

Dr A Cashyap and Partners

Inspection report

Davenport House
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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

Good



Are services safe?

Requires improvement



Are services effective?

Good



Are services well-led?

Good



Overall summary

We carried out an inspection of this service following our annual review of the information available to us including information provided by the practice. Our review indicated that there may have been a significant change to the quality of care provided since the last inspection.

This inspection focused on the following key questions: safe, effective and well-led.

Because of the assurance received from our review of information we carried forward the ratings for the following key questions: caring and responsive.

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 and good for all population groups.

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

- The practice's systems for the appropriate and safe use of medicines, including medicines optimisation were not always comprehensive.
- The system for acting on safety alerts was insufficient.

Please see the final section of this report for specific details of our concerns.

We rated the practice as good for providing effective and well-led services because:

- Patients received effective care and treatment that met their needs. The practice routinely reviewed the effectiveness and appropriateness of the care it provided. Staff had the skills, knowledge and experience to deliver effective care and treatment.
- The way the practice was led and managed promoted the delivery of high quality, person-centred care and an

inclusive, supportive environment for staff. There was a focus on continuous learning and improvement at all levels of the organisation. Where we identified any concerns during our inspection, the practice took action to respond or plans of action were developed to ensure any issues were resolved.

The area where the provider must make improvements is:

- Ensure care and treatment is provided in a safe way to patients.

Please see the final section of this report for specific details of the action we require the provider to take.

The areas where the provider should make improvements are:

- Continue to strengthen policies, systems and processes at the practice. Especially those in relation to staff vaccinations, communicating with the Out of Hours service about safeguarding concerns, responding to instances of 'was not brought' children, monitoring and recording the collection of patient prescriptions for controlled drugs, and encouraging women to attend for their cervical screening.
- Implement a comprehensive system of staff appraisal and training to include all staff receiving an annual appraisal and completing all essential training in a timely way and at the appropriate level for their roles.
- Continue to take steps so that prescription stationery is always securely stored.
- Take steps so that water temperatures at the practice are within the required levels.
- Provide staff with access to a Freedom to Speak Up Guardian.

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 adviser and a practice nurse specialist adviser.

Background to Dr A Cashyap and Partners

Dr A Cashyap and Partners (also known as Davenport House Surgery) provides a range of primary medical services from its premises at Davenport House, Bowers Way, Harpenden, Hertfordshire, AL5 4HX.

The practice is part of STAHFED, the St Albans and Harpenden GP federation. The practice is also in the early stages of participating in a Primary Care Network (PCN). (A Primary Care Network is a group of practices working together to provide more coordinated and integrated healthcare to patients).

The provider is registered with CQC to deliver five Regulated Activities. These are: diagnostic and screening procedures; maternity and midwifery services; family planning services; surgical procedures; and treatment of disease, disorder or injury. Services are provided on a General Medical Services (GMS) contract (a nationally agreed contract) to approximately 12,006 patients. The practice has a registered manager in place. (A registered manager is an individual registered with CQC to manage the regulated activities provided).

The practice is within the Hertfordshire local authority and is one of 59 practices serving the NHS Herts Valleys Clinical Commissioning Group (CCG).

The practice team consists of one female and four male GP partners. There are three female salaried GPs, two of whom are currently absent and covered by one female salaried GP and one female locum GP. There are five practice nurses, one nurse medical prescriber, a healthcare assistant, a practice manager and 19 managerial, reception, administration and secretarial staff. Two Primary Care Network employed clinical pharmacists work from the practice. One is an independent prescribing pharmacist.

The practice serves a slightly above average population of those aged five to 18 years and 75 years and over. The practice population is predominantly white British and has a Black and minority ethnic (BME) population of approximately 6.5% (2011 census). Information published by Public Health England rates the level of deprivation within the practice population as 10. This is measured on a scale of one to 10, where level one represents the highest levels of deprivation and level 10 the lowest.

An out of hours service for when the practice is closed is provided by Herts Urgent Care and can be accessed via the NHS 111 service.

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 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met:</p> <p>There was no proper and safe management of medicines. In particular:</p> <p>There was no embedded process in place for the monitoring of uncollected patient prescriptions. Patients who did not collect their prescriptions had not been routinely contacted and there was no subsequent clinical review of those patients.</p> <p>The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:</p> <p>There was no embedded process in place at the practice to ensure the appropriate management of and response to safety alerts including Medicines and Healthcare products Regulatory Agency (MHRA) alerts. Consequently, the appropriate action was not taken in response to two of the five safety alerts we looked at.</p> <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>