

Govind Health 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.

Ratings

Overall rating for this service

Good



Are services safe?

Good



Summary of findings

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Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Govind Health Centre on 12 July 2017. The overall rating for the practice was good but required improvement for providing safe services.

The full comprehensive report on the 12 July 2017 inspection can be found by selecting the 'all reports' link for Govind Health Centre on our website at www.cqc.org.uk.

This desk-based review was carried out on 7 February 2018 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 12 July 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as Good

Our key findings were as follows:

- Immediately following the previous inspection the practice ran searches and identified one patient that had been affected by an alert. This patient was contacted by letter and informed of the action to take.
- The practice had put in place systems and processes to ensure that all safety alerts were managed, reviewed, actioned and communicated to all relevant staff and patients, and had installed an additional computer system to support this.
- The practice had put in place the formal recording of meetings. Examples of this were the weekly clinical meetings where safety alerts were discussed.
- The patient participation group had a schedule of meetings in place and the practice continued to try to increase the membership.
- Minutes of all meetings were now produced in a standard template and action points were recorded.

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?

Good



Govind Health Centre

Detailed findings

Our inspection team

Our inspection team was led by:

This focussed follow up inspection was carried out as a desk based review by an inspector.

Background to Govind Health Centre

Govind Health Centre is a GP practice which provides primary medical services under a General Medical Services (GMS) contract to a population of approximately 2,700 patients living in Earlsdon and the surrounding areas in Coventry. A GMS contract is a standard nationally agreed contract used for general medical services providers.

The practice operates from a two storey building and patients are seen on the ground floor and first floor. The practice has a ramp and electronically operated automatic doors to allow access for patients with mobility aids and there is a lift to allow patients easy access to the first floor for consultations. The practice population has a higher than average number of patients aged over 50 years and those over 85 years and a lower than average number of patients aged 0-25 years. National data indicates that the area is one that does not experience high levels of deprivation. The practice population is made up of predominantly white British patients. The practice is one of three practices which form a larger organisation and staff records and organisational policies and procedures are maintained centrally. The practice is a teaching practice providing support and tuition to medical students and qualified doctors who are training to be GPs.

The practice has allocated GPs and staff to each location. There are three GP partners, two male and one female and one of the GPs is the lead for this location. They currently employ two salaried GPs, two practice nurses, one of whom is a nurse prescriber, a health care assistant and a practice manager who are supported by a team of reception and administration staff.

The practice is open on Monday, Tuesday, and Friday from 8am until 6.30pm, Thursdays from 8am until 1pm and on Wednesdays from 8am until 8pm. Appointments are available between these times. The practice offers a GP triage service which allows patients to be assessed by a GP to determine if an urgent appointment is necessary. When the surgery is not open during core hours, calls are diverted to the Warwickshire Ambulance Service via the NHS 111 service who also provides the out of hours service. This is a locally agreed contract.

Why we carried out this inspection

We undertook a comprehensive inspection of Govind Health Centre on 12 July 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated Good overall but with requires improvement in the Safe domain. The full comprehensive report following the inspection on 12 July 2017 can be found by selecting the 'all reports' link for Govind Health Centre on our website at www.cqc.org.uk.

We undertook a follow up desk-based focused inspection Govind Health Centre on 7 February 2018 This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements

Are services safe?

Our findings

Safety systems and processes

At our previous inspection on 12 July 2017, we rated the practice as requires improvement for providing safe services as the registered person had not done all that was reasonably practicable to assess, monitor, manage and mitigate risks to the health and safety of patients who used the services. In particular:

- The system for recording actions from safety alerts did not demonstrate that actions from all alerts had been taken.

These arrangements had significantly improved when we undertook a follow up inspection on 7 February 2018. The practice is now rated as good for providing safe services.

- The practice had improved the systems. Immediately following the previous inspection the practice ran searches to identify any patients who should have been contacted. Only one patient was identified and the practice followed up by writing to the patient to give details of the alert and action to be taken.
- They had put in place a system that ensured all safety notifications were assessed on a weekly basis and discussed with the team at the clinical meeting. Any notifications were actioned by the practice manager and copies of minutes of the meetings were distributed to all relevant staff.

- Searches were completed in the clinical system to identify any patients that may be affected and any actions were added to the patient record.
- The practice manager carried out a weekly review of all alerts using the Medicines and Healthcare products Regulatory Agency (MHRA) website and a monthly summary of alerts was completed. In addition, a check was undertaken of all letters sent to healthcare professionals for each month to ensure none were omitted. A member of staff was identified to carry out these tasks in the absence of the practice manager.
- The practice also installed new computer system to run alongside the current clinical system which would review alerts and send notifications and details of the alert to clinicians. The system would also notify the clinician if there was an attempt to prescribe any medicine affected by an MHRA notification. The system was installed on all computers in the practice and all staff received training on its use.
- Clinical audits were undertaken annually to review the process. Non-clinical staff were also reviewed on their role in any of the processes at their annual appraisal.
- Annual audits had been scheduled on all alert searches to review the safety and reliability of the new system. The next audit was scheduled for April 2018, following six months use of the system to assess its effectiveness and highlight and rectify any issues.