

# Woodhouse Hill Surgery

## Inspection report

71a  
Woodhouse Hill  
Huddersfield  
HD2 1DH  
Tel: 01484533833

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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	
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 at Woodhouse Hill Surgery on 9 November 2021. The practice is rated good overall.

The key questions at this inspection are rated as:

Safe – Good

Effective – Good

Caring – Good

Responsive – Good

Well-Led - Good

## Why we carried out this inspection

We carried out an announced comprehensive inspection at Woodhouse Hill Surgery on 30 April 2019 when the provider was rated Requires Improvement overall (Requires Improvement for the key questions of Effective and Responsive; and Good for the key questions of Safe, Caring and Well-led) because:

- Outcomes for patients with long-term conditions, breast and bowel screening and uptake of childhood immunisations were below average.
- Patient satisfaction for access to the practice was below local and national averages.

The full report and evidence table from the April 2019 inspection can be found by selecting the 'all reports' link for Woodhouse Hill Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

At this inspection on 9 November 2021 we undertook an announced comprehensive inspection to follow-up on the inspection of 30 April 2019. At this inspection we looked at the key questions of Safe, Effective, Caring, Responsive and Well-led. We found that the practice had made improvements to outcomes for patients with long-term conditions, childhood immunisations and breast and bowel screening, as well as patient satisfaction for access.

## How we carried out the inspection

Throughout the pandemic, the Care Quality Commission (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.
- Requesting evidence from the provider.

# Overall summary

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

**We have rated this practice as Good overall (Good in Safe, Effective Caring, Responsive and Well-led).**

We found that:

- The provider had addressed the findings of our previous inspection and had made improvements in patient outcomes for effective and responsive services.
- There were systems in place to safeguard children and vulnerable adults from abuse and staff we spoke with knew how to identify and report safeguarding concerns.
- Leaders reviewed the effectiveness and appropriateness of the care the service provided. They ensured that care and treatment was delivered according to evidence-based guidelines.
- There was a programme of quality improvement, including clinical audit.
- Staff had the skills, knowledge and experience to deliver effective care.
- Staff involved and treated people with compassion, kindness, dignity and respect.
- Leaders demonstrated they had the capacity and skills to deliver high-quality, sustainable care.

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

- Continue to monitor and make improvements to patient outcomes for the cancer screening programmes, including uptake of cervical screening.
- Continue to monitor and make improvements to increase childhood immunisation uptake.
- Continue to monitor and review patient experience outcomes for responsive services.

**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 attended on site and completed clinical searches and records reviews and spoke with the lead GP.

## Background to Woodhouse Hill Surgery

Woodhouse Hill Surgery is located at 71a Woodhouse Hill, Fartown, Huddersfield, West Yorkshire, HD2 1DH which is approximately two miles to the north of Huddersfield town centre. The practice is housed in a purpose-built single storey building, which is owned by the lead GP.

The practice is situated within the Kirklees Clinical Commissioning Group (CCG) and delivers Primary Medical Services (PMS) to approximately 3,790 patients.

The practice is registered as a partnership with the Care Quality Commission (CQC) to deliver the regulated activities diagnostic and screening procedures, maternity and midwifery services, treatment of disease, disorder or injury and family planning.

The practice is part of the Greenwood Network Primary Care Network (PCN) with nine other GP practices, which looks to develop collaborative services for the shared practice populations.

The practice opening times are Monday to Friday 8.30am to 6.30pm. Extended access is offered on Wednesday morning from 7.30am and alternate Saturday mornings.

The practice is part of a federation 'My Health Huddersfield' where extended GP access is available. Patients can access pre-bookable appointments between 6.30pm and 9pm Monday to Friday and between 8.30am and 5.30pm on weekends at local hub practices. Out of hours cover is provided by Local Care Direct which is accessed by calling the surgery telephone number, or by calling the NHS 111 service.

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

The National General Practice Profile shows the practice ethnicity as being diverse with 16% Asian, 12% Black, 8% Mixed, and 2% Other non-white ethnicities.

The practice team consists of one male GP partner (10 sessions per week) and a female physician associate (10 sessions per week) who was due to be appointed as a partner immediately after our inspection. In addition, there is a practice nurse who works one day per week and a long-term locum healthcare assistant (HCA) who works variable hours to meet the needs of the practice. A practice nurse and a HCA had recently retired from the practice. We saw that the practice was recruiting for a HCA and a practice nurse. They planned to increase the hours for these roles. The clinical team are supported by a practice manager, a deputy practice manager and five receptionist/administrators.