

Dr K Dhillon

Inspection report

Eagle Way Surgery, 129 Eagle Way
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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 

Overall summary

We carried out an announced comprehensive inspection at Dr K Dhillon known as Eagle Way Surgery on 20 September 2016. The overall rating for the practice was good, with safe rated as requires improvement. The full comprehensive report on the September 2016 inspection can be found by selecting the 'all reports' link for Dr K Dhillon on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 9 April 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 20 September 2016. Additional areas of concern subsequently identified since the first inspection were also discussed. 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:

- There was now an effective system to monitor and review patients who were prescribed medicines, including those that were high risk.

- Staff carrying out cytology procedures had received up to date training.
- Staff administering vaccinations had been suitably trained to respond to a medical emergency in the event of a patient suffering from anaphylaxis.
- The contents of the first aid kits were in date. There was a system to monitor expiry dates.
- The infection control audit had been revised. The carpets, walls and curtains used in the clinical rooms had been considered in this.
- Prescription stationery was being tracked.
- Carers were not routinely offered an annual health check, although some patients received these opportunistically, and there were systems to direct relevant patients to avenues of support.
- The practice was higher than average for the prescribing of certain antibiotics.

The practice should:

- Continue to take steps to review and improve data concerning the prescribing of certain antibiotics.

Professor Steve Field CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

Population group ratings

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

Our inspection team

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

Background to Dr K Dhillon

Dr K Dhillon, also known as Eagle Way Surgery, is located in Shoeburyness in Southend on Sea and provides GP services to approximately 2300 patients. The practice is part of the Southend Clinical Commissioning Group.

The practice population has a higher number of children aged five to 18 years compared to the local and England average, and a lower number of patients aged over 65 years. Economic deprivation levels affecting children and older people are higher than average. Unemployment levels are considerably lower than the local and England average. The life expectancy of male patients is higher than the local average by one year, and the female life expectancy is comparable. The number of patients on the practice's list that have long standing health conditions is lower than average. The number of patients who are carers is comparable to local and England averages.

Dr K Dhillon is managed by a partnership of a female and male GP. They are supported by a further male GP who is also appointed as the practice manager. There are no nurses employed by the practice.

With the exception of Wednesdays the practice is open from 8.30am to 6.30pm Monday to Friday. The practice closes at 1pm on Wednesdays, when patients are directed to the out of hours service. The out of service is provided by IC24, another healthcare provider. Appointments are available throughout the day. There was discretion to extend morning and afternoon clinics at the patient's request.

Are services safe?

At our previous inspection on 20 September 2016, we rated the practice as requires improvement for providing safe services as the arrangements in respect of cleanliness and infection control were not adequate. Not all clinical staff had received updated training in what action to take should a patient suffered from an adverse reaction after they had received a vaccination and the staff member who carried out cytology procedures had not received updated training. The systems to monitor and review patients who were prescribed medicines, including those that were high-risk, were not applied consistently. Not all items in the first aid kit were in date.

These arrangements had significantly improved when we undertook a follow up inspection on 9 April 2018. The practice is now rated as good for providing safe services.

Safety systems and processes

The practice had reviewed its arrangements in respect of infection prevention and control. An infection control audit had been completed in January 2018. We saw that the practice had considered areas which required improvement and had obtained quotes to consider whether refurbishment was viable. There were plans to address the suitability of the premises longer-term.

We had previously identified that there were items in one first aid kit that had expired and there were no systems to monitor this. On our most recent inspection, we found that items were in date and effective systems had been implemented to monitor expiry dates. There were systems to monitor prescription stationery around the practice.

The practice continued to review and improve its systems to recall relevant patients for their cervical screening. We were shown data to indicate that this was improving annually.

Risks to patients

At our previous inspection, we identified that not all clinicians who administered vaccines had received up-to-date training about what to do should a relevant patient have an adverse reaction and further, a member of the clinical team had not received up to date training in cytology procedures. This was no longer the case as relevant staff had now received this training.

Safe and appropriate use of medicines

We reviewed the records of patients who were prescribed medicines that were high-risk and we found that they were now being monitored appropriately. The practice had implemented a policy for monitoring patients who received repeat prescriptions for high-risk medicines. Monthly audits were undertaken to ensure that the practice was adhering to its policy and guidelines when they prescribed methotrexate, a medicine used to treat some cancers and forms of arthritis.

An outlier was identified in relation to the percentage of antibiotic items prescribed that were Co-Amoxiclav, Cephalosporins or Quinolones. The practice percentage was 16% compared to the CCG average of 11% and England average of 9%. We reviewed the records of four patients who had been prescribed these medicines since the beginning of the year. In two instances, the antibiotics used were not the most appropriate choice.

We were shown evidence of the prescriptions for these types of antibiotics decreasing from October 2017 to December 2017, although these remained higher than the Clinical Commissioning Group (CCG) target. The practice manager, who also worked as a GP in the practice, gave credible reasons as to why they anticipated that this figure would fall in the short-term. Whilst the practice had no plans to carry out an audit of antibiotic prescribing, we saw that this had been discussed at practice meetings.