

Dr Gokaraju Arunaprasad

Quality Report

Patience Lane Surgery
Patience Lane
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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 service

Good



Are services safe?

Good



Summary of findings

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	4

Detailed findings from this inspection

Our inspection team	6
Background to Dr Gokaraju Arunaprasad	6
Why we carried out this inspection	6
How we carried out this inspection	6
Detailed findings	8

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Gokaraju Arunaprasad (Patience Lane Surgery) on 28 September 2016. The overall rating for the practice was Good. However we rated the practice as Requires Improvement for providing safe services. The full comprehensive inspection report can be found by selecting the 'all reports' link for Dr Gokaraju Arunaprasad on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 27 April 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulation that we identified in our previous inspection on 28 September 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

The practice is now rated as Good for providing safe services.

Our key findings were as follows:

- The practice had developed a policy for Patient Group Directions (PGDs) and Patient Specific Directions which had been circulated to all staff. All relevant PGDs were in date, signed and accessible to users.
 - The practice had undertaken a full risk assessment of emergency drugs held in stock, and had purchased additional stock to supplement the medicines held.
 - Fire alarm tests were held weekly. A fire evacuation test had been carried out. Further fire drills were scheduled to be carried out at six monthly intervals.
- In addition we found:
- The practice had developed clear systems and processes for the dissemination of MHRA bulletins, including identifying that any necessary actions or changes had been carried out.
 - The incident reporting system had been improved to include regular reviews of changes made or actions taken as a result of significant incidents.
 - The practice had evaluated the immunisations offered to staff, and all existing staff as well as new recruits were offered immunisation against Measles, Mumps and Rubella (MMR) and Varicella (chicken pox). Other vaccines were available for appropriate staff.

Summary of findings

- The practice had reviewed the systems in place to monitor and improve outcomes for patients. At the time of our visit the practice showed us they were beginning to participate in a local Improvement in Prescribing Plan (ImPP) looking at medicines optimisation audits.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

This inspection was conducted to review issues that we found during our comprehensive inspection carried out on 28 September 2016. The issues identified at that inspection included:

- Patient Group Directions (PGDs) had not been signed by the authorising manager. PGDs are documents permitting the supply and administration of prescription only medicines to groups of patients without the need for individual, named prescriptions.
- There was an effective system in place for reporting and recording significant events. However we did not see evidence that actions identified as required following an incident had been fully implemented in order to allow the incident to be closed down.
- We did not see full evidence to confirm that medicines alerts had been assessed; and any necessary actions addressed.
- Fire alarm tests were held infrequently – on a two to three weekly basis, rather than weekly. We saw that fire evacuation procedures had not been carried out.
- Emergency medicine stocks were incomplete, and risk assessments in relation to those medicines not held, had not been carried out.
- Staff immunity to measles, mumps and rubella and varicella had not been checked, or immunisation offered when appropriate.

Our inspection on 27 April 2017 found:

- The practice had developed a policy for Patient Group Directions (PGDs) and Patient Specific Directions (PSDs) which had been circulated to all staff. We saw that all relevant PGDs were in date, signed and accessible to users. We saw evidence that a system for developing PSDs had been developed and was in use.
- The practice had undertaken a full risk assessment of emergency drugs held in stock, and had purchased additional stock to supplement the medicines held. We saw evidence of a comprehensive stock of emergency medicines. All the medicines were in date, stored safely and fit for use.
- Fire alarm tests were held weekly. We saw evidence of a fire alarm test log. A fire evacuation test had been carried out.

Good



Summary of findings

Further fire drills were scheduled to be carried out at six monthly intervals. The practice was eliciting the help of the patient participation group (PPG) to help with future planned fire evacuations.

In addition we found:

- The practice had developed clear systems and processes for the dissemination of MHRA bulletins, including confirming any necessary actions or changes had been carried out.
- The incident reporting system had been improved to include regular reviews of changes made or actions taken as a result of significant incidents.
- The practice had evaluated the immunisations offered to staff, and all staff were offered immunisation against Measles, Mumps and Rubella (MMR) and Varicella; with relevant staff being offered additional immunisations relevant to their role.

At the time of our visit the practice demonstrated their involvement in local medicines optimisation audits – Improvement in Prescribing Plan (ImPP) which was due to begin within the next few weeks.

Dr Gokaraju Arunaprasad

Detailed findings

Our inspection team

Our inspection team was led by:

This inspection was carried out by a CQC Inspector.

Background to Dr Gokaraju Arunaprasad

The practice is located at Patience Lane Surgery, Patience Lane, Altofts, Normanton, West Yorkshire WF6 2JZ. The practice population is around 2,300 people and is a member of NHS Wakefield Clinical Commissioning Group (CCG). The practice is part of a local GP federation.

The practice is located in premises which provide easy access for those patients with a disability, or those who use a wheelchair; for example there is a ramp leading to the entrance door. Some parking is available on site for patients, including reserved places for those patients with a disability. Other parking is available at adjacent on street locations.

The practice age profile shows that 18% of their patients are aged under 18 years (The CCG average is 20% and national average is 21%). 20% of patients are aged 65 years or older, compared to the CCG average of 18% and national average of 21%.

