

Dr Nagala Ramesh

Quality Report

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Gillingham Kent ME7 1XG
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Website: None

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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 service

Good



Are services safe?

Good



Are services well-led?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Nagala Ramesh on 14 July 2015. Breaches of the legal requirements were found. Following the comprehensive inspection, the practice wrote to us to tell us what they would do to meet the legal requirements in relation to the breaches.

We undertook this focussed inspection on 28 June 2016, to check that the practice had followed their plan and to

confirm that they now met the legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Dr Nagala Ramesh on our website at www.cqc.org.uk.

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

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

At our previous comprehensive inspection on 14 July 2015 the practice had been rated as requires improvement for providing safe services.

- Records did not always clearly identify the actions taken and by whom in response to national patient safety alerts received by the practice.
- Not all staff were up to date with mandatory training such as safeguarding and infection control.
- The practice had been unable to demonstrate they were following national guidance on the storage of vaccines.
- The practice had been unable to demonstrate they were fully compliant with national guidance on infection control.
- Portable electrical equipment had not been tested since the last safety check that had been undertaken in 2012.
- Records showed that the practice had not always undertaken recruitment checks prior to the employment of staff including locum GPs.
- Action plans had not been developed to address issues identified by a gas safety check and the practice's fire risk assessment.

At our focussed follow-up inspection on 28 June 2016, the practice provided records and information to demonstrate that the requirements had been met.

- The practice had revised the system that managed national patient safety alerts and we saw that actions taken and by whom were now being accurately recorded.
- Records showed that all staff were now up to date with mandatory training such as safeguarding and infection control. The only exception to this was one member of staff who was currently on long term leave and one member of staff new to the practice who was on short term leave. However, the practice had an action plan to help ensure these members of staff attended mandatory training on their return from leave.
- The practice had revised vaccine storage and was able to demonstrate they were now following national guidance on the storage of vaccines.
- The practice had revised infection control systems and was able to demonstrate they were now fully compliant with national guidance on infection control.

Good



Summary of findings

- Records showed that all portable electrical equipment had been tested since our last inspection and was safe to use.
- The practice had revised recruitment activities and was able to demonstrate that recruitment checks were now being undertaken prior to the employment of staff including locum GPs.
- Records showed that action plans to address issues identified by the gas safety check and the practice's fire risk assessment had been developed and implemented.

Are services well-led?

At our previous comprehensive inspection on 14 July 2015 the practice had been rated as requires improvement for providing well-led services.

- The practice had been unable to demonstrate they had an effective system to help ensure all governance documents were kept up to date.
- The practice had not fully developed and implemented audit systems to monitor the quality and safety of services.
- The practice had been unable to demonstrate they had established processes for managing and mitigating all risks to help keep staff, patients and others safe.

At our focussed follow-up inspection on 28 June 2016, the practice provided records and information to demonstrate that the requirements had been met.

- The practice had revised their system to help ensure all governance documents were now kept up to date.
- The practice had revised, developed and implemented audit systems to monitor the quality and safety of services.
- The practice had revised and established processes for managing and mitigating all risks that were now helping to keep patients, staff and other safe.

Good



Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

At our previous comprehensive inspection on 14 July 2015 the practice had been rated as requires improvement for the care of older people. The provider had been rated as requires improvement for providing safe and well-led services and good for providing effective, caring and responsive services. The resulting overall rating applied to everyone using the practice, including this patient population group.

At our focussed follow-up inspection on 28 June 2016, the practice provided records and information to demonstrate that the requirements had been met. The provider is rated as good for providing safe and well-led services. The resulting overall rating applies to everyone using the practice, including this patient population group.

Good



People with long term conditions

At our previous comprehensive inspection on 14 July 2015 the practice had been rated as requires improvement for the care of people with long-term conditions. The provider had been rated as requires improvement for providing safe and well-led services and good for providing effective, caring and responsive services. The resulting overall rating applied to everyone using the practice, including this patient population group.

At our focussed follow-up inspection on 28 June 2016, the practice provided records and information to demonstrate that the requirements had been met. The provider is rated as good for providing safe and well-led services. The resulting overall rating applies to everyone using the practice, including this patient population group.

Good



Families, children and young people

At our previous comprehensive inspection on 14 July 2015 the practice had been rated as requires improvement for the care of families, children and young people. The provider had been rated as requires improvement for providing safe and well-led services and good for providing effective, caring and responsive services. The resulting overall rating applied to everyone using the practice, including this patient population group.

At our focussed follow-up inspection on 28 June 2016, the practice provided records and information to demonstrate that the

Good



Summary of findings

requirements had been met. The provider is rated as good for providing safe and well-led services. The resulting overall rating applies to everyone using the practice, including this patient population group.

Working age people (including those recently retired and students)

At our previous comprehensive inspection on 14 July 2015 the practice had been rated as requires improvement for the care of working age people (including those recently retired and students). The provider had been rated as requires improvement for providing safe and well-led services and good for providing effective, caring and responsive services. The resulting overall rating applied to everyone using the practice, including this patient population group.

At our focussed follow-up inspection on 28 June 2016, the practice provided records and information to demonstrate that the requirements had been met. The provider is rated as good for providing safe and well-led services. The resulting overall rating applies to everyone using the practice, including this patient population group.

Good



People whose circumstances may make them vulnerable

At our previous comprehensive inspection on 14 July 2015 the practice had been rated as requires improvement for the care of people whose circumstances may make them vulnerable. The provider had been rated as requires improvement for providing safe and well-led services and good for providing effective, caring and responsive services. The resulting overall rating applied to everyone using the practice, including this patient population group.

At our focussed follow-up inspection on 28 June 2016, the practice provided records and information to demonstrate that the requirements had been met. The provider is rated as good for providing safe and well-led services. The resulting overall rating applies to everyone using the practice, including this patient population group.

