

# Dr Thavapalan

#### **Inspection report**

55 Littleheath Road Bexleyheath Kent DA7 5HL Tel: 01322 449327 www.drthavapalanandpartne<u>rs.nhs.uk</u>

Date of inspection visit: 18 November 2019 Date of publication: 30/01/2020

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?	<b>Requires improvement</b>	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Good	

## **Overall summary**

Dr Thavapalan is a provider registered with CQC. The practice was previously rated requires improvement after our inspection in August 2015 and was then found to be good in all areas following a follow up inspection in May 2016.

We carried out an inspection of the provider on 29 March 2019 as part of our inspection programme. At that inspection, we rated the practice requires improvement overall, safe was rated as inadequate, effective and well-led were rated requires improvement and caring and responsive were rated good. We issued a warning notice and a requirement notice in respect of breaches of regulations 12 (Safe care and treatment) and 17 (Good governance) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The concerns related to poor medicines management and insufficient systems and processes. You can read the findings from our last inspection by selecting the 'all reports' link for Dr Thavