six population groups.

# Dr Peter Gini

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

This desk top review inspection was carried out by a CQC Lead Inspector.

### Background to Dr Peter Gini

Dr Peter Gini's practice is part of the Broadway Health Centre and is situated near the centre of Birmingham. The practice is part of the NHS Sandwell and West Birmingham Clinical Commissioning Group (CCG). CCGs are groups of general practices that work together to plan and design local health services in England. They do this by 'commissioning' or buying health and care services.

Dr Peter Gini is registered with the Care Quality Commission to provide primary medical services. The practice has a general medical service (GMS) contract with NHS England. Under the GMS contract the practice is required to provide essential services to patients who are ill and includes chronic disease management and end of life care.

The practice premises is purpose built building with all treatment and practice office areas on one floor. Based on data available from Public Health England, the practice is located in an area with the highest deprivation score.

The practice is open from 8am to 6.30pm Mondays to Fridays. Appointment are available from 9am to 12pm and 4pm to 6pm. Extended opening hours were offered on Mondays from 6.30pm to 8pm.

When the practice is closed during the out of hours period (6.30pm to 8am) patients receive primary medical services through an out of hours provider (Primecare).

The practice has two GP partners (both male). Other practice staff consist of a team of three nurses, a practice manager and a team of administrative staff.

The practice was previously inspected by CQC in September 2015.

### Why we carried out this inspection

We carried out a focussed desk top inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider had made improvements identified during the comprehensive inspection carried out in June 2015.

### How we carried out this inspection

We undertook a desk top review on 22 July 2016. This involved the review of relevant documentation we had asked the practice to submit to ensure improvements were made.

# Are services effective?

(for example, treatment is effective)

## Our findings

### Effective staffing

During our visit to the practice in June 2015 we looked at five staff files and found that appraisals were overdue for the two nurses and the reception team. We saw that the nurses' appraisal had not taken place since February 2012. The practice manager had recognised this prior to our inspection and had scheduled appraisals in for the reception team. When asked staff we spoke with told us that the GP would carry out the nurses' appraisals.

For our review in July 2016 we looked at appraisal documents for two nurse and three administrative staff including reception staff. We found that the practice had made improvements as records confirmed appraisals had been carried out for all staff within the last 12 months. Appraisal documents included a review of performance and training needs.