

# Wibsey and Queensbury Medical Practice

## Inspection report

Wibsey Medical Centre  
Fair Road, Wibsey  
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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 well-led?

Good 

# Overall summary

We carried out an announced inspection at Wibsey and Queensbury Medical Practice on 6 May 2021. Overall, the practice is rated as Good.

Following our previous inspection on 3 March 2020, the practice was rated as good overall, but requires improvement for providing well-led services and requires improvement for providing services to people within the population group of long-term conditions.

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

## **Why we carried out this inspection.**

This inspection was a focused inspection to follow up on concerns and issues identified at the last inspection, these included:

- There was a lack of systems and processes established and operated effectively to ensure compliance with requirements and demonstrate good governance. In particular the provider did not respond to complaints in the necessary timeframe and in line with their own policy, or demonstrate that investigations were undertaken.

At the last inspection it was also noted that the practice should make the following improvements:

- Continue to review and embed governance systems to ensure appropriate oversight. For example; emergency medication and equipment checks; significant event analysis and safety alerts.
- Continue to review and improve Quality and Outcomes Framework (QOF) performance for long-term conditions and mental health indicators.
- Continue to review and improve the uptake of cervical screening.

## **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 and telephone interviews.
- Requesting evidence from the provider.
- A short site visit.

## **Our findings**

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

# Overall summary

- information from the provider, patients, the public and other organisations.

**This practice remains rated as good overall. Following this focused inspection, we have rated the practice as good for providing well led services and good for providing care for the population group, long-term conditions.**

At this inspection we found that improvements had been made.

- Systems and processes were in place to manage and respond appropriately to patient complaints.
- Data showed good outcomes for people with mental health issues. For example; the percentage of patients diagnosed with dementia whose care plan had been reviewed in a face-to-face review in the preceding 12 months (01/04/2019 to 31/03/2020) was 100%, compared to the CCG average of 85% and the national average of 81.4%. Clinicians at the practice maintained close links with patients who were resident at a local dementia care home. Support to patients living with dementia had included offering advanced care planning and sending letters and supportive information.
- The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who had a comprehensive, agreed care plan documented in their record, in the preceding 12 months (01/04/2019 to 31/03/2020) was 90.9%. (CCG average 86.3%, national average 85.4%.)
- The practice followed their policy for stock rotation and the management of emergency equipment. Clear lines of responsibility were identified, and documentation supported regular checks.
- Whilst cervical screening uptake remained low at 68.9%, the practice had continued to invite patients for health screening throughout the pandemic. The team reviewed the uptake of screening through regular reports and proactively contacted patients by letter and telephone to encourage attendance. Flexible appointment times were available, and patients were made aware of extended access appointments which were available locally in the evenings and at weekends. A member of the team had recently trained as a cancer champion. Training had included information about cancer screening, uptake and how to encourage this within the practice population.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. The telephone system had been significantly upgraded following staff and patient feedback, to ensure patients could access care and treatment in a timely way. The practice worked with internal and external agencies and teams to review and improve the quality of care.
- Additional support was offered to vulnerable patients and carers. Where carers could not be contacted, the GP partners had made proactive welfare visits to the patients' home.
- The support offered to patients with a learning disability ensured that all those who required an annual health check were given the opportunity to attend.

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

- Continue with plans to review and improve the uptake of cervical screening.

**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

## Population group ratings

<b>Older people</b>	<b>Not inspected</b> 
<b>People with long-term conditions</b>	<b>Good</b> 
<b>Families, children and young people</b>	<b>Not inspected</b> 
<b>Working age people (including those recently retired and students)</b>	<b>Not inspected</b> 
<b>People whose circumstances may make them vulnerable</b>	<b>Not inspected</b> 
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Not inspected</b> 

## Our inspection team

This inspection was led by a CQC lead inspector who spoke with staff using video conferencing facilities, telephone interviews and conducted a site visit.

## Background to Wibsey and Queensbury Medical Practice

Wibsey and Queensbury Medical Practice is located in the city of Bradford at:

Wibsey Medical Centre, Fair Road, Wibsey, BD6 1TD.

The practice has a branch surgery located at:

Queensbury Health Centre, Russell Road, Queensbury, BD13 2AD.

We visited the Wibsey site as part of this inspection.

The provider is registered with CQC to deliver the following Regulated Activities;

diagnostic and screening procedures, family planning, maternity and midwifery services, surgical procedures, treatment of disease, disorder or injury. The practice offers these services from the main practice and the branch surgery. Patients can access services at either surgery.

Wibsey and Queensbury Medical Practice is situated within the NHS Bradford District and Craven Clinical Commissioning Group (CCG) and provides services to approximately 10,832 patients under the terms of a personal medical services (PMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The practice is part of a wider primary care network (PCN) of GP practices. Patients are able to access appointments with nursing staff, GPs, physiotherapist and social prescribers at hub sites within the locality at evenings and weekends.

Information published by Public Health England reports deprivation within the practice population as three on a scale of one to 10. Level one represents the highest levels of deprivation and level 10 the lowest.

The National General Practice Profile states that 85% of the practice population is from a White British or Irish origin and a further 10% from an Asian background. Male life expectancy is 78 years, compared to the national average of 79 years. Female life expectancy is 81 years, compared to the national average of 83 years.

Figures show that 63% of patients are in paid work or full-time education, this is comparable to the national average of 63.7% and slightly higher than the CCG average of 60.7%. The percentage of patients who experience a long-standing health condition is 51.7%, which is comparable to CCG and national averages.

The age distribution of the practice population generally mirrors the national averages.

The service is provided by four GP partners (two male and two female). The GPs are supported by two practice nurses (female), a full-time clinical pharmacist and two health care assistants.

There is a practice manager who is supported by the patient services manager and a team of reception, administration and secretarial staff.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations. If the GP needs to see a patient face-to-face then the patient is offered a choice of either the main GP location or the branch surgery.

Extended access is provided locally, and late evening and weekend appointments are available. Out of hours services are also available.