

Bramham Medical Centre

Inspection report

Clifford Road
Bramham
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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



Overall summary

We carried out an announced comprehensive inspection at Bramham Medical Centre on 15 February 2018. The overall rating for the practice was good; with a rating of requires improvement for providing safe services. The full comprehensive report for the February 2018 inspection can be found by selecting the 'all reports' link for Bramham Medical Centre on our website at .

In addition to the areas for improvement identified under the key question for providing safe services, at the inspection on 15 February 2018 we also said the practice should consider the following areas:

- Continue to review and improve the function of the patient participation group.
- Review exception reporting rates for the Quality and Outcomes Framework to assure themselves that patients are being excepted in line with the latest guidance.

This inspection was an announced focused inspection carried out on 10 July 2018 to confirm that the practice had made the required improvements identified at the previous inspection on 15 February 2018. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is rated as good.

At this inspection we found:

- The practice had clear systems and processes in place to monitor usage of both printed and blank prescriptions.

- The practice had reviewed the process for recording significant events and incidents. We saw minutes from practice meetings in which significant events had been discussed and learning had been shared with staff.
- We saw that fabric curtains in all of the treatment rooms had been replaced with disposable ones. The practice had a system in place to ensure these were replaced every six months.
- The practice had sourced additional training for the infection prevention and control (IPC) lead. Due to demand and staff availability, the first available course was March 2019. We saw evidence that the infection prevention and control lead had been booked to attend this course.
- The practice had introduced a standard operating procedure to address areas of high exception reporting rates for the Quality and Outcomes Framework.
- The practice had hosted two patient participation group meetings and was taking steps to increase interest from patients.

We saw one area where the provider should make improvements:

- The provider should ensure that the IPC lead attends, completes and implements learning from the additional IPC training that has been booked to support them in their role.

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

Please refer to the detailed report and the evidence tables for further information.

Our inspection team

Our inspection was carried out by a CQC lead inspector.

Background to Bramham Medical Centre

Bramham Medical Centre is located on Clifford Road, Bramham, Wetherby, LS23 6RN. Bramham is a village situated approximately three miles south of Wetherby and mid-way between Leeds and York. As the practice is situated in a rural location, they offer medicines dispensing services to their patients.

Bramham Medical Centre is housed in a single storey, converted bungalow with on-site parking facilities, including dedicated space for those with limited mobility. The practice is accessible to those patients with limited mobility, or those patients who use a wheelchair. The website address is

The practice is situated in the NHS Leeds Clinical Commissioning Group (CCG) and provides primary medical services under the terms of a General Medical Services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the

The practice provides General Medical Services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community. At the time of our inspection there were 3,507 patients registered on the practice list.

The Public Health National General Practice Profile shows the majority of the practice population to be of white British origin; with approximately 2% of the population to be mixed ethnic groups. The level of deprivation within the practice population is rated as ten, on a scale of one to ten. Level one represents the highest level of deprivation, and level ten the lowest.

The practice offers a range of enhanced services which include childhood vaccination and immunisations, minor surgery and extended hours.

Bramham Medical Centre is registered with the Care Quality Commission to provide the following regulated activities:

- Diagnostic and screening
- Family planning
- Maternity and midwifery
- Surgical procedures
- Treatment of disease, disorder or injury

The service is provided by two GP partners (one male and one female) and a business partner (female). At the time of our inspection the practice were in the process of adding an additional GP partner (male) to their registration with the Care Quality Commission. The partners work across two sites and are responsible for providing the contract at a sister site located in South Milford.

The partners are supported by three salaried GPs (one male and two female). The clinical team is completed by a nurse clinical lead, a practice nurse, two health care assistants and two phlebotomists.

The clinical team are supported by an experienced team of managerial and administrative staff.

The practice is open between 8am and 1pm and from 2pm until 6pm Monday to Friday. A range of appointments are offered between these hours.

In addition, extended hours are offered between the hours of 6pm until 8pm on Monday evenings.

Out of hours care is provided by Local Care Direct, which is accessed by calling the surgery telephone number, or by calling the NHS 111 service.

When we returned to the practice, we checked, and saw that the ratings from the previous inspection were displayed, as required, on the practice premises and on their website.

Are services safe?

We rated the practice as good for providing safe services.

At the last inspection in February 2018 we rated the practice as requires improvement for providing safe services. This was because:

- We found that there was no system in place to monitor usage of prescriptions.
- We were unable to see documented evidence of incidents being recorded, discussed and learning being shared with staff within the practice.
- The infection control lead had not received additional training to support them in the role and the provider did not keep a record of the regular cleaning of fabric curtains.

Safety systems and processes

The practice had clear systems to keep people safe and safeguarded from abuse.

- There was an effective system to manage infection prevention and control.
- We saw that fabric curtains in all of the treatment rooms had been replaced with disposable ones. The practice had a system in place to ensure these were replaced every six months or more frequently as required.
- The practice had sourced additional training for the infection prevention and control lead. Due to demand and staff availability, the first available course was March 2019. We saw evidence that the infection prevention and control lead had been booked to attend this course.

Appropriate and safe use of medicines

The practice had reliable systems for appropriate and safe handling of medicines.

- The practice had clear systems and processes in place to monitor usage of both printed and blank prescriptions. There was a documented log of all prescriptions received by the practice and of prescriptions issued to each clinical room.
- In addition; the practice had circulated a guidance document produced by the NHS Counter Fraud Authority to support staff with management and control of prescription forms.

Lessons learned and improvements made

The practice learned and made improvements when things went wrong.

- There were adequate systems for reviewing and investigating when things went wrong. The practice learned and shared lessons, identified themes and took action to improve safety in the practice.
- The practice had introduced monthly significant event meetings which were hosted at the sister practice at South Milford. This was to ensure as many people as possible could attend. Minutes of the meetings were circulated to staff by e-mail.
- We saw evidence of documented learning as a result of an incident and that this had been discussed at the significant event meeting.

Please refer to the evidence tables for further information.