

Dr Anita Sharma

Inspection report

Chadderton South Health Centre
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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

Inspected but not rated



Are services safe?

Inspected but not rated



Are services effective?

Inspected but not rated



Are services well-led?

Inspected but not rated



Overall summary

We carried out a focused inspection of Dr Anita Sharma on 20 January 2021. As part of the inspection our GP specialist advisor accessed the practice's computer systems with the permission of the provider.

This inspection was carried out following a Transitional Monitoring Approach (TMA) assessment. The way we have worked during the Covid-19 pandemic has changed and the TMA is a new approach to regulatory monitoring.

Dr Anita Sharma was placed into special measures following an inspection on 14 June 2019. The practice was removed from special measures and rated good in all areas following an inspection on 7 February 2020. Our approach prior to the Covid-19 pandemic would have been to carry out a full comprehensive inspection 12 months after a practice was removed from special measures to ensure improvements had been maintained. Following the TMA assessment, a decision was made to carry out a focused inspection to review possible risks to patient safety.

We found that:

- The current nurse and healthcare assistant were administering injections that they were not authorised to administer.
- The required pre-employment information was not held for new members of staff.
- Systems and processes to ensure good governance were not in place. For example, there was no process to ensure fridge temperatures were checked daily, or that urgent referrals were made as soon as the need was identified.
- The practice had carried out a low number of annual reviews for patients with long-term conditions. However, the Covid-19 pandemic had an impact on how reviews were carried out.
- The reviews carried out by regular locum staff did not always record the relevant information.
- Repeat prescriptions were issued according to guidance.
- Fit notes were issued according to guidance.

As this was a focused inspection, there is no change to the overall rating or any rating for any key question or population group. Our regulatory role and core purpose of keeping people safe has not changed and there is some action required by the provider.

The areas where the provider **must** make improvements are:

- The provider must ensure care and treatment is provided in a safe way to patients.
- The provider must establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.
- The provider must ensure persons employed by the service provider are of good character, have the qualifications, competence, skills and experience which are necessary for the work to be performed by them and have all the information required under Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The areas where the provider **should** make improvements are:

- The provider should have a system in place to check locum staff are completing the correct level of reviews and documentation.
- The provider should increase the number of long-term condition reviews carried out.

We have issued warning notices in respect of breaches to regulations 12 (safe care and treatment) and 17 (good governance) of the Health and Social Care Act (Regulated Activities) Regulations 2014, and also issued a requirement notice in respect of the breach of regulation 19 (fit and proper persons employed).

Overall summary

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Not inspected	
People with long-term conditions	Not inspected	
Families, children and young people	Not inspected	
Working age people (including those recently retired and students)	Not inspected	
People whose circumstances may make them vulnerable	Not inspected	
People experiencing poor mental health (including people with dementia)	Not inspected	

Our inspection team

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

Background to Dr Anita Sharma

Dr Anita Sharma is located in a two-storey building in the Chadderton area of Oldham.

The provider is registered as an individual. The provider is a female GP assisted by locum GPs. There is a regular locum practice nurse, a healthcare assistant and a regular locum healthcare assistant. There is a practice manager and administrative and reception staff.

The practice is open from 8am until 6.30pm Monday to Friday except on Wednesday, when the practice opened at 6am.

The practice is a member of NHS Oldham Clinical Commissioning Group (CCG). It delivers commissioned services under a Primary Medical Services (PMS) contract. This is a contract between general practices and NHS England for delivering services to the local community. At the time of our inspection there were 3,373 patients registered with the practice.

The National General Practice Profile states that 87% of the practice population are of white ethnicity, and 9% are Asian. Information published by Public Health England rates the level of deprivation within the practice population group as level four on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is 78 years compared to the national average of 79 years. Female life expectancy is 82 years compared to the national average of 83 years.

This section is primarily information for the provider

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 Surgical procedures Treatment of disease, disorder or injury Maternity and midwifery services	<p>Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed</p> <p>The registered person did not have systems and processes in place to ensure staff were of good character or had the required qualifications, skills or experience required for their role. In particular:</p> <ul style="list-style-type: none">• Not all relevant pre-employment checks were carried out.• Not all information required under Schedule 3 was requested or held for staff. <p>This was in breach of Regulation 19 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

Enforcement actions

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 Treatment of disease, disorder or injury Surgical procedures	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The provider had failed to ensure the proper and safe management of medicines. In particular:</p> <ul style="list-style-type: none">• The provider did not have effective arrangements in place for authorising practice nurses and healthcare assistants to administer medicines. <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>There was a lack of systems and processes established and operating effectively to ensure compliance with requirements to demonstrate good governance. In particular:</p> <ul style="list-style-type: none">• The system for authorising practitioners to administer certain medicines was not effective.• The system for monitoring the temperature of fridges containing medicines was not effective.• Your system for monitoring urgent referrals was not effective. <p>This was in breach of Regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>