

# The Practice Bowling Green Street

## Inspection report

29-31 Bowling Green Street  
Leicester  
LE1 6AS  
Tel: 01162047240

Date of inspection visit: 23 and 29 June 2022  
Date of publication: 19/07/2022

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 to people's needs?	Good	
Are services well-led?	Good	

# Overall summary

We carried out an announced focused inspection at The Practice Bowling Green Street. We carried out our remote searches on 23 June 2022 and an onsite visit on 29 June 2022. Following our review of the information available to us, including information provided by the practice, we focused our inspection on the following key questions: safe, effective and well-led. Due to assurances we received from our review of information, we carried forward the ratings for the following key questions: caring and responsive from our last inspection in December 2019. Overall, the practice is rated as good. It is rated as good in safe, effective, caring, responsive and well-led.

Following our previous inspection on 11 December 2020, the practice was rated requires improvement overall and for the key questions safe and effective. It was rated good for key questions caring, responsive and well-led.

The full reports for previous inspections can be found by selecting the 'all reports' link for The Practice Bowling Green Street on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

This inspection was a focused follow-up inspection to follow up on:

- The safe, effective and well-led key questions
- Areas identified for improvement at the last inspection:
- Some patients' records were not correctly coded.
- Not all patient records were updated in the practice system to provide assurance that appropriate monitoring was in place when blood tests were completed at hospital or elsewhere.
- Medicine reviews had not been completed for all patients.
- Screening figures of patients for cancer were lower than average for the practice population.
- Not all patients who would benefit from a care plan had one in place, and those that had were minimal in detail.
- Ratings carried forward from previous inspection which included the caring and responsive domains.

## How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system and discussing findings with the provider.
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A site visit.

## Our findings

We based our judgement of the quality of care at this service on a combination of:

# Overall summary

- what we found when we inspected.
- information from our ongoing monitoring of data about services.
- information from the provider, patients, the public and other organisations.

## **We have rated this practice as Good overall**

We found that:

- Staff told us they felt supported and valued in their work. Operational support for the practice had been strengthened and was welcomed by the practice staff.
- The provider understood the strengths and challenges relating to the quality and future of services.
- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Processes were in place to ensure high risk medicines were prescribed safely based on the the results of required blood tests.
- Medicine reviews were prioritised for those patients who were on controlled drugs, polypharmacy (multiple medicines) and high risk medicines.
- Improvements had been made to coding of patient notes and care plans were more detailed.
- Staff had the skills, knowledge and experience to carry out their roles. There was a system in place to monitor compliance with staff training. Staff were encouraged and supported to develop their skills and knowledge.
- Systems were in place to assure the provider of the competency of staff working in advanced roles.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- The practice was supported by the wider organisation, and staff were clear about the roles and responsibilities within the organisational structure.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

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

- Check that abnormal pathology results are viewed within 48 hours of receipt to reduce the risk of not following up patients and arranging repeat tests promptly.
- Review patients issued steroids for an asthma exacerbation within one week as per National Institute for Health and Care (NICE) guidance.
- Check the records of patients with potential missed chronic kidney disease (CKD) to correct any coding issues and ensure that all required monitoring checks are done.
- Provide patients with an updated mental health care plan.
- Continue to promote and drive the uptake of childhood immunisations and the national cancer screening programme with patients.
- Improve staff awareness of the range of events and occurrences that must be reported to the Care Quality Commission (CQC).
- Continue to promote and develop the patient participation group.

**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

## Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to The Practice Bowling Green Street

The Practice Bowling Green Street is located in Leicester City at:

29-31 Bowling Green Street

Leicester

LE1 6AS

The provider DHU Health Care C.I.C. is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, family planning, maternity and midwifery services, treatment of disease, disorder or injury, surgical procedures and Transport services, triage and medical advice provided remotely. These (with the exception of Transport services, triage and medical advice provided remotely) are delivered from the practice.

The practice is situated within the Leicester City Clinical Commissioning Group (CCG) and delivers Alternative Provider Medical Services (**APMS**) to a patient population of about 5,848. This is part of a contract held with NHS England.

The practice is part of Leicester Central Primary Care Network, a wider network of eight GP practices that work collaboratively to deliver primary care services.

Information published by Public Health England shows that deprivation within the practice population group is in the third lowest decile (two of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is, 52.3% White, 28.4% Asian, 8.5% Black, 4% Mixed, and 6.8% Other.

The age profile demonstrates a significantly lower proportion of older patients compared to the local and national averages, a lower number of working age patients compared to local and national averages, and a significantly higher proportion of young people compared to the local and national averages:

- The percentage of older people registered with the practice is 3.1% which is significantly lower the CCG average of 11.6%, and the national average of 17.7%.
- The percentage of working age people registered with the practice is 79.1% which is below the CCG average of 66.3%, and the national average of 62.4%.
- The percentage of young people registered with the practice is 17.8% which below the CCG average of 22.1%, and the national average of 20%.

There is a team of four GPs. The practice has a team of one locum practice nurse and a health care assistant who provide nurse led clinics for long-term conditions. The GPs are supported at the practice by the assistant practice manager and a team of administration staff.

The practice is open between 8am to 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Additional appointments are available at the Leicester City Healthcare Hubs, which offers convenient appointments during the day, in the evenings, at weekends and on bank holidays. Appointments in hours are booked via the GP practice and out of hours via NHS 111.