

Woodside Surgery

Inspection report

Woodside Road
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West Yorkshire
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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?	Requires improvement 
Are services caring?	Good 
Are services responsive?	Good 
Are services well-led?	Good 

Overall summary

We carried out an announced comprehensive inspection at Caritas Group Practice on 23 October 2018 as part of our inspection programme. Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser and a second CQC inspector.

Our judgement of the quality of care at this service is based 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.

I have rated this practice as good overall, however the key question of are services effective has been rated as requires improvement.

We concluded that:

- There was an innovative model of care delivery in place. The service was nurse-led; with a range of clinical expertise provided by General Practitioners, Advanced Nurse Practitioners, Advanced Clinical Practitioners and Practice nurses, to deliver a holistic needs-led service.
- There were clear incident reporting systems in place. When incidents did happen, the practice learned from them and improved their processes.
- The practice was an accredited advanced training practice, providing training for undergraduate and post-graduate nurses, as well as medical students and other postgraduate clinicians.
- The practice carried out quality improvement activity to monitor and review the effectiveness and appropriateness of the care it provided. Care and treatment was delivered according to evidence-based guidelines.
- Staff described and demonstrated a caring and compassionate approach to treating patients.

However, we also found that:

- There were substantial gaps in relation to uptake of mandatory training for staff, including fire safety and infection prevention and control training.
- Induction processes were in place. However not all staff had received an appropriate or safe induction. Staff appraisals were also out of date at the time of our inspection.

- Clinical communication systems were in place, however processes for disseminating clinical updates were not fully established in all cases.
- Patients told us they were not always able to get an appointment when they needed one. The practice had recently reduced the opening times at two of their sites.

We rated the practice as **requires improvement** for providing effective services because:

- The service provider had failed to ensure that staff maintained their requirements in relation to mandatory training.
- The service provider failed to provide an adequate induction and supervision process for new starters in all cases.
- Staff appraisals were out of date at the time of our visit.
- Systems for the dissemination of National Institute for Health and Care Excellence (NICE) guidelines and other clinical updates to staff were not clear in all cases.

The areas where the provider **must** make improvements as they are in breach of regulations are:

- Ensure persons employed in the provision of the regulated activity receive the appropriate support, training, professional development, supervision and appraisal necessary to enable them to carry out their duties.

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

- Continue to review and evaluate their approach in relation to appointment availability for patients at all sites.
- Develop and embed clear systems for dissemination of National Institute for Health and Care Excellence (NICE) guidelines and other clinical updates to staff.
- Review staff immunisation status in line with Public Health England guidelines.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

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

Population group ratings

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

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser and a second CQC inspector.

Background to Woodside Surgery

Woodside Surgery (Caritas Group Practice) comprises three sites; Woodside Surgery, Woodside Road, Halifax HX3 6EL, Mixenden Stones Surgery, Mixenden Road, Halifax HX2 8RG and Shelf Health Centre, Shelf Moor Road, Halifax HX3 7PQ. The website for the practice is . Patients are able to access appointments at any of the sites operated by the practice.

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

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

There are currently 9,274 patients registered at the practice. The practice provides Personal Medical Services (PMS) under a locally agreed contract with NHS England.

The Public Health National General Practice Profile shows that around 3% of the practice population is of Asian ethnicity, with around 2% of mixed ethnicity. The remainder of the patient population is of white ethnicity. The demographics of each of the three sites differ somewhat, with pockets of deprivation in some areas, and higher concentration of older British patients in some cases, and pockets of Eastern European patients in some areas. Overall the level of deprivation within the practice population is rated as three, on a scale of one to ten. Level one represents the highest levels of deprivation, and level ten the lowest.

The age/sex distribution of the practice is largely in line with national averages. The average life expectancy for patients at the practice is 76 years for men and 82 years for women, compared to the national average of 79 years and 83 years respectively.

The practice offers a range of enhanced services which include minor surgery and the fitting of long-acting reversible contraceptives (LARCs).

The clinical team is made up of two female Advanced Clinical Practitioner partners, one male salaried GP, three locum GPs, two female and one male. There are three additional female Advanced Nurse Practitioners, one male Advanced Clinical Practitioner, a male Advanced Clinical Practitioner in training, three female practice nurses (all of whom are nurse prescribers) and two female healthcare assistants, one of whom is in training to qualify as a nurse associate.

Non-clinical support is provided by a recently restructured team, which includes a business manager, a training and development manager, a patient services manager as well as a range of administrative, secretarial and reception staff.

The practice is an advanced training practice, providing training for a range of undergraduate and postgraduate nurses, medical students and other postgraduate clinicians. The practice is part of North Halifax Community and Wellbeing Partnership which is made up of five practices, the local council, voluntary groups, Clinical Commissioning Group, and Pennine GP alliance, who collaborate on locality resources to utilise shared expertise. In addition, the practice is part of Calderdale Group Practice which is made up of 11 practices, and are developing shared 'back office' functions, such as cleaning and telephony resources.

Practice opening times are:

Woodside Surgery: Monday to Friday 8am to 6.30pm

Mixenden Stones Surgery: Monday 1.30pm to 6.30pm

Tuesday 8am to 1pm

Wednesday 1.30pm to 6.30pm

Thursday 8am to 1pm

Friday 8am to 1pm

Shelf Health Centre: Monday 8am to 1pm

Tuesday 1.30pm to 6.30pm

Wednesday 8am to 1pm

Thursday 1.30pm to 6.30pm

Friday 8am to 1pm

The practice premises are all housed in purpose built premises, with patient consulting rooms on the ground floor at all three sites. All premises have wheelchair access and provide parking facilities, with dedicated disabled parking allocated.

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 checked, and saw that the ratings from the previous inspection were displayed, as required, on the practice premises and on their website.

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
Diagnostic and screening procedures	Regulation 18 HSCA (RA) Regulations 2014 Staffing
Maternity and midwifery services	Regulation 18 (2) HSCA (RA) Regulations 2014
Surgical procedures	Requirements in relation to staffing The service provider had failed to ensure that persons employed in the provision of a regulated activity received such appropriate support, training, professional development, supervision and appraisal as was necessary to enable them to carry out the duties they were employed to perform. In particular:
Treatment of disease, disorder or injury	The service provider had failed to ensure that staff maintained their requirements in relation to mandatory training
	The service provider failed to provide an adequate induction and supervision process for new starters in all cases
	Staff appraisals were out of date
	This was in breach of Regulation 18 (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.