

Dr Dixit's Practice

Quality Report

The Galleries Health Centre, Washington, Tyne and Wear, NE38 7NQ

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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



Are services effective?

Good



Are services well-led?

Good



Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced inspection of this practice on 28 April 2015. Breaches of legal requirements were found. After the comprehensive inspection the practice wrote to us to say what they would do to meet the following legal requirements set out in the Health and Social Care Act (HSCA) 2008:

- Regulation 17 HSCA 2008 (Regulated Activities) Regulations 2014 Good governance;
- Regulation 18 HSCA 2008 (Regulated Activities) Regulations 2014 Staffing;
- Regulation 19 HSCA 2008 (Regulated Activities) Regulations 2014 Fit and proper persons employed.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Dr Dixit's Practice on our website at www.cqc.org.uk.

Our key findings were as follows:

- The practice had addressed the issues identified during the previous inspection.
- Significant event and patient safety alerts were managed appropriately and the correct guidelines were followed.
- Systems to manage and monitor the prevention and control of infection were in place and improvements had been made.
- Disclosure and Barring Service checks (DBS) had been completed for all staff.
- Electrical and medical equipment had been checked and was fit for use.
- Arrangements were in place to manage fire safety.
- Staff had received the appropriate training required for their role and an appraisal in the last year.
- There were governance arrangements in place and ongoing improvements were being made.

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?

The practice is rated as good for providing safe services.

Significant events and patient safety alerts were managed appropriately and the correct guidelines were followed. Systems to manage and monitor the prevention and control of infection were in place and improvements had been made. Electrical and medical equipment had been checked and was fit for use. Disclosure and Barring Service checks (DBS) had been completed for all staff. Arrangements were in place to manage fire safety.

Good



Are services effective?

The practice is rated as good for providing effective services.

Staff had received training appropriate to their role and additional training. Staff appraisals and training needs analysis had been carried out.

Good



Are services well-led?

The practice is rated as good for being well-led.

There were governance arrangements in place and ongoing improvements were being made.

Good



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. All patients over the age of 75 had a named GP and were invited to the practice for an over 75 health check. Patients over the age of 65 were offered the pneumococcal and flu vaccine and attendance rates for this in the last season were 94%. The health care assistant and practice nurse carried out home visits to patients who were unable to attend the surgery during the winter flu vaccine season and were able to administer the vaccine if appropriate and carryout a health check. The practice had a palliative care register and had monthly multidisciplinary meetings to discuss patients and their families' care and support needs.

Good



People with long term conditions

The practice is rated as good for the care of people with long-term conditions. There were clinical leads for the management of long term conditions which were shared between the GPs and practice nurse. One of the GPs led on chronic obstructive pulmonary disease, (COPD), diabetes and mental health. The other led on palliative care and learning disabilities. There were practice nurse led clinics for COPD and diabetes. There were recall systems in place and patients were offered an annual health check. We saw the practice achieved maximum Quality and Outcomes Framework (QOF) points available to them for all of the chronic conditions, for example, 100% for COPD which was above the CCG and England averages by 2.9 and 4.8 points. All patients with chronic conditions were offered a pneumococcal and flu vaccine in the last year and the take up rate was 76.9%.

Good



Families, children and young people

The practice is rated as good for the care of families, children and young people. The practice offered child health clinics for children under the age of five in conjunction with the health visitor, practice nurse and a GP; immunisations were available for all children. There were also antenatal clinics. Last year's performance for immunisations was above the averages for the Clinical Commissioning Group (CCG). For example, infant meningococcal C (Men C) vaccination rates for two year old children were 97.3% compared to 97.2% across the CCG; and for five year old children were 100% compared to 97.9% across the CCG.

The practice had recently participated in 'Dr Spike's Fun Day', a health awareness promotion day for parents of young children which was held at the local Surestart Centre (centres which provide

Good



Summary of findings

access to a range of early childhood services). The GP registrar and two reception staff took part in this day. Feedback was taken from the parents and the practice assisted in designing a leaflet for parents on services available to them from primary and secondary care.

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 needs of the working age population (including those recently retired and students) had been identified and the practice had adjusted the services they offered to ensure these were accessible, flexible and offered continuity of care. The practice found telephone consultations worked very well for the working age population. There was on-line access available to book appointments and order repeat prescriptions. There was a text and reminder messaging service. Patients over the age of 45 were offered a blood pressure monitoring check, the target of 92% was achieved.

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 practice worked with multi-disciplinary teams in the case management of vulnerable people. The practice had sign-posted vulnerable patients to various support groups and organisations. Staff we spoke with knew how to recognise signs of abuse in vulnerable adults and children. The practice maintained a register for patients with a learning disability; there were 17 patients on the register of which 82% (14) had received an annual health check. The practice had joint working with services for patients with drug and alcohol addiction. They also signposted patients to support organisations such as Turning Point. The practice's computer system alerted GPs if a patient was also a carer. We were shown the written information available for carers to ensure they understood the various avenues of support available to them.

Good



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). There was a register for those experiencing poor mental health. Referrals for support were available with MIND and other services who could offer support.

Good



Summary of findings

If dementia was suspected referrals were made to the local memory clinic. Staff at the practice had received dementia friends training and a member of staff had been identified as a dementia champion and was to receive training for this.

Summary of findings

What people who use the service say

We did not speak to any patients during this focused inspection.

Dr Dixit's Practice

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC inspector carried out this inspection.

Background to Dr Dixit's Practice

The area covered by Dr Dixit's Practice is primarily the postcode areas of NE37 and NE38 although some areas of DH4 (Mount Pleasant and Biddick Woods) and NE9 (Springwell Village) are covered. The practice provides services from one location, The Galleries Health Centre, Washington, Tyne and Wear, NE38 7NQ.

