

Dr Harjit Singh

Quality Report

Granville 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 service

Good



Are services responsive to people's needs?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Harjit Singh on 12 January 2017. The overall rating for the practice was good. Within that overall rating the practice was rated as requires improvement for providing responsive services. This was because we had concerns that the practice had not addressed the issues highlighted in the national GP survey in order to improve patient satisfaction and in particular, in respect of patient access. We also told the practice it should establish an active patient participation group for the benefit of patient interaction, improvement recommendations and feedback and should provide health and safety training for staff who had not yet been trained.

The full comprehensive report on the January 2017 inspection can be found by selecting the 'reports' link for Dr Harjit Singh on our website at www.cqc.org.uk/location/1-506457724.

This inspection was a desk-based review carried out on 26 September 2017 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified

in our previous inspection on 12 January 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is still rated as good overall and the rating for responsive has now moved to good also.

Our key findings were as follows:

- The practice had increased the opening hours at the surgery by a total of 16 hours per week and was now open every week day between 8am and 6:30pm.
- The practice had taken action to improve access by telephone. They had put an additional line in place for incoming calls as well as a telephone queue management system and had increased the number of staff available to answer telephone calls.
- The practice was now providing two additional GP clinical sessions and one additional nurse clinical session every week.
- The practice had employed a part-time healthcare assistant and was now providing phlebotomy services at the surgery.
- The practice had re-established its patient participation group and the group had been instrumental in securing the installation of a dedicated disabled parking bay at the surgery.

Summary of findings

- The practice provided evidence which demonstrated that all staff had now received health and safety training.

However, there was an area where the provider still needs to make an improvement:

- The practice should continue to monitor patient satisfaction levels with a view to bringing about improvements.

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 responsive to people's needs?

The practice is rated as good for providing responsive services.

Good



- The practice had increased the opening hours at the surgery by a total of 16 hours per week and was now open every week day between 8am and 6:30pm.
- The practice had taken action to improve access by telephone. They had put an additional line in place for incoming calls and had increased the number of staff available to answer telephone calls.
- The practice had installed a telephone queuing management system. This informed patients of their position in the queue and an estimated waiting time. This meant that patients could decide whether to continue on hold or to try at another time.
- Since the January 2017 inspection, the practice had begun to provide two additional GP sessions and one additional practice nurse session every week. This meant the practice was offering an additional 30 clinical appointments per week.
- The practice had employed an experienced part time healthcare assistant and had recently begun to provide a phlebotomy service which meant that patients who needed blood tests were able to have this service at the surgery.
- The practice had successfully applied to have a designated disabled parking bay installed adjacent to the practice. This had improved access for patients with impaired mobility.

Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

The practice is rated as good for the care of older people. The rating was given following the comprehensive inspection in January 2017. The full comprehensive report on the January 2017 inspection can be found by selecting the 'reports' link for Dr Harjit Singh on our website at www.cqc.org.uk/location/1-506457724.

Good



People with long term conditions

The practice is rated as good for the care of people with long-term conditions. The rating was given following the comprehensive inspection in January 2017. The full comprehensive report on the January 2017 inspection can be found by selecting the 'reports' link for Dr Harjit Singh on our website at www.cqc.org.uk/location/1-506457724.

Good



Families, children and young people

The practice is rated as good for the care of families, children and young people. The rating was given following the comprehensive inspection in January 2017. The full comprehensive report on the January 2017 inspection can be found by selecting the 'reports' link for Dr Harjit Singh on our website at www.cqc.org.uk/location/1-506457724.

Good



Working age people (including those recently retired and students)

The practice is rated as good for the care of working age people (including those recently retired and students). The rating was given following the comprehensive inspection in January 2017. The full comprehensive report on the January 2017 inspection can be found by selecting the 'reports' link for Dr Harjit Singh on our website at www.cqc.org.uk/location/1-506457724.

Good



People whose circumstances may make them vulnerable

The practice is rated as good for the care of people whose circumstances may make them vulnerable. The rating was given following the comprehensive inspection in January 2017. The full comprehensive report on the January 2017 inspection can be found by selecting the 'reports' link for Dr Harjit Singh on our website at www.cqc.org.uk/location/1-506457724.

Good



Summary of findings

People experiencing poor mental health (including people with dementia)

The practice is rated as good for the care of people experiencing poor mental health (including people with dementia). The rating was given following the comprehensive inspection in January 2017. The full comprehensive report on the January 2017 inspection can be found by selecting the 'reports' link for Dr Harjit Singh on our website at www.cqc.org.uk/location/1-506457724.

Good



Summary of findings

Areas for improvement

Action the service **SHOULD** take to improve

- The practice should continue to monitor patient satisfaction levels with a view to bringing about improvements.

Dr Harjit Singh

Detailed findings

Our inspection team

Our inspection team was led by:

The desk based focused inspection was completed by a CQC Lead Inspector.

Background to Dr Harjit Singh

Dr H Singh (Granville Medical Centre) provides primary medical services in Ilford to approximately 5400 patients and is a member of NHS Redbridge Clinical Commissioning Group (CCG).

The practice population is in the fifth most deprived decile in England. Twenty-seven percent of older people live in income deprived households compared to a local average of 21% and a national average of 16%. The practice had surveyed the ethnicity of the practice population and had determined that 11% of patients described themselves as white, 79% Asian, 3% black and 7% as having mixed or other ethnicity.

The practice operates from a converted residential property with all patient facilities on the ground floor that is wheelchair accessible. There are offices for administrative and management staff on the first floor. Both floors are accessed via stairs.

The practice operates under a General Medical Services (GMS) contract and provides a number of local and national enhanced services (enhanced services require an increased level of service provision above that which is normally required under the core GP contract). The enhanced services it provides are: meningitis immunisation; alcohol brief intervention; childhood vaccination and immunisation scheme; extended hours access; facilitating timely diagnosis and support for people

with dementia; influenza and pneumococcal immunisations; learning disabilities; patient participation; rotavirus and shingles immunisation; and unplanned admissions.

The practice team at the surgery is made up of three part-time GP partners, two male and one female. The doctors provide a total of 20 clinical sessions per week. The nursing team consists of one full-time female nurse practitioner and a part-time healthcare assistant. There are nine administrative, reception and clerical staff including a full part-time practice manager.

The practice is open every weekday between 8am and 6:30pm and between 8am and 11am on one Saturday each month.

GP appointments are available every weekday between 9am and 11:50am and 2:30pm and 6:20pm.

Nurse Appointments are available:

Monday 9am to 1.30pm and 2.30pm to 6.00pm

Tuesday 9am to 1.30pm and 2.30pm to 6pm

Wednesdays 9am to 1:30pm and 2:30pm to 6:30pm

Thursday 8am to 1.30pm.

Friday 9am to 1.30pm and 2.30pm to 5.30pm

Extended surgery hours are offered by all three GP partners and the nurse on the second Saturday of each month from 8.00am until 11.30am. The practice has opted out of providing out of hours (OOH) services to their own patients when it is closed and directs patients to the OOH provider for NHS Redbridge CCG.

Detailed findings

Dr H Singh (Granville Medical Centre) is registered as a partnership with the Care Quality Commission to provide the regulated activities of family planning; maternity and midwifery services; diagnostic and screening procedures; treatment of disease, disorder or injury

Why we carried out this inspection

We undertook a comprehensive inspection of Dr Harjit Singh on 12 January 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall and requires improvement in safe. The full comprehensive report following the inspection in January 2017 can be found by selecting the 'reports' link for Dr Harjit Singh on our website at www.cqc.org.uk/location/1-506457724.

We undertook a follow up desk-based focused inspection of Dr Harjit Singh on 26 September 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.

