

Dr Azim Khan

Inspection report

Unity Surgery
318 Westdale Lane, Mapperley
Nottingham
NG3 6EU
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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

Inadequate 

Are services safe?

Inadequate 

Are services effective?

Inadequate 

Are services well-led?

Inadequate 

Overall summary

We carried out an announced inspection at Dr Azim Khan on 5 and 21 July 2022. Overall, the practice is rated as Inadequate.

The ratings for each key question are;

Safe - Inadequate

Effective - Inadequate

Well-led – Inadequate

We had last inspected the practice on 1 December 2017 when it was rated Good.

Why we carried out this inspection.

We undertook this inspection as part of a random selection of services rated Good and Outstanding to test the reliability of our new monitoring approach. This inspection was a focused inspection on the safe, effective and well-led key questions.

This inspection was a focused review of information:

- We reviewed the key questions of safe, effective and well-led in line with our inspection methodology.
- The ratings for the caring and responsive key questions were carried forward from our previous inspection as we had no concerns to indicate that these needed to be reviewed.

How we carried out the inspection.

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A shorter site visit
- Receiving written staff feedback prior to the on-site inspection taking place

Our findings

We based our judgement of the quality of care at this service on a combination of:

Overall summary

- 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 did not always provide care in a way that kept patients safe and protected them from avoidable harm.
- Patients did not always receive effective care and treatment that met their needs.
- The practice had not taken reasonable steps to protect patients and others from the risks posed by healthcare associated infections.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- Patients could access care and treatment in a timely way.
- The provider did not have effective oversight of the systems and processes designed to deliver safe and effective care.

The provider must:

- 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.

I am placing this service in special measures. Services placed in special measures will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

Special measures will give people who use the service the reassurance that the care they get should improve.

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 accompanied by a Practice Manager Specialist Advisor. 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 Azim Khan

Dr Azim Khan, also known as Unity Surgery, is located at:

318 Westdale Lane

Mapperley

Nottingham

NG3 6EU

Dr Azim Khan's practice is known as Unity Surgery, which is in Mapperley in the north-east of Nottingham. It is approximately 3 miles from Nottingham City Centre.

The practice provides primary medical services to approximately 4269 patients through a Personal Medical Services (PMS) contract with Nottinghamshire Integrated Care Board. This had risen from 3783 in July 2016.

The practice has a higher than national average elderly population as well as patients of working age. The practice also has a higher number of patients with long term conditions compared to the local and national average.

The practice is managed by one GP (male) who also undertakes some management duties and has two salaried GPs (female and male); who all work part time. There is also a regular locum GP. In all there are 13 GP sessions per week.

The clinical team includes one practice nurse (29 hours per week) and one health care assistant (four hours per week).

The practice also employs an assistant practice manager and a team of reception, clerical and administrative staff.

The practice is involved in the teaching of medical students from a local medical school. Students in their first, 4th and final year study, spend some time working with one of the GPs at the practice.

The practice is open from 8.30am to 1pm and 2pm to 6.30pm on Monday to Friday.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, family planning, the treatment of disease, disorder or injury and surgical procedures.

The practice is part of a wider network of GP practices known as Arrow Health Primary Care Network.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, many GP appointments were telephone consultations, although the practice had stayed open for face to face appointments as usual throughout the covid pandemic.

Out- of- hours GP services are provided by NEMS.

Enforcement actions

Action we have told the provider to take

The table below shows the legal requirements that were not being met.

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 CQC (Registration) Regulations 2009 Statement of purpose</p> <p>Care and treatment must be provided in a safe way for service users</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• Recruitment procedures were not effective.• Essential training to keep people safe had not been completed.• The assessment of the risk of, and preventing, detecting and controlling the spread of infections, including those that are health care associated was inadequate.• Peoples safety could not be assured during the absence of a key members of staff.• The practice could not demonstrate the prescribing competence of non-medical prescribers, including clinical pharmacists.• The process for monitoring patients' health in relation to the use of medicines including high risk medicines had not been effective. <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>Systems or processes must be established and operated effectively to ensure compliance with the requirements of the fundamental standards as set out in the Health and Social Care Act 2009 (Regulated Activities) Regulation 2014</p> <p>How the regulation was not being met:</p>

Enforcement actions

- The provider was unable to demonstrate that there were comprehensive risk assessments in place.
- The provider was unable to demonstrate that staff had completed training relevant to their role.
- The provider did not have clear oversight of the systems and processes required for the safe and effective delivery of the regulated activities. The provider had systems or processes in place that operated ineffectively in that they failed to enable the registered person to assess, monitor and improve the quality and safety of the services being provided.
- Effective practice management was hampered through lack of experience and knowledge of systems and process and time constraints.

This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.