The Galleries Health Centre is a purpose built premises. Dr Dixit's Practice is one of four practices in the health centre. The facility is part of the Galleries shopping complex and the reception area is shared with the local library on the first floor, there is a ramp for easy access. A lift is available to take patients to street level at the rear of the premises, there are two disabled parking bays shared with the other three practices.

The practice has two GPs partners, both are male. The practice is a training practice and at the time of our inspection there was a female GP registrar working at the practice. There is a practice nurse and one health care assistant. There is a practice manager and six reception and administrative staff.

The practice provides services to approximately 4,900 patients of all ages. The practice is commissioned to provide services within a General Medical Services (GMS) contract with NHS England.

The practice is open between 8.30am and 6pm Monday to Friday.

The service for patients requiring urgent medical attention out of hours is through the NHS 111 service and Primecare (Primary Care Sunderland) Sunderland

Why we carried out this inspection

We undertook an announced focused inspection of Dr Dixit's Practice on 9 December 2015. This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 28 April 2015 had been made. We inspected the practice against three of the five questions, we ask about services: is the service safe, is the service effective, is the service well-led? This is because the service was not meeting some legal requirements at the previous inspection.

How we carried out this inspection

We carried out an announced visit on 9 December 2015. We spoke with, and interviewed, the practice manager and the practice nurse. We looked at records the practice maintained in relation to the provision of services.

Are services safe?

Our findings

Overview of safety systems and processes

When we inspected the practice in April 2015 we saw there was a process for reporting significant events, however, some staff were not clear about their responsibilities to raise concerns and to report incidents and near misses. The form to document them was not always completed and therefore learning from this would not be captured with other incidents.

During the inspection in December 2015 we spoke with the practice manager who told us that they had held training sessions for staff on significant events and the process. The form for staff to complete was readily available on the staff intranet. There had been 20 significant events to date from April 2015, there was to be a 12 month review of all events in March every year. We saw an example of where staff had raised the issue of a letter from hospital with incorrect patient details on it. This had been discussed, learning taken from it and feedback given to the hospital.

At our previous inspection we identified that the process for ensuring staff had seen and read and understood patient safety alerts was not as comprehensive as it could be. The practice manager showed us a log of all patient safety alerts they had created since the previous inspection. They had thought about the process and designed a way that they knew that the alerts had been given to the correct members of staff and were discussed and actioned at team meetings.

Overview of safety systems and processes

At our previous inspection in April 2015 we found the practice to be clean and tidy however the practice had not carried out infection control audits. At this inspection we spoke with the infection control lead who was the practice nurse. They had attended an infection control link practitioner course. Infection control audits had been carried out in August 2015, there were actions identified which had been followed up on. For example the practice nurse had ensured that the cleaner in the premises was using the correct equipment. They had also carried out a hand hygiene audit and carried out spot checks with the staff on this.

At our previous inspection we identified issues with the testing of equipment;

- The date of when portable appliance testing (PAT) had been carried out was variable and not recent.
- The calibration of medical equipment was overdue.

We saw that a contractor had attended the practice and carried out PAT testing, we saw a certificate and an itemised asset register of all portable electrical equipment in the practice. Medical equipment had been calibrated in the last year and the practice manager had added a date to their diary for future testing so that it was not forgotten.

Previously we identified some concerns in relation to recruitment checks.

- The practice did not have a recruitment policy.
- The practice nurse, healthcare assistant and administration staff had not received a (DBS) check. (DBS)

During this inspection we saw a comprehensive and practice specific recruitment policy had been implemented. There had been no new members of staff joining the practice since our last inspection, however, the practice manager told us the policy would be followed for future recruitment. Following our last inspection in April 2015 the practice had made the decision to have all staff DBS checked. We saw a log of the checks and the numbers from the certificates obtained.

Arrangements to deal with emergencies and major incidents

When we inspected the practice in April 2015 we were concerned about the arrangements in place to manage fire safety.

- We were told fire risk assessments were in place but they were held by NHS property services and the practice did not have a copy.
- Regular fire drills were not carried out.
- Only one member of staff had received fire training.

During the inspection of December 2015 we saw that a member of staff had attended a level two fire safety training course and they were the nominated fire warden for the practice. The member of staff had carried out a fire risk assessment. All staff had received fire training. A fire drill had been carried out for the whole building in July 2015 which included the other three practices in the building. At

Are services safe?

this time an issue was identified with fire doors which did not close effectively. As a result of this a patient safety alert was issued to all NHS property managed buildings regarding a safety issue with self-closing fire doors.

Are services effective?

(for example, treatment is effective)

Our findings

Effective staffing

When we inspected the practice in April 2015 we identified some concerns in relation staff training and annual staff appraisals.

- Staff had not received some basic training which included safeguarding, health and safety and fire training.
- Staff appraisals had not been carried out for almost two years but were scheduled to take place in May 2015.

During this inspection we found the practice had addressed both of these concerns. The practice had enrolled with an on-line training company. We looked at training records of individual members of staff training. We saw they had received the appropriate training required for their role. They had also carried out additional training which included accident and incident reporting, complaints, conflict resolution, countering fraud, mental capacity act and dementia awareness. We saw that staff had received appraisals and the practice nurse confirmed they had received theirs. Preparation forms had been completed by staff prior to the appraisal meeting and a training needs analysis had been carried out.

Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

Governance arrangements

When we inspected the practice in April 2015 we had concerns in the way the governance arrangements operated within the practice.

During the inspection in December 2015 we found;

Concerns identified by the inspection in April 2015 had been addressed and ongoing improvements were being made.