

# Dr PV Gudi and Partner

## Inspection report

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West Bromwich  
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Date of inspection visit: 2 December 2021  
Date of publication: 20/01/2022

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

Requires Improvement



Are services safe?

Requires Improvement



Are services effective?

Requires Improvement



Are services caring?

Requires Improvement



Are services responsive to people's needs?

Good



Are services well-led?

Requires Improvement



# Overall summary

We carried out an announced inspection at Dr PV Gudi and Partner on 2 December 2021. Overall, the practice is rated as Requires Improvement.

The ratings for each key question were as follows:

Safe - Requires Improvement

Effective – Requires Improvement

Caring – Requires Improvement

Responsive – Good

Well-led – Requires Improvement

Following our previous inspection on 2 February 2021, the practice was rated inadequate overall and for all key questions, except for providing caring and responsive services which was rated as good. The practice was placed into special measures. A further urgent focused inspection was carried out on 25 May 2021. This inspection was an urgent focused review of information to gain assurances on concerns that had been raised about the safety of services provided by the practice.

The full reports for previous inspections can be found by selecting the ‘all reports’ link for Dr PV Gudi and Partner on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

This inspection was a comprehensive inspection to follow up on any breaches of regulations and ‘shoulds’ identified in the previous inspection.

## How we carried out the inspection/review

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:

- 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 site visit

## Our findings

# 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 found that:

- On reviewing a random sample of patients records we found some of the clinical consultations lacked sufficient information and safety netting.
- Communication between staff needed further strengthening to ensure all staff were aware of what changes were being implemented.
- Systems had been strengthened to ensure safeguarding registers were monitored effectively. Regular reviews of the registers were carried out to ensure all the relevant information had been recorded appropriately and safeguarding arrangements protected patients from avoidable harm.
- Action plans were in place to review quality indicators and regular audits were completed to improve patient outcomes.
- Effective procedures for the management of medicines had been implemented to ensure patients received the appropriate reviews.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. This included individual risk assessments for staff and the use of Personal Protective Equipment (PPE).
- Since the previous inspection the leadership team had reviewed the practice procedures and implemented effective processes to ensure staff training was monitored and staff completed training relevant to their role.
- Governance arrangements had been strengthened to ensure risks to patients were considered, managed and mitigated appropriately.

The provider **should**:

- Develop processes to encourage patients to attend immunisation and cervical screening appointments.
- Improve processes to gather patient feedback.

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

I am taking this service out of special measures. This recognises the significant improvements that have been made to the quality of care provided by this service.

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Our inspection team

Our inspection team undertook a site visit. This was led by a CQC lead inspector and included a GP specialist advisor.

## Background to Dr PV Gudi and Partner

Dr P V Gudi and Partner is located in Hill Top, West Bromwich, an area of the West Midlands. The practice has a General Medical Services contract (GMS) with NHS England.

The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures, treatment of disease, disorder or injury, family planning, maternity and midwifery services and surgical procedures. The practice is part of Black Country & West Birmingham Clinical Commissioning Group (CCG) and provides services to 5,600 patients.

The practice partnership has recently changed, with the retirement of one of the GPs. There are now two partners (one female GP and one male clinical pharmacist) and one male salaried GP. The GPs are supported by a practice nurse and two health care assistants. There is a part time practice manager who is supported by a team of reception and administrative staff.

Information published by Public Health England rates the level of deprivation within the practice population group as two, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Based on data available from Public Health England 67% of the practice population is from a white background.

The practice is open between 8am and 6.30pm Monday to Friday. The telephone lines are available from 8am to 6.30pm. Consultation times are 9am to 12.30pm and 4pm to 6.30pm daily. Extended opening hours are on a Monday and Tuesday evening between 6.30pm and 8pm.

Due to the current Covid-19 pandemic the practice is offering telephone consultations with a clinician. Face to face appointments are only available if deemed necessary by the GP.

The practice has opted out of providing an out-of-hours service. Patients calling the practice when it is closed relate to the local out-of-hours service provider via NHS 111.