

Dr S Garlapati and Dr A Garlapati

Inspection report

Allen Street Clinic
Allen Street, Cheadle
Stoke On Trent
ST10 1HJ
Tel: 01538752674

Date of inspection visit: 25 October 2023
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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

Requires Improvement



Are services safe?

Inadequate



Are services effective?

Requires Improvement



Are services responsive to people's needs?

Good



Are services well-led?

Requires Improvement



Overall summary

We carried out an announced focused inspection) at Dr S Garlapati and Dr A Garlapati on 25 October 2023. Overall, the practice is rated as requires improvement.

Safe - inadequate

Effective – requires improvement

Caring – rating of good carried forward from previous inspection

Responsive - good

Well-led - requires improvement

Following our previous inspection on 10 July 2017, the practice was rated good overall and for all key questions. The full reports for previous inspections can be found by selecting the ‘all reports’ link for Dr S Garlapati and Dr A Garlapati on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection in line with our inspection priorities.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting clinical staff interviews using video conferencing.
- Completing clinical searches on the practice’s patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit.
- Conducting staff interviews on site.

Our findings

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 found that:

- Minutes of staff meetings provided showed no evidence that safeguarding was a standing agenda item and safeguarding concerns were shared with the team.

Overall summary

- Governance systems required strengthening to ensure risks were mitigated. For example, we identified concerns in relation to the actioning of safety alerts and risk assessments had not been completed to ensure the safety of the patients and staff at the practice. This included fire safety and infection control.
- The clinical leadership team were unable to provide assurances that they had a clinical supervision process in place for non-medical prescribers and the pharmacy dispensers.
- We identified gaps in staff training and found processes were ineffective to monitor training updates.
- Systems within the dispensary required improvements to ensure the safety of medicines. For example: Fridge temperatures had not been recorded daily over many months.
- 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 could access care and treatment in a timely way

We found breaches of regulations. 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.

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 Health Care

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff and undertook a site visit. 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. A member of the CQC medicines team who undertook a site visit of the dispensary.

Background to Dr S Garlapati and Dr A Garlapati

Dr S Garlapati and Dr A Garlapati is located in Staffordshire at:

Allen Street Clinic

Allen Street

Cheadle

Staffordshire

ST101HJ

The practice has an onsite dispensary which was visited as part of the inspection.

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 and surgical procedures.

The practice is situated within the Staffordshire and Stoke-on-Trent Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 4,600. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices called Moorlands and Rural Primary Care Network.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the second lowest decile (seven of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 98.8% White, 0.6% Asian, 0.6% Mixed and 0.1% Black.

The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

There is a team of 3 GPs who provide cover. The practice has a 1 practice nurse who provides nurse led clinics for long-term conditions. The GPs are supported at the practice by a team of reception/administration staff. The practice manager provides managerial oversight. The practice is also a GP training practice. Currently there are 2 GP registrars working at the practice.

The practice is open between 8.30am to 12.30pm and 1.30pm to 6pm Monday to Friday, except on Thursday afternoon when the practice closes. When the practice is closed on Thursday afternoon the phones are diverted to the primary care network to triage calls. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally by the primary care network, where late evening and weekend appointments are available from 6.30pm to 8pm Monday to Friday and 9am to 2pm on Saturday. Out of hours services are provided by NHS111.

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 Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <ul style="list-style-type: none">• The provider was unable to demonstrate they complied with the relevant safety alerts issued by the Medicines and Healthcare products Regulatory Agency (MHRA).• The storage of controlled drugs was not in line with best practice.• Individual controlled drug registers were not correctly completed with all the medicine information required. We also found entries were crossed out in the registers and balance checks were not being completed.• Infection control policy had not been updated to reflect the infection control lead and there was no clinical oversight of infection prevention.• Staff immunisation status was not recorded for staff in clinical roles. <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 Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <ul style="list-style-type: none">• Fire risk assessments had not been completed to ensure the safety of the premises.• We found staff working at the practice did not have the appropriate supervision to ensure they were carrying out the role they had been employed to do. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>