

# Park Grange Medical Centre

## Quality Report

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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.

## Contents

### Key findings of this inspection

Letter from the Chief Inspector of General Practice

Page  
1

### Detailed findings from this inspection

Our inspection team

3

Background to Park Grange Medical Centre

3

Why we carried out this inspection

3

Detailed findings

4

## Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Park Grange Medical Centre on 5 September 2017. The overall rating for the practice was inadequate. The full comprehensive report on the September 2017 inspection can be found by selecting the 'all reports' link for Park Grange Medical Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced focused inspection, carried out on 7 March 2018 at the request of the practice. The purpose of this inspection was to review actions taken by the provider in response to the comprehensive inspection that took place on 5 September 2017. During the September 2017 inspection an urgent notice of decision was issued by the Care Quality Commission

under section 31 of the Health and Social care Act 2008. This decision imposed a condition on the registration of the provider relating to the use of a newly built extension at the location.

During the inspection on 5 September 2017, (and consequently in writing) the provider, Park Grange Medical Centre, were informed that they should cease use of the newly constructed extension until evidence was provided that the extension met Regulation 12 (1) of the Health and Social care Act 2008.

This report covers our findings in relation to this imposed condition only.

Our key findings were as follows:

# Key findings

- The provider had complied with the condition imposed by the Care Quality Commission and the extension was not in use.
- The provider had taken steps to ensure the safety of the patients' using their building and had produced detailed action plans, which they had acted upon.
- The provider had taken the action required to address the serious concerns we identified at the inspection on

5 September 2017. As a result we will be issuing a Notice of Proposal to remove the urgent condition we applied to the provider's registration to prevent them from using the recently constructed extension to the premises.

**Professor Steve Field (CBE FRCP FFPH FRCGP)**  
Chief Inspector of General Practice

# Park Grange Medical Centre

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

The inspection was carried out by a CQC inspector.

## Background to Park Grange Medical Centre

Park Grange Medical Centre is situated at 141 Woodhead Road, Bradford, BD7 2BL, and provides services for 3,010 patients. The premises are purpose built, owned by the partners and accessible with car parking onsite.

The surgery is situated within the Bradford City Clinical Commissioning group (CCG) and provides services under the terms of a primary medical services (PMS) contract. This is a contract between general practices and primary care organisations for delivering services to the local community.

The practice catchment area is classed as being within one of the most deprived areas in England. People living in more deprived areas tend to have a greater need for health services.

There are two GP partners, who are both male and work the equivalent of 1.4 whole time posts. The registered manager is one of the GP partners. A female locum GP provides one clinical session a week to see patients who prefer a female doctor. Nursing staff were providing a reduced service on the day of our visit as their practice

nurse was on maternity leave. There are two part time health care assistants who work a combined whole time equivalent of 0.75. The provider employs a part time practice manager and a team of part time receptionists.

Park Grange Medical Centre reception is open between 8.00am and 6.30pm Monday to Thursday and 8.00am to 7.45pm on Friday. Telephone lines are opened at 8.30am each day. Appointments are available during morning and afternoon clinics and there is an extended hours clinic on a Friday evening for patients who cannot attend the practice during the usual working day.

On the day of inspection, we noted that the previously awarded ratings were displayed, as required, in the premises and on the practice's website.

## Why we carried out this inspection

Following a comprehensive inspection on 5 September 2017 the practice was rated as inadequate and a condition was imposed on the providers' registration with the Care Quality Commission. The practice was noted to be in breach of regulations 12: Safe Care and Treatment, Regulation 18: Staffing and Regulation 17: Good Governance, of the Health and Social Care Act 2008 and enforcement action was taken.

We undertook this focused inspection of Park Grange Medical Centre on 7 March 2018. This inspection was carried out to review in detail the actions taken by the practice to ensure appropriate levels of safety and to confirm that the practice was now meeting legal health and safety requirements in relation to the newly built extension.

# Are services safe?

## Our findings

At our previous inspection on 5 September 2017, we imposed an urgent condition on the registration of the provider stating they must not use the recently constructed extension to the practice without the prior written agreement of CQC. At that time, the extension did not meet the requirements of Regulation 12(1) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection on 7 March 2018 we found that the provider had taken the necessary steps to ensure the safety of patients and staff within the practice in relation to the newly constructed building extension.

### Safety systems and processes

- We were shown evidence that on 3 October 2017, the completed extension was assessed as meeting the required building regulations and safety standards by the appropriate authority and it was noted that all legally required safety features absent at our earlier inspection had now been completed.
- We saw that the Fire Safety Policy for the practice had been updated to reflect the work undertaken and the required changes made to the physical environment of the practice.
- We saw meeting notes which reflected the staff team had been trained in the use of fire evacuation sledges and that moving and handling training, which was necessary to inform staff how to move people safely, had also been completed.

- We saw that a fire extinguisher, an evacuation slide and an audible fire alarm were now in place in the newly built extension.

### Risks to patients

- We found that risks to patients had been assessed and actions taken to improve safety in the practice. For example, we saw that fire exit signs and other signage was now in place to assist patients to orientate themselves around the building in the event of an emergency.
- We saw that a suitable fire exit stairway had been installed on the outside of the building which would assist the safe evacuation of patients in the event of a fire.
- A comprehensive fire risk assessment of the premises had been undertaken and actions arising from this had been completed. This included the installation of emergency lighting in all consultation rooms and the installation of a new fire alarm panel.
- The provider had taken the action required to address the serious concerns we identified at the inspection on 5 September 2017. As a result we will be issuing a Notice of Proposal to remove the urgent condition we applied to the provider's registration to prevent them from using the recently constructed extension to the premises.

### Lessons learned and improvements made

- We were told that the practice had worked closely with the clinical commissioning group and outside mentors to improve safety and standards within the practice.
- The practice had responded to the advice of the West Yorkshire Fire service.