Average life expectancy for patients at the practice is 78 years for men and 82 years for women (CCG average is 77 years and 81 years and national average 79 years and 83 years respectively).

Information published by Public Health England rates the level of deprivation within the practice population as seven on a scale of one to ten. Level one represents the highest level of deprivation and level ten the lowest. The practice population primarily comprises white British patients.

The practice provides services under the terms of a Personal Medical Services (PMS) contract. The practice offers a range of enhanced local services in relation to:

- Childhood vaccination and immunisation
- Influenza and pneumococcal immunisation
- Avoiding unplanned admissions scheme
- Alcohol intervention and support services
- Rotavirus and shingles immunisation
- Dementia support
- Minor surgery
- Learning disability support
- Improving online access for patients
- Patient participation by use of patient participation group

In addition to these enhanced services the practice also offers support to patients with long term conditions such as asthma, diabetes and coronary heart disease.

The practice has a range of professionals attached to, or working closely with them; including health visitors, district nurses and midwives.

The practice is operated by one principal GP who is male. The medical team is augmented by three regular locum GPs, one male and two female. The clinical team is

Detailed findings

completed by a female practice nurse, female health care assistant and a female phlebotomist. The clinical team is supported by a practice manager and a range of administrative and reception staff.

The practice offers book on the day appointments, pre-bookable appointments, telephone triage consultations or home visits. Appointments can be booked in person, by telephone, or online.

The practice is open between 8am and 6.30pm Monday to Friday with a GP or practice nurse. Appointments are available:

- 8.30am to 10.30am, and 4pm to 6pm Monday, Tuesday and Wednesday
- 8.30am to 11.30am, and 3.30pm and 6pm on Thursday
- 8.30am to 10.30am and 3.30pm to 6pm on Friday.

Out of hours care is provided by Local Care Direct and is accessed by calling the practice telephone number, or contacting NHS 111.

Why we carried out this inspection

We undertook a comprehensive inspection of Dr Gokaraju Arunaprasad on 28 September 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as Good overall. However we rated the practice as Requires Improvement for providing safe services. The full comprehensive report following the inspection on 28 September 2016 can be found by selecting the 'all reports' link for Dr Gokaraju Arunaprasad on our website at www.cqc.org.uk.

We undertook a focused inspection of Dr Gokaraju Arunaprasad on 27 April 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

When we returned to the practice for this inspection, we checked, and saw that the previously awarded ratings were displayed, as required, in the practice premises and on the website

How we carried out this inspection

We carried out a focused inspection of Dr Gokaraju Arunaprasad on 27 April 2017

During our visit we:

- Spoke with the practice manager and the health care assistant.
- Reviewed the newly developed PGD policy, and PGD documentation.
- Reviewed evidence demonstrating the PSD processes.
- Reviewed fire alarm test logs and fire evacuation records.
- Reviewed emergency medicine stocks.
- Reviewed the incident reporting systems.
- Reviewed the process for MHRA alerts.
- Reviewed a newly developed policy relating to staff vaccination and immunisation history, and saw evidence that staff had been offered and received appropriate vaccinations.
- Discussed future plans for medicines audits within the practice.

Are services safe?

Our findings

At our previous inspection on 28 September 2016, we rated the practice as requires improvement for providing safe services. This focused inspection on 27 April 2017 was conducted in order to review the safety issues linked to medicines management, fire safety and patient safety. During this inspection we found that the practice had effectively addressed all the concerns previously identified. The practice is now rated as good for providing safe services.

Safe track record and learning

The practice had reviewed their incident reporting system so that following changes implemented as a result of incidents, a review of the actions was taken to ensure full implementation of required actions. This meant that incidents could be closed down.

Overview of safety systems and process

- Patient Group Directions (PGDs) had been signed as appropriate by the authorising manager. We were assured that staff fully understood the PGD and Patient Specific Directions (PSD) processes, and these were fully implemented. PGDs are written instructions for the supply and administrations of medicines to groups of patients who may not be individually identified before presentation for treatment. PSDs are written instructions, signed by a doctor; dentist or non-medical prescriber for medicines to be supplied and/or administered to a named patient after the prescriber has assessed the patient on an individual basis.
- The practice had evaluated the immunisations offered to staff, and all existing staff had been offered

immunisation against Measles, Mumps and Rubella (MMR) and Varicella; with relevant staff being offered additional immunisations relevant to their role. Newly recruited staff were similarly offered these immunisations. We were told this would be reflected in the recruitment policy.

- The practice had reviewed their process in relation to medicine alerts received within the practice, to ensure that they recorded when medicine alerts had been assessed and actioned.
- At the time of our visit the practice demonstrated their involvement in local medicines optimisation audits – Improvement in Prescribing Plan (ImPP) which was due to begin within the next few weeks.

Monitoring risks to patients

The practice had reviewed their procedures in relation to fire safety in the practice. We saw that weekly fire alarm tests were held. A fire evacuation exercise had been carried out and these were scheduled to be carried out on a six monthly basis. The practice told us they planned to involve the patient participation group in future planned evacuations.

Arrangements to deal with emergencies and major incidents

The practice had reviewed their stock of emergency medicines. They had introduced a formal process for checking of these medicines; and following a risk assessment had purchased additional medicines to be held within their stock of emergency medicines in surgery and in doctors' bags.