

# The Grange Group Practice

## **Inspection report**

Fartown Grange
Spaines Road
Huddersfield
HD2 2QA
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www.thegrangegrouppractice.co.uk

Date of inspection visit: 4 and 5 May 2022 Date of publication: 13/06/2022

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 comprehensive inspection at The Grange Group Practice on 4 and 5 May 2022. Following this inspection, we rated the location as good overall, and for all key questions.

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led - Good

The practice was previously inspected on 19 August 2015 and rated as good overall and for all key questions.

The full report for our previous inspection can be found by selecting the 'all reports' link for The Grange Group Practice on our website at www.cqc.org.uk

#### Why we carried out this inspection

This inspection was a comprehensive inspection. We undertook this inspection at the same time as CQC inspected a range of urgent and emergency care services in West Yorkshire. To understand the experience of GP Providers and people who use GP services, we asked a range of questions in relation to urgent and emergency care. The responses we received have been used to inform and support system wide feedback.

The comprehensive inspection included additional questions in relation to urgent and emergency care.

#### 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 some 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 shorter site visit
- Staff questionnaires

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

#### We found that:

- 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.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- 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.
- The practice operated effective systems and processes to ensure good governance in accordance with the fundamental standards of care.
- 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 increase the 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.

#### 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 to the lead GP and completed clinical searches and records reviews without visiting the location.

## Background to The Grange Group Practice

The Grange Group Practice is a purpose-built practice located in the Fartown area of Huddersfield. The practice provides services to approximately 15,600 patients. It holds a Personal Medical Services (PMS) contract with NHS Kirklees Clinical Commissioning Group (CCG). The practice has a branch surgery, located two miles away, which is accommodated in a converted bungalow. However, this was temporarily closed due to infection prevention and control and safety findings by the CCG. A recent comprehensive public engagement and patient survey had been undertaken by the practice to provide an insight into the impact of the closure of the branch site and to inform the planning of future provision of GP services in the area.

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, family planning and surgical procedures.

The practice opening times are Monday to Friday 8am to 6.30pm. Extended access is offered on Monday, Tuesday, Wednesday and Thursday from 6.30pm to 8pm.

Information published by Public Health England shows that deprivation within the practice population group is rated as 2 (1-10). 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 59% White, 22% Asian, 10% Black, 7% Mixed, and 2% Other.

The practice team consists of two male GP partners (totalling 12 sessions), two male salaried GP (totalling 12 sessions), three locum GPs (12 sessions), four substantive nurse practitioners and two locum nurse practitioners, one advanced clinical practitioner (ACP), two practice nurses, two healthcare assistants, two mental health practitioners (MH nurses) and one clinical pharmacist. The clinical team are supported by a full-time practice manager and business manager, six administrative staff and 17 receptionists.