

James Wigg Group Practice

Inspection report

2 Bartholomew Road London NW5 2BX Tel: 02074284555 www.jameswigg.co.uk

Date of inspection visit: 11 October 2023 Date of publication: 27/11/2023

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 comprehensive inspection of the James Wigg Group Practice (the practice) which included a site visit on 11 October 2023.

Overall, the practice is rated as Good

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

We had previously inspected the practice in September 2016, when we rated the practice Good overall. The full report of the previous inspection can be found on our website at -

https://www.cqc.org.uk/location/1-544215353/reports

Why we carried out this inspection

We carried out this inspection in line with our inspection priorities, to follow up concerns reported to us by some patients regarding their accessing the service. The practice's results in the National GP Patient Survey (GPPS), conducted in early 2023, were below local and national averages in relation to service access.

We found the practice had been proactive in taking effective action to improve telephone access and its appointment system in response to patient feedback and the GPPS results.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A site visit.
- Reviewing direct feedback from patients and staff.
- Reviewing recent patient survey data.
- Obtaining feedback from stakeholders.

Our findings

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Overall summary

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

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

We found that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- People had good outcomes because they received effective care and treatment that met their needs.
- People were supported, treated with dignity and respected and were involved as partners in their care.
- People's needs were met through the way services were organised and delivered. We found that the practice had been
 proactive and taken effective steps to improve responsive aspects of the service. This was reflected in positive recent
 patient and stakeholder feedback we received directly, and by data and patient feedback shared with us by the
 practice.
- The leadership, governance and culture promoted the delivery of high-quality person-centred care.

We saw the following example of Outstanding practice:

• Current and ex-partners of the practice had set up a charity which provided a range of services relating to social prescribing and patient wellbeing. We received positive feedback from patients regarding these, which included a gardening group, dance activities for patients with Parkinson's disease, art-based workshops for patient with dementia and aphasia, choir sessions and a social group with facilitators for female Bangladeshi patients. It also hosted a foodbank.

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

- Continue with work to improve the uptake rates for childhood immunisations and cervical cancer screening.
- Continue with action taken to improve patients' access to the service and sustain results achieved to date.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health 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 to the practice with a nurse specialist advisor and practice manager specialist advisor.

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 practice.

Background to James Wigg Group Practice

The James Wigg Group Practice (the practice) operates at the Kentish Town Health Centre, 2 Bartholomew Road, Camden, London NW5 2BX, premises it shares with other local healthcare services.

The practice is comprised of five GP partners and a non-clinical partner, who is responsible for business operation. It was registered by the Care Quality Commission (CQC) in April 2013, to provide the regulated activities Diagnostic and screening procedures, Family planning, Maternity and midwifery services, Surgical procedures, and Treatment of disease, disorder or injury.

The practice is part of the North Central London Integrated Care System (ICS) and delivers

Personal Medical Services (PMS) under a contract held with NHS England. It is part of the Kentish Town South Primary Care Network (PCN), with another local practice operated by the same registered partnership, but under a separate NHS contract and CQC registration.

The practice delivers services to approximately 22,200 patients. Information published by the Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fourth lowest decile (fourth 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 67% White; 14% Asian; 10% Black, 6% Mixed, and 3% Other. The are slightly more female patients (51%) than male (49%). The patients list age groups are as follows:

0 to 19 years - 4,410 (20%)

20 to 49 - 11,500 (52%)

50 to 59 - 2,838 (13%)

Over-60 - 3,498 (15%)

There are fifteen GPs working at the practice, divided into three teams, with each team led by a GP partner. There are seven practice nurses, four of whom work across both PCN practices; one advanced paramedic; one healthcare assistant; and five pharmacists, two of whom are shared with the other PCN practice.

The administrative team includes the non-clinical partner and eight managers or deputies with various roles and responsibilities. There are 12 practice assistants, who carry out administrative and reception duties; four care co-ordinators, one of whom is a social prescriber; four other administrators with specific roles; and two apprentices.

The practice operates between 8:00 am to 8:00 pm Monday to Friday and from 9:00 am to 5:00 pm on Saturdays. This includes the enhanced access service for practice patients and those of the other PCN practice. Enhanced access appointments can be booked by phone or in person at the practice. Telephone lines are open from 8:30 am to 6:30 pm Monday to Friday.

The practice offers a range of appointment types including advance and book on the day, telephone, video or face-to-face consultations.

All patients in Camden can use an additional extended access service commissioned by the ICS which operates from 8:00 am to 8:00 pm on Sundays and bank holidays at two service hubs in in the borough.

Patients can contact the local out of hours service by calling NHS111.