

Dr A Bisarya

Inspection report

Sandy Lane Health Centre
Sandy Lane
Skelmersdale
WN8 8LA
Tel: 01695736191

Date of inspection visit: 12 October 2022
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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?

Requires Improvement



Are services effective?

Good



Are services well-led?

Good



Overall summary

We carried out an announced focused inspection at Dr Bisarya on 10 & 12 October 2022. Overall, the practice is rated as good.

Safe - requires improvement

Effective - good

Caring – Not inspected

Responsive - Not inspected

Well-led - good

Following our previous inspection on 22 June 2016 the practice was rated good overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Dr Bisarya on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection in line with our inspection priorities. This was a focused inspection that looked at the minimum requirement of the safe, effective and well-led key questions.

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.
- 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:

- The practice had systems and processes in place to assure them that both patients and staff were safe in the working environment but were unable to demonstrate that these were always fully effective.

Overall summary

- The practice had achieved a good standard of care delivery in the majority of areas. Those areas that were in need of further development were known by the practice, who had strived to address them within their agency to do so. Immunisations for children and breast screening were two such areas that the practice had attempted to address.
- The practice had systems and processes in place covering all governance areas with varying degrees of effectiveness. Although we found some gaps, the practice systems had identified others and arrangements that were in place allowed the practice to adapt and respond to our concerns immediately.

The provider **MUST**:

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

The provider **should**:

- Take steps to ensure that staff immunisation status is addressed and recorded.
- Update processes for ensuring that asthma patients have a comprehensive review including prescribing data.
- Take planned steps to improve upon immunisation and breast screening uptake data.
- Action concerns identified by risk assessments in a timely manner.

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 Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The lead inspector was joined by another inspector for the site visit, which included reviewing information and the practice environment. 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 Dr A Bisarya

Dr Bisarya is located in Skelmersdale at:

Sandy Lane Health Centre

Skelmersdale

Lancashire

WN8 8LA

Dr A Bisarya occupies the purpose-built Sandy Lane Health Centre along with two neighbouring GP practices in a residential area on the outskirts of Skelmersdale. There is ample car parking available outside the Health Centre and a ramp at the front entrance of the building to facilitate access for those experiencing difficulties with mobility.

The practice delivers services under a general medical services (GMS) contract with NHS England to 2768 patients and is part of the West Lancashire locality of NHS Lancashire and South Cumbria Integrated Care Board (ICB).

The average life expectancy of the practice population is slightly below both ICB and national averages for males (77.5 years, as opposed to 79 years for both the ICB and nationally) and females (81 years, as opposed to 82 years for the ICB, 83 years nationally). The age distribution of the practice's patient demographic closely aligns with ICB and national averages, with a slightly higher proportion of males aged 50 – 54 and females aged 55 – 59.

Information published by Public Health England rates the level of deprivation within the practice population group as four on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice is staffed by two GP partners (one female and one male). The GPs are assisted by two advanced nursing practitioners (ANPs). Clinical staff are supported by a practice manager and team of four reception and administrative staff and a wider team of allied health professionals including a Primary Care Network (PCN) employed clinical pharmacist.

Practice is open Monday to Friday from 8am until 6.30pm. Appointments are offered both morning and afternoon. The practice offers Enhanced Access hours between 6.30pm until 8.00pm Monday to Friday and from 9am until 5pm on a Saturday through the Skelmersdale Primary Care Network.

Outside normal surgery hours patients are advised to ring 111.

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>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">• Systems of assurance deployed by the practice to manage environmental risk were not always effective or working as intended. Infection prevention and control (IPC) risk assessments in place were inaccurate and did not consider all elements of risk.• Systems in place to manage risk to patients in relation to prescribed medicines were not always fully effective. We found 43 patients had not had appropriate monitoring and medicine reviews were not to a good standard and had not picked up these patients.• The practice system for identifying and acting upon medicine safety alerts was not fully effective. We found that 54 patients had not been given appropriate warnings in relation to two safety alerts. <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>