

Dr S Bhadra & Dr A Padiyar Partners

Inspection report

Erith Health Centre
50 Pier Road
Erith
DA8 1RQ
Tel: 01322330283
www.goodhealthpms.co.uk

Date of inspection visit: 18 November 2020
Date of publication: 28/01/2021

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	Requires Improvement	
Are services safe?	Requires Improvement	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Requires Improvement	

Overall summary

Dr S Bhadra and Dr A Padiyar Partners (also known as Riverside Surgery) is a GP practice location in the London Borough of Bexley.

We carried out an inspection of this service as a follow up inspection as there were regulatory breaches identified at their last inspection, which was on 16 October 2019.

This was a comprehensive announced inspection carried out mainly remotely, with a short on-site visit conducted on 18 November 2020. We rated the location as requires improvement overall.

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 requires improvement overall and for the population group of people with long term conditions.

We rated the practice as **requires improvement** for providing safe services because:

- There were appropriate risk management systems in relation to the practice premises.
- The practice had practices and processes to keep people safe and safeguarded from abuse.
- The practice followed published requirements to protect staff and patients through appropriate staff vaccination.
- Appropriate standards of cleanliness and hygiene were met, including newly introduced arrangements in response to the COVID-19 pandemic.
- However, the practice had not maintained all necessary arrangements in relation to medicines management.

We rated the practice as **good** for providing effective services because:

- There was evidence of quality improvement activity.
- Staff were receiving regular appraisals.
- Effective joint working was in place. The practice held monthly multidisciplinary meetings and detailed records of discussions and action points were retained.
- Staff worked together and with other organisations to deliver effective care and treatment.
- The practice was able to demonstrate that staff had the skills, knowledge and experience to carry out their roles.
- However we found the provider needed to make improvement in the care of the population groups of People with long-term conditions, as , we found that some patients prescribed medicines that required additional monitoring were not reviewed and / or monitored in line with published guidance.

We rated the practice as **good** for providing caring services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patient feedback from GP patient survey results were in line with local and national averages.

We rated the practice as **good** for responsive services because:

- Complaints were managed in a timely fashion and detailed responses were provided.

Overall summary

- Feedback from the patient survey indicated that respondents' ease of access care and treatment was in line with local area and national averages.
- The practice was continually reviewing and adjusting the appointment system to cater to the needs of patients and had introduced online consultations to improve access.

We rated the practice as **requires improvement** for providing well-led services because:

- The provider had a patient participation group although it had suspended its activities during the pandemic. The practice did not act on other sources of patient views to improve services and culture.
- The practice did not have proper effective arrangements for identifying, managing and mitigating risks, as appropriate and accurate information was not consistently maintained within clinical records.
- Risks to the health, safety and welfare of patients were not properly assessed, monitored and mitigated against, as appropriate and accurate information was not consistently maintained within clinical records.
- The practice did not maintain securely an accurate, complete and contemporaneous record in respect of each service user, including a record of the care and treatment provided to the service user and of decisions taken in relation to the care and treatment provided.

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

- Ensure care and treatment is provided in a safe way to patients
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

(Please see the specific details on action required at the end of this report).

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

- Continue to review their arrangements for identifying people with caring responsibilities.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Good 
People with long-term conditions	Requires Improvement 
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 other team members were a GP specialist advisor, a CQC national professional advisor / pharmacy specialist and a second CQC inspector.

Background to Dr S Bhadra & Dr A Padiyar Partners

Dr S Bhadra and Dr A Padiyar Partners (also known as Riverside Surgery) is a GP practice located in the London Borough of Bexley. The practice has a main site at Erith Health Centre, 50 Pier Road, Erith, DA8 1RQ, and a branch site at Mill Road Surgery, 25 Mill Road, Erith, Kent DA8 1HW which has been in operation since August 2018. We visited both sites during this inspection. The practice formally had a branch site at Barnehurst Surgery, 83 Barnehurst Road, Barnehurst, DA7 6HD, which closed in 2016.

This practice was formally registered as Good Health PMS but changed legal entity in 2018 to become its current registration name.

At the time of our inspection the practice had approximately 9000 registered patients.

The practice clinical staff team consisted of two GP partners (one is male, one female), one salaried GP, two nurse practitioners, four practice nurses and one training nurse associate and a healthcare assistant. They were supported by a practice management team that comprised of a business manager, two branch managers, two business support officers, one scanning clerk, one anticoagulation service manager, and a team of ten patient advisors (receptionists) staff.

Riverside Surgery has a personal medical services (PMS) contract for the provision of its general practice services. Services provided in the practice include general medical services, mother and baby clinic, contraceptive services, minor surgery, and travel health.

Riverside Surgery is registered with the Care Quality Commission (CQC) to carry on the regulated activities of Diagnostic and screening procedures; Treatment of disease, disorder or injury; Maternity and midwifery services; Family planning; and Surgical procedures to everyone in the population. These regulated activities are provided from the main and branch practice sites.

The main practice site at Erith Health Centre is open between 8am and 8pm on Monday and Wednesday and between 8am and 6.30pm on Tuesday, Thursday and Friday. The branch site, Mill Road Surgery, is open between 8am and 6pm on Monday to Thursday, and 8am to 8pm on Friday. Post 6.30pm, there was buzzer access for appointments only.

At the Erith Health Centre site, appointments are from 8:30am to 12:30pm, then from 1.30pm to 8pm on Mondays to Wednesdays. On Tuesdays, Thursdays and Fridays appointments are available at the Erith Health Centre site between 08.30am and 12:30pm then 1.30pm to 6.30pm.

At the branch site, appointment times are from 08:30am to 12:30pm then 4pm to 6.30pm on Mondays. Appointments are available on Tuesday 10am to 12.30pm, then 1.30pm to 3.30pm, then 4.30pm to 6.30pm, on Wednesday 9am to 12.30pm, then 1.30pm to 6.30pm, on Thursday 8.30am to 1pm, then 1.30pm to 6.30pm, and on Friday 8.30am to 12.30pm then 4pm to 8pm.

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	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment
Family planning services	There were gaps in the proper and safe management of medicines:
Maternity and midwifery services	Staff did not always have the appropriate authorisations to administer medicines through Patient Group Directions.
Surgical procedures	There was not always evidence of structured medicines reviews for patients on repeat medicines or process for monitoring patients' health in relation to the use of medicines that needed additional monitoring.
Treatment of disease, disorder or injury	The medical oxygen and a defibrillator checks at Pier road site did not confirm they were fit for use.

This section is primarily information for the provider

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 Surgical procedures Treatment of disease, disorder or injury	Regulation 17 HSCA (RA) Regulations 2014 Good governance <ul style="list-style-type: none">• Risks to the health, safety and welfare of patients were not properly assessed, monitored and mitigated against.• The practice did not maintain securely an accurate, complete and contemporaneous record in respect of each service user, including a record of the care and treatment provided to the service user and of decisions taken in relation to the care and treatment provided <p>We told the provider to become compliant by 26 February 2021.</p>