How we carried out this inspection

We carried out a desk-based focused inspection of Dr Harjit Singh on 26 September 2017. This involved reviewing evidence that the practice had addressed the issues highlighted in the national GP survey in order to improve patient satisfaction, particularly in respect of patient access.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

At our previous inspection on 12 January 2017, we rated the practice as requires improvement because we had concerns that the practice had not addressed the issues highlighted in the national GP survey in order to improve patient satisfaction, including in respect of patient access.

The practice had developed and implemented an action plan to bring about improvements when we undertook a follow up desk-based focused inspection on 26 September 2017. The practice is now rated as good for providing responsive services.

Access to the service

When we inspected in January 2017, results from the national GP patient survey showed patient's level of satisfaction with how they could access care and treatment was below local and national

averages. For instance, only 64% of patients were satisfied with the practice's opening hours compared to the CCG average of 69% and the national average of 78%, whilst just 33% of patients said they could get through easily to the practice by phone compared to the CCG average of 54% and the national average of 73%.

During this inspection we saw evidence that the practice had reviewed the results from the national GP patient survey in relation to patient satisfaction with access to the service and had developed and implemented an action plan to bring about improvements.

- When we inspected in January 2017, the practice was open between 9am and 1pm and 2:30pm and 6pm from Monday to Friday except for Thursdays when the practice closed from 1pm. During this inspection, we found the practice was now open between 8am and 6:30pm every weekday. This meant that the practice had increased its opening hours by a total of 16 hours every week.
- The practice had added an additional telephone line to receive incoming telephone calls and had updated the telephone management system to include a queue management system. This meant that patients waiting to speak with a member of the reception team were advised of their position in the queue and an estimated waiting time.

- The practice had recruited an additional member of staff to the administration team on an apprenticeship scheme. This member of staff was being supported to gain an NVQ level 2 qualification in business administration through a structured training programme. At the time of this desktop inspection, they had undertaken modules including dealing with telephone enquiries, new patient registrations and reception duties. The practice told us this had increased the capacity of the reception team to manage incoming telephone traffic.
- Following the January 2017 inspection, the practice had employed an experienced part time healthcare assistant who worked three days per week at the surgery. The practice had recently begun to provide a phlebotomy service and had made suitable arrangements for the storage and collection of samples as well as protocol to manage test results.
- Since the January 2017 inspection, the practice had begun to provide two additional GP sessions and one additional practice nurse session every week. This meant the practice was offering an additional 30 clinical appointments per week.
- The practice told us they had implemented a policy of actively promoting online access to patients visiting or telephoning the surgery. The practice was able to provide evidence that this service was promoted through a poster in a prominent position in the patient waiting area. We were told this was part of an overall strategy intended to provide patients with easier access to a range of services, including making and cancelling appointments and requesting repeat prescriptions.
- We saw evidence that the practice had successfully applied to the local authority to have a designated disabled parking bay installed directly outside the premises. This meant that people with valid disabled badges could park closer to the surgery.

The practice told us that following the January 2017 inspection, they had undertaken a series of five patient surveys to gain a more detailed understanding of patient's views. In addition to asking questions around satisfaction levels, this had also involved inviting comments around different aspects of the service provided, for instance, patient's experiences of contacting the surgery, appointment waiting times and perceived attitudes of practice staff. These surveys had been used to inform the action plan and had also been used to produce a 'You said

Are services responsive to people's needs?

(for example, to feedback?)

– we did' poster which was displayed in the patient area. This highlighted the longer practice opening hours, increases in clinical sessions and improvements to the telephone service.

The results from the most recent national GP survey were published in July 2017. Although this had shown an improvement in patient satisfaction with practice opening hours from 64% to 72%, only 31% of patients said they found it easy to get through to the surgery by telephone,

compared to the previous level of 33%. We noted that this survey had been undertaken between January 2017 and March 2017. However, the practice told us that the action plan to bring about improvements had only been fully implemented following the publication of the previous inspection report which had been at the end of March 2017. This meant that the impact of the improvement plan was not reflected in the national GP survey results published in July 2017.