

Dr Guindy and Partners

Inspection report

Orchard Surgery
Knypersley Road
Norton In The Moors
Stoke On Trent
Staffordshire
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www.orchardsurgery.co.uk






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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 
Are services effective?	Good 
Are services caring?	Good 
Are services responsive?	Good 
Are services well-led?	Good 

Overall summary

We previously carried out an announced comprehensive inspection at Dr Guindy and Partners (also known as Orchard Surgery) on 22 January 2018. The overall rating for the practice was requires improvement. Breaches of legal requirements were found, and requirement notices were served in relation to safe care and treatment and good governance. The full comprehensive report from the 22 January 2018 inspection can be found by selecting the 'all reports' link for Dr Guindy and Partners on our website at www.cqc.org.uk

This inspection was an announced comprehensive inspection carried out on 5 March 2019 as part of our inspection programme for services rated as requires improvement, and to confirm that the practice met the legal requirements in relation to the breach in regulations identified at our previous inspection.

At the last inspection in January 2018 we rated the practice as requires improvement for providing safe services because:

- Patient safety alerts from the Medicines and Healthcare Products Regulatory Agency (MHRA) were not always acted on.
- The practice had not carried out a risk assessment to reflect the emergency medicines required in the practice for the range of treatments offered and the conditions treated. The practice had not carried out a risk assessment to reflect the decision not to carry emergency medicines in doctor's bags.
- Some patient group directives (PGD's) had not been appropriately signed.

At this inspection, we found that the provider had satisfactorily addressed these areas.

At the last inspection in January 2018 we rated the practice as requires improvement for providing a well led services because:

- The practice did not have certificates in place to show that electrical periodic inspection tests had been completed and the risk of blind loops had not been assessed. Asbestos assessments were not in place for the main surgery and the branch surgery.
- Fire drills were not recorded.

- Practice policies, procedures and activities did not always govern practice, for example we saw that staff did not work within the chaperone policy.
- There was a lack of recording of performance for example in meeting the requirements of the Infection Prevention and Control (IPC) audit.
- Verbal complaints were not always responded to and acted upon.

At this inspection, we found that the provider had satisfactorily addressed these areas.

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 have rated this practice as good overall and good for all population groups.

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

The areas where the provider should consider improvements are;

- Continue to improve on the numbers of carers on the practice carer register.
- Consider verbal complaint monitoring further to remove elements of subjectivity.

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 CQC lead inspector. The team included a GP specialist advisor, and a practice manager advisor.

Background to Dr Guindy and Partners

Dr. Guindy and Partners (also known as Orchard Surgery) is located in Norton, Stoke on Trent and delivers regulated activities from Orchard Surgery and its branch in Endon (Endon Surgery). We carried out a comprehensive inspection of Orchard Surgery and also visited the branch as part of this inspection. The practice is part of the NHS Stoke on Trent Clinical Commissioning Group.

The practice is registered with the Care Quality Commission (CQC) as a partnership provider and holds a General Medical Services (GMS) contract with NHS England and provides a number of enhanced services to include minor surgery. A GMS contract is a contract between NHS England and general practices for delivering general medical services.

The practice is an approved training practice and have GP Registrars (trainee doctors) working in the practice. GP registrars are fully qualified doctors with at least three years' experience in hospital medicine. Three of the GP partners at the practice were GP trainers. The practice is also involved in training nurse students.

The practice treats patients of all ages and provides a range of medical services. There are approximately 10,635 registered patients at the practice. The practice local area is in the fourth most deprived decile. The practice has a higher prevalence of older patients aged 65 years or older

23.5%, when compared with the local clinical commissioning group average of 17%. The registered population has a higher prevalence of long term conditions particularly atrial fibrillation, coronary heart disease, cancer, asthma and osteoporosis.

The practice staffing comprises of:

- Four GP partners (three male one female).
- One salaried GP
- An advanced nurse practitioner, a nurse practitioner, three practice nurses, a triage nurse and two healthcare assistants.
- A practice manager, an assistant practice manager and an office manager.
- A team of reception and administration staff.

The main surgery is open between 8am till 1pm and 2pm until 6pm Tuesday to Friday. The practice offers extended hours on a Monday where the practice is open between 8am and 1pm and 2pm until 7pm. The branch surgery is open between 8am till 1pm and 2pm until 6pm Tuesday, Wednesday and Friday. The branch surgery is open between 8am and 1pm on a Thursday morning and is closed Thursday afternoon. The practice offers extended hours on a Monday at both surgeries until 7pm. The

practice has opted out of providing out of hours cover for their patients. The out of hour's service is accessed via calling 111. Additional information about the practice is available on their website: www.orchardsurgery.co.uk