

Dr Gian Singh

Inspection report

Beechdale Health Centre **Edison Road** Beechdale Walsall **WS2 7EW** Tel: 01922 605260 www.beechdalesurgery.org.uk

Date of inspection visit: 12/03/2019 Date of publication: 09/05/2019

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?	Requires improvement	

Overall summary

We carried out an announced comprehensive inspection at Dr Gian Singh on 12 March 2019 as part of our inspection programme.

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 with requires improvement for providing well lead services. We rated the practice good for all population groups.

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

- The practice did not make full use of information available through the identification of significant events or complaints to assess, monitor and develop the service through shared learning.
- The arrangements in place for identifying, managing and mitigating risks were not always effective.

We rated the practice as **good** for providing safe, effective, caring and responsive services because:

- 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.

- Patients spoke highly about the care and support they received from the practice, and commented on the friendly nature of the practice. They told us they could access appointments when they needed them.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The patient participation group supported the practice through educational events, patient satisfaction surveys and feedback and suggestions from patients.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

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

• Establish effective systems and processes to ensure good governance in accordance with the fundamental standards.

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

Whilst we found no breaches of regulations, the provider should:

- Review and update policies and procedures as required.
- Continue to focus on improving the uptake of cervical, breast and bowel screening.

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	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 Care Quality Commission (CQC) lead inspector. The team included a GP specialist advisor and a practice manager advisor.

Background to Dr Gian Singh

Dr Gian Singh is registered with the Care Quality Commission (CQC) as a single-handed provider operating a GP practice in Walsall, West Midlands. The practice is part of the NHS Walsall Clinical Commissioning Group (CCG). The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services and treatment of disease disorder or injury.

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.

The practice operates from Beechdale Health Centre, Edison Road, Beechdale Walsall, West Midlands, WS2 7EW.

There are approximately 2,737 patients of various ages registered and cared for at the practice. The practice provides GP services in an area considered to be most deprived within its locality. Demographically the practice has a higher than average patient population aged under 18 years, with 29% falling into this category, compared with the CCG average of 24% and England average of 21%. Fourteen per cent of the practice population is

above 65 years which is lower than the CCG average of 16% and the national average of 17%. The percentage of patients with a long-standing health condition is 50% which is below the local CCG average of 52% and the national average of 51%. The practice life expectancy for patients is 76 years for males and 80 years for females which is below the national average.

The practice has one male principle GP, a part time female locum GP, a full time female practice nurse, a part time female phlebotomist, a practice manager and four part time reception/administration staff.

The practice is open between 8am and 6.30pm every day except Wednesday, when the practice closes at 1pm. When the practice is closed patients are directed toward the out of hours provider via the NHS 111 service. Patients also have access to the Extended GP Access. Service between 6.30pm and 9pm on weekdays, 10am to 3pm on weekends, and 11am to 1.30pm on bank holidays.

The practice offers a range of services, for example: management of long-term conditions, child development checks, childhood immunisations and minor surgery. Additional information about the practice is available on their website at

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

that operated ineffectively in that they failed to enable the registered person to assess, monitor and mitigate risks relating to the health, safety and welfare of service users and other who may be at risk: In particular: The practice had not obtained assurances from the landlord regarding fire extinguisher checks, or the completion of a fire risk assessment or storage of hazardous substances risk assessment or provide evidence that they had asked for this information. The practice had not assured that non-clinical staff were up to date with their immunisations. The practice did not make full use of information available through the identification of significant	Regulated activity	Regulation
week and the subsequent reduction in availability appointments.	Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance How the regulation was not being meet: The registered person had systems or processes in place that operated ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and other who may be at risk: In particular: • The practice had not obtained assurances from the landlord regarding fire extinguisher checks, or the completion of a fire risk assessment or storage of hazardous substances risk assessment or provide evidence that they had asked for this information. • The practice had not assured that non-clinical staff were up to date with their immunisations. • The practice did not make full use of information available through the identification of significant events or complaints to assess, monitor and develop the service through shared learning. • The practice had not considered the impact of the nurse practitioner attending university one day a week and the subsequent reduction in availability of

nurse practitioner appointments when the

phlebotomist is on leave.