

The Boulevard Medical Practice

Inspection report

Savile Park Road
Halifax
West Yorkshire
HX1 2ES
Tel: 01422 365533
www.boulevardpractice.co.uk

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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 effective?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced focused inspection at The Boulevard Medical Practice on 21 August 2019. The practice was previously inspected by the Care Quality Commission on 2 December 2015, when it received a rating of Good overall, with a rating of outstanding for being Well Led.

We carried out an inspection of this service due to the length of time since the last inspection. Following our review of the information available to us, including information provided by the practice, we focused our inspection on the following key questions: Are services effective? Are services well-led?

We based our judgement on 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
- Information from the provider, patients, the public and other organisations

We have rated this practice as good overall.

We concluded that:

- Staff had access to relevant, up to date evidence-based guidance in order to best meet patients' needs.
- A range of quality improvement activity was carried out by clinical and non-clinical staff, and actions and learning was widely shared and implemented.
- Patients with long-standing mental health problems, including those with depression, were reviewed on a three to six monthly basis, to closely monitor their progress.
- Staff were supported to learn through use of innovative and interactive teaching and training systems.
- A whole team approach was in place to support continual improvement, through the use of a 'good ideas' scheme which generated prizes and awards.

- Staff told us they felt supported and valued by the leadership team at the practice.
- The practice worked collaboratively with local partners and became involved in local initiatives to meet the changing needs of their patient population.

However, we also found that:

- Systems to record and update details of staff training completed were not sufficiently clear.
- Policies and protocols were updated on an 'ad hoc' basis. We were informed that plans were in place to formalise arrangements for regular, routine updating. We viewed a sample of protocols, policies and 'how to' guides, and saw these were appropriate and had been updated in a timely way.
- The premises had experienced a long-standing roof leak which was affecting two non-clinical rooms. Efforts were being made to encourage the landlord to repair the damage caused.

The areas where the provider **should** make improvements are:

- Improve the systems for maintaining a clear and accurate picture of training completed by staff at all levels.
- Implement a formal process whereby practice policies and protocols are reviewed and updated in a structured manner.
- Continue to liaise with the landlord to repair damage caused to parts of the practice premises by leakage from the roof.

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

Older people	Good	
People with long-term conditions	Good	
Families, children and young people	Good	
Working age people (including those recently retired and students)	Good	
People whose circumstances may make them vulnerable	Good	
People experiencing poor mental health (including people with dementia)	Good	

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a GP specialist adviser, a second CQC inspector, and was shadowed by a CQC inspection manager and a practice nurse specialist advisor.

Background to The Boulevard Medical Practice

The Boulevard Medical Practice is located at Savile Park Road, Halifax HX1 2ES. It is located approximately half a mile from Halifax town centre.

The practice is registered with the Care Quality Commission to carry out the following regulated activities:

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

There are currently 10,630 patients registered on the practice list. The practice provides General Medical Services (GMS) under a locally agreed contract with NHS England.

The Public Health National General Practice Profile shows that around 20% of the practice population are of Asian, black or other non-white ethnicity, with the remainder being of white British origin.

The level of deprivation within the practice population is rated as five on a scale of one to ten. Level one represents the highest level of deprivation, and level ten the lowest.

The age/sex distribution of the practice population is in line with local and national averages. The average life expectancy for patients at the practice is 77 years for men and 83 years for women, compared to the national average of 79 years and 83 years respectively.

The practice offers a range of enhanced services such as minor surgical procedures and childhood immunisations.

The clinical team comprises four GP partners, two female and two male, one female practice pharmacist, three female advanced nurse practitioners, two practice nurses, one health care assistant and one phlebotomist, all of whom are female.

Supporting the clinical team is a practice manager, assistant practice manager, patient services manager and a range of patient service advisors.

The practice is a training practice, which means it provides placements for fully qualified doctors wishing to specialise in general practice. At the time of our inspection, two such registrars, both female, were working at the practice.

The practice works collaboratively with Calderdale Group Practice, a group of 11 practices who collaborate on issues such as tendering for contracts, such as accountancy and telephony services.

The practice is part of Central Halifax Primary Care Network (PCN), made up of eight local practices, serving approximately 56,000 patients. PCNs are set up to facilitate meeting the needs of the population being served, using a collaborative and multi-agency approach.

The practice is open between 8am and 6.30pm Monday to Friday and Saturday mornings between 9am and 1pm. Additional appointments are available via the local extended access hub, at a nearby practice between 6.30pm and 9pm Monday to Friday and between 10am and 2pm weekends and bank holidays.

The practice is housed in a Grade Two listed building, with an additional modern purpose-built extension having been added around eight years ago. The practice is accessible to those patients with mobility problems, or those who use a wheelchair. Patient consulting rooms were located on the ground floor and the first floor. Lift access was available for those patients requiring it.

Parking is available on site, with dedicated disabled parking spaces. The practice is also accessible by public transport.

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 saw that the ratings from the previous inspection were displayed, as required on the practice website. The ratings were displayed in the practice premises following our feedback.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
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This section is primarily information for the provider

Enforcement actions

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
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