

The University Health Centre

Inspection 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.

Ratings

Overall rating for this location

Requires Improvement



Are services safe?

Requires Improvement



Are services effective?

Requires Improvement



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 University Health Centre on 4 and 6 December 2023. Overall, the practice is rated as requires improvement.

Safe – Requires Improvement

Effective – Requires Improvement

Caring - Good

Responsive - Good

Well-led - Good

Why we carried out this inspection

We carried out this inspection in line with our current inspection priorities.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- Reviewing staff questionnaires.
- A short 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 found that:

- There were gaps in systems and processes to ensure safe recruitment, premises, medicines management and the management of some patients with long-term conditions.
- 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.
- The practice participated in various quality improvement initiatives to drive improvements and patient outcomes.

Overall summary

- The practice was a training practice and had a strong emphasis on education and learning.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients could access care and treatment in a timely way.
- The provider demonstrated there was compassionate, inclusive and effective leadership at all levels.

We found one breach of regulation. The provider **must**:

- Ensure care and treatment is provided in a safe way to patients.

In addition, the provider **should**:

- Continue to monitor and make improvements to increase the uptake of cancer screening and childhood immunisations.
- Continue to review and improve the identification of carers on the practice register.
- Continue to monitor patient outcomes for access.

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

Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to The University Health Centre

The University Health Centre is situated in a 2-storey, purpose-built medical centre in the vicinity of the Huddersfield University Campus at Sand Street, Huddersfield, HD1 3AL. Patient services are delivered from the first and second floor.

The practice is situated within NHS West Yorkshire Integrated Care Board (ICB) and delivers a Primary Medical Services (PMS) contract to a patient population of 15,526 patients. The practice is in the Tolson Primary Care Network (PCN) with 7 other practices.

The provider is registered with the Care Quality Commission (CQC) as an organisation and delivers the Regulated Activities: diagnostic and screening procedures, maternity and midwifery services, treatment of disease, disorder or injury, family planning and surgical procedures.

The practice is open Monday to Friday from 8am to 6.30pm with extended opening on Monday and Wednesday from 6.30pm to 8.30pm. Additional pre-bookable enhanced access is available at several practice locations in the primary care network (PCN) between 6.30pm and 8pm Monday to Friday and on Saturday from 9am to 5pm.

The practice has 3 GP partners (2 female and 1 male), 1 female associate partner and 5 salaried GPs (1 male and 4 female). Additional clinical support includes 1 female advanced nurse practitioner, 1 female nurse prescriber, 1 female practice nurse, 2 female healthcare assistants and a female mental health practitioner. The practice also has primary care network (PCN) staff which includes a dietitian, 2 pharmacists, a health and wellbeing trainer, 3 physiotherapists, 2 paramedics, a social prescriber and a mental health nurse. The clinical staff are supported by the practice manager and a team of 11 receptionists/administrators.

Information published by the Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the third lowest decile (3 of 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 69% White, 20% Asian, 5% Black, 4% Mixed and 2% Other.

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <p>The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:</p> <ul style="list-style-type: none">• There were gaps in systems and processes to ensure safe recruitment of staff.• The practice had not ensured that appropriate premises risk assessments had been maintained, which included health and safety and fire.• Aspects of medicines management, including medication reviews, repeat prescribing, the monitoring of patients on some medicines and patients prescribed medicines subject to a patient safety alert, was not consistent.• There were gaps in the management of some patients with long-term conditions, which included annual reviews. <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</p>