

# Dr Manickam Murugan

## Quality Report

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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.

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Manickam Murugan on 17 May 2017. The overall rating for the practice was inadequate and the practice was placed in special measures for a period of six months.

We found three breaches of legal requirements and as a result we issued requirement notices in relation to:

- Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulation 2014 – Good Governance
- Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulation 2014 – Fit and Proper Persons Employed

In addition we issued a warning notice in relation to:

- Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulation 2014 – Safe Care and Treatment.

# Summary of findings

This inspection was an announced focused inspection carried out on 2 October 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breach in Regulation 12 that we identified in our previous inspection on 17 May 2017. This report only covers our findings in relation to those requirements. The full comprehensive report on the May 2017 inspection can be found by selecting the 'all reports' link for Dr Murugan Manickam on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Our key findings are as follows:

- We found that the practice had addressed the issues identified in the warning notice.
- A clinical monitoring policy and monitoring form had been developed to be used when supervising clinical staff.
- There were no staff working in an advanced clinical capacity currently employed so we were unable to check the effectiveness for the policy and monitoring form in practice.
- We saw records that demonstrated the provider had supervised the newly appointed practice nurse and reviewed a random sample of the electronic records to ensure that adequate information had been recorded and the practice nurse had covered all aspects during the consultation as required.

**Professor Steve Field (CBE FRCP FFPH FRCGP)**  
Chief Inspector of General Practice

# Dr Manickam Murugan

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection team was led by a Care Quality Commission (CQC) Lead Inspector.

## Background to Dr Manickam Murugan

Dr Manickam Murugan is registered with the Care Quality Commission (CQC) as an individual provider operating a GP practice in Hednesford, Cannock. The practice is part of the NHS Cannock Chase Clinical Commissioning Group. The practice holds a General Medical Services (GMS) contract with NHS England. A GMS contract is a contract between NHS England and general practices for delivering general medical services and is the commonest form of GP contract. At the time of our inspection the practice had 3,549 patients.

The practice staffing comprises of:

- One male GP, and a part time locum female GP.
- A part time female practice nurse and a part time health care assistant.
- A practice manager, an assistant manager (locum), reception staff and secretary (locum).

The practice is open between 8am and 6.30pm Monday to Friday. Consultations with clinical staff are available every day except Wednesday afternoons. The practice list size is increasing steadily as the practice registers new patients. Extended consultation hours with the locum GP and practice nurse are available on Monday and Tuesday evenings.

Patients requiring a GP outside of normal working hours are advised to call the practice, where the call is automatically diverted to the out of hours service, which is Staffordshire Doctors Urgent Care.

## Why we carried out this inspection

We undertook a comprehensive inspection of Dr Manickam Murugan on 17 May 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as inadequate for providing safe, effective and well led services and was placed into special measures for a period of six months.

We also issued a warning notice to the provider in respect of safe care and treatment and informed them that they must become compliant with the law by 31 July 2017. We undertook a follow up inspection on 2 October 2017 to check that action had been taken to comply with legal requirements. The full comprehensive report on the May 2017 inspection can be found by selecting the 'all reports' link for Dr Manickam Murugan on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

## How we carried out this inspection

We carried out an announced focused inspection of Dr Manickam Murugan on 2 October 2017.

During our visit we:

- Spoke with the GP, the practice manager and deputy practice manager.
- Looked at the supervision records made by the GP.
- Looked at the supervision policy and monitoring form.

# Are services effective?

(for example, treatment is effective)

## Our findings

At our previous inspection on 17 May 2017, we rated the practice as inadequate for providing effective services. This was because the provider had not assured themselves that clinical staff, especially those working in advanced roles had the necessary skills and competency to carry out those roles, and there was no evidence to support that the GP provided any clinical supervision.

### **Effective staffing**

At the time of this inspection the practice did not employ any staff working in an advanced clinical role. However, the provider had developed a clinical monitoring policy and monitoring form following the previous inspection. The monitoring form included recording any issues, specific action and learning outcomes and action points, including timescales and responsibilities. We were unable to check the effectiveness for the policy and monitoring form in practice.

The provider had employed a new practice nurse since our previous inspection, who had worked at the practice for three weeks. Dr Murugan told us he had observed the practice nurse during several consultations and had randomly checked the electronic records every two days to ensure that adequate information had been recorded and the practice nurse had covered all aspects during the consultation as required. Dr Murugan told us he was satisfied with the practice and record keeping he had seen so far. We saw from Dr Murugan's notes that the practice nurse was recording information such as consent, batch number and expiry dates for vaccines, advice given to patients, and that she had also sought advice from Dr Murugan when she was unsure. However, Dr Murugan's notes /observations were recorded on sheets of paper, and not on the monitoring form. Dr Murugan told us he planned to discuss his findings with the practice nurse the day after this inspection and would then carry out supervision on a monthly basis.