

# Dr Anjum Zaidi and Partners

## Inspection report

36 Northwick Park Road  
Harrow  
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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 announced inspection at Dr Anjum Zaidi and Partners, also known as The Northwick Surgery, on 26 August 2021. Overall, the practice is rated as Good.

Safe – Requires improvement

Effective - Good

Well-led - Good

Following our previous inspection on 21 November 2019, the practice was rated Requires Improvement overall and for the Safe and Well-led key questions and for one population group (Working age people). The practice was rated good for the Effective, Caring and Responsive key questions and for the remaining five population groups (Older people; People with long-term conditions; Families, children and young people; People whose circumstances may make them vulnerable; and People experiencing poor mental health).

The full reports for previous inspections can be found by selecting the 'all reports' link for Dr Anjum Zaidi and Partners on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## Why we carried out this inspection

This inspection was a focused inspection to follow up on:

- *The Safe, Effective and Well-led key questions*
- *Requirement notices for Regulation 12 and 17, and any other issues identified at the last inspection*
- *Ratings carried forward from previous inspection for the Caring and Responsive key questions.*

## How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit

## Our findings

We based our judgement of the quality of care at this service on a combination of:

# Overall summary

- 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 for the Effective and Well-led key questions and five population groups (Older people; People with long-term conditions; Families, children and young people; People whose circumstances may make them vulnerable; and People experiencing poor mental health). We have rated the practice Requires Improvement for the Safe key question and working people population group.**

We found that:

- Since our last inspection, there were improvements in the systems, practices and processes to keep people safe and safeguarded from abuse. Appropriate standards of cleanliness and hygiene were now met and the practice had an effective system to learn and make improvements when things went wrong.
- However, we found new concerns in relation to the monitoring and prescribing of some high-risk medicines and the systems for acting on safety alerts was not effective.
- Patients received effective care and treatment that met their needs.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

We found a breach of regulations. The provider **must**:

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

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

- Maintain completed vaccination records for all staff.
- Continue work to improve the systems and processes to increase childhood immunisations and cervical screening uptake.
- Review staff understanding of identifying a deteriorating or acutely unwell patient and the practice's vision and values.
- Formalise the review of prescribing practice for non-medical prescribers.
- Review care home feedback in relation to telephone access to the practice.

**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

<b>Older people</b>	<b>Good</b> 
<b>People with long-term conditions</b>	<b>Good</b> 
<b>Families, children and young people</b>	<b>Good</b> 
<b>Working age people (including those recently retired and students)</b>	<b>Requires Improvement</b> 
<b>People whose circumstances may make them vulnerable</b>	<b>Good</b> 
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Good</b> 

## Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to Dr Anjum Zaidi and Partners

Dr Anjum Zaidi and Partners, also known as The Northwick Surgery, is located in Harrow at:

36 Northwick Park Road

Harrow

Middlesex

HA1 2NU

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, family planning, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.

The practice is situated within the Harrow Clinical Commissioning Group (CCG) and delivers General Medical Services (**GMS**) to a patient population of about 10,500. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices known as Sphere Primary Care Network.

Information published by Public Health England shows that deprivation within the practice population group is in the seventh decile (seven of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 42% Asian, 41% White, 9% Black, 5% Mixed and 3% Other.

The practice is led by four GP partners (two females, two male). Other clinical staff included a salaried GP (male), advanced nurse practitioner (female), enhanced practice nurse (male), four practice nurses (female), a health care assistant (female) and two clinical pharmacists (female). Non-clinical staff included a practice manager, assistant practice manager and a team of administrators / receptionists.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were triaged over the telephone. If the GP needed to see a patient then a face-to-face appointment was offered at the practice.

The practice was open Monday to Friday from 8am – 6.30pm and pre-booked appointments were available with a GP and nurse on Saturday mornings from 9am – 11.15am.

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 were not being met. The provider must send CQC a report that says what action they are 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><b>How the regulation was not being met:</b></p> <ul style="list-style-type: none"><li>• The appropriate monitoring of patients taking ACE inhibitors (angiotensin converting enzyme inhibitors) and ARBs (angiotensin-receptor blockers) was not always evident prior to prescribing. We found three out of five patients had not received renal function and electrolyte blood tests in line with national guidance.</li><li>• We could not be assured that there was appropriate monitoring of patients taking novel oral anticoagulant (NOACs) drugs prior to prescribing as three out of five patients did not have creatinine clearance documented in their records.</li><li>• The system for acting on safety alerts was not effective. An alert from the Medicines and Healthcare products Regulatory Agency (MHRA) had not been actioned for four out of five patients taking a combination of simvastatin and amlodipine and the practice's audit failed to identify all patients still on this combination.</li></ul> <p><b>This was in breach of Regulation 12(2)(g) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</b></p>