

Dr V Paramanathan's Practice

Inspection report

Otterfield Medical Centre
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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?

Requires improvement



Are services effective?

Requires improvement



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 V Paramanathan's Practice on 14 March 2019.

We previously inspected the practice in September 2016. We rated the practice good for providing a safe, effective, responsive and well led service and requires improvement for providing a caring service. We rated the practice good overall. At the inspection we asked the practice to look at ways to improve their low national patient survey scores for patient satisfaction.

At this inspection 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 Requires improvement overall.

We rated the practice as **Requires improvement** for providing safe services because:

- The practice had not undertaken a recent health and safety risk assessment.
- There was a lack of awareness in regard to the need for Patient Group Directions (PGDs) and some (MMR and influenza) had expired in February 2018.
- Defibrillator pads were out of date (expired 2015).
- Calibration of equipment was out of date (last checked in 2016)
- There was no system for checking emergency medicines held on the premises were in date and fit for use.

We rated the practice as **Requires Improvement** for providing an effective service because:

- The practice had not completed any 2 cycle clinical audits and did not have any other systems to measure and improve outcomes for patients.
- Published child immunisation figures were below the minimum World Health Organisation target of 90%.
- Cancer screening targets were below the national average.

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

- There was a lack of clinical supervision of nursing staff resulting in some governance responsibilities such as checking of emergency equipment and emergency medicines not being completed. In addition, PGDs were not complete and up to date.
- Processes for managing risks, issues and performance had lapsed during the refurbishment of the practice. For example, health and safety risk assessments had not been carried out since 2016.

We rated the practice as **good** for providing a caring and responsive services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs.
- Patients could access care and treatment in a timely way.

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

- Ensure care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

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

The areas where the provider **should** make improvements are:

- Consider placing cleaning check lists in a place where they are accessible to staff.
- Consider making significant event forms clearer for review.
- Carry out the planned fire drills.
- Put plans in place to improve outcomes for patients in the cancer screening programme.
- Consider improving systems to identify and support carers.

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)	Requires improvement	
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 CQC lead inspector.
The team included a GP specialist advisor.

Background to Dr V Paramanathan's Practice

Dr V Paramanathan's Practice, also known as the Otterfield Medical Centre is located in West Drayton in the London Borough of Hillingdon. The practice provides a general practice service to around 7200 patients.

The practice is registered as a partnership with the Care Quality Commission (CQC) to provide the regulated activities of: treatment of disease, disorder or injury; diagnostic and screening procedures; family planning services; surgical procedures and maternity and midwifery services. The practice has a Primary Medical Services (PMS) contract and provides a full range of essential, additional and enhanced services including maternity services, child and adult immunisations, family planning and sexual health services.

The practice has a diverse population with a number of patients registered at the practice being single parents, the homeless and also substance misusers. The practice also provides care to the residents of a local nursing

home. The majority of patients at the nursing home have a diagnosis of dementia. Forty-five percent of patients are under the age of 18 and 21% are over the age of 65. Forty-six percent have a long-standing health condition.

The practice has one female GP partner and three male GP partners and employs a female salaried GP, working a total of thirty sessions amongst them. The practice has a full-time practice manager; the remainder of the practice team consists of two part-time practice nurses; a part-time health care assistant, part-time pharmacist and administrative staff.

The practice is currently open five days a week from 8:00am-6:30pm on Mondays to Fridays. The practice offers extended hours on Saturdays for pre-booked appointments between 9:00-11:30am. Consultation times are 8:30am until 12:30pm and 3:00pm until 6:00pm. When the practice is closed, the telephone answering service directs patients to contact the out of hours provider.

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 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.

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>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.</p> <p>In particular we found:</p> <ul style="list-style-type: none">• The arrangements for identifying, recording and managing risks and issues were not operated effectively, in particular:<ul style="list-style-type: none">▪ Nurses showed a lack of awareness of PGDs and were unable to locate them when asked. When they were found, not all that we would expect to see were there and some had expired.▪ There was a lack of supervision of nursing staff. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>