Good



People experiencing poor mental health (including people with dementia)

At our previous comprehensive inspection on 14 July 2015 the practice had been rated as requires improvement for the care of people experiencing poor mental health (including people with dementia). The provider had been rated as requires improvement

Good



Summary of findings

for providing safe and well-led services and good for providing effective, caring and responsive services. The resulting overall rating applied to everyone using the practice, including this patient population group.

At our focussed follow-up inspection on 28 June 2016, the practice provided records and information to demonstrate that the requirements had been met. The provider is rated as good for providing safe and well-led services. The resulting overall rating applies to everyone using the practice, including this patient population group.

Dr Nagala Ramesh

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

Background to Dr Nagala Ramesh

Dr Nagala Ramesh is situated in Gillingham, Kent and has a registered patient population of approximately 3,200. The practice has more patients registered over the age of 65 years than the national average. There are fewer patients up to the age of 18 years registered with the practice than the national average. The number of patients recognised as living in deprived circumstances for this practice, including income deprivation, is higher than national averages.

The practice staff consists of one GP (male), one practice manager, three practice nurses (female) as well as administration and reception staff. The practice also directly employs locum GPs. There is a reception and a waiting area on the ground floor. All patient areas on the ground floor are accessible to patients with mobility issues as well as parents with children and babies.

The practice is not a teaching or training practice (teaching practices take medical students and training practices have GP trainees and Foundation Year Two junior doctors).

The practice has a general medical services (GMS) contract with NHS England for delivering primary care services to local communities.

Primary medical services are provided Monday to Friday between the hours of 9am to 11.30am and 4.30pm to 6.30pm. Patients are able to contact the practice by

telephone Monday to Friday from 8.30am and throughout the day. Extended hours surgeries are offered from 6.30pm to 7pm on four week-day evenings. Primary medical services are available to patients registered at Dr Nagala Ramesh via an appointments system. There are a range of clinics for all age groups as well as the availability of specialist nursing treatment and support. There are arrangements with other providers (Medway On Call Care) to deliver services to patients outside of Dr Nagala Ramesh's working hours.

Services are provided from 7 Railway Street, Gillingham, Kent, ME7 1XG only.

Why we carried out this inspection

We undertook an announced focused inspection of Dr Nagala Ramesh on 28 June 2016. This inspection was carried out to check that improvements had been made to meet the legal requirements planned by the practice, following our comprehensive inspection on 14 July 2015.

We inspected this practice against two of the five questions we ask about services; is the service safe and is the service well-led. This is because the service was not meeting some of the legal requirements in relation to these questions.

How we carried out this inspection

Before visiting, we reviewed information sent to us by the practice that told us how the breaches identified during the comprehensive inspection had been addressed. During our visit we spoke with the practice manager and reviewed information, documents and records kept at the practice.

Are services safe?

Our findings

Learning and improvement from safety incidents

Staff told us the practice had revised the system that managed national patient safety agency alerts. All safety alerts were being shared with relevant staff and action taken when necessary. Records were kept of the actions taken and by whom.

Reliable safety systems and processes including safeguarding

Records showed that all staff were now up to date with safeguarding training.

Medicines management

The practice had revised vaccine storage and was able to demonstrate that they were now following national guidance on the storage of vaccines. Temperature checks for refrigerators used to store vaccines had been carried out and records of those checks were made. We looked at records of those checks and saw that temperature of the vaccines refrigerator was within the recommended storage range of between two and eight degrees centigrade.

Cleanliness and infection control

The practice had carried out an infection control audit in February 2016 and an action plan had been developed to address issues identified by the audit. Records showed that there were plans to repeat the audit at the end of June 2016 to help ensure actions taken had been effective.

Records showed that all but two members of clinical staff were now up to date with infection control training. The members of staff who were not up to date with this training were currently on leave. The practice had an action plan to help ensure these members of staff received this training soon after returning to work.

The practice had introduced the use of a dedicated refrigerator for the storage of laboratory specimens. Laboratory specimens were no longer stored inappropriately.

The practice had carried out a legionella risk assessment in January 2016 (Legionella is a term for a particular bacterium which can contaminate water systems in buildings). Records showed that monitoring and testing was being carried out to help ensure the risk of legionella to patients, staff and others was managed and reduced.

Equipment

Records showed that portable electrical equipment had been tested in February 2016 to help ensure it was safe for use in the practice.

Staffing and recruitment

The practice had revised their system of recruitment and updated relevant policies to help ensure all relevant checks were undertaken prior to employment of staff. For example, the new employee recruitment, selection, interview and appointment policy and procedure.

Records showed that the practice had carried out relevant checks prior to the employment of staff including locum GPs. For example, Disclosure and Barring Service (DBS) clearance (a criminal records check), professional registration, photographic identification and references.

Monitoring safety and responding to risk

The practice had developed an action plan to address the issues identified by the gas safety check. Records showed that the action plan had been implemented and the issues had now been resolved.

Records showed that the practice had implemented their action plan to address risks identified by their fire risk assessment. These included installation and regular testing of a fire alarm system, emergency lighting and fire extinguisher testing and maintenance, as well as fire drills.

Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

Governance arrangements

The practice had revised their system to help ensure all governance documents were kept up to date.

The practice had revised audit systems used to monitor quality and safety. For example, systems to help ensure staff were up to date with mandatory training and employment checks were carried out prior to the

employment of staff including locum GPs. An infection control audit and portable electrical testing had been carried out and the system to follow-up on national patient safety alerts had been reviewed.

Processes for managing and mitigating risks had been revised to help keep patients, staff and others safe. For example, action plans had been developed and implemented to address issues raised from the gas safety check and the fire risk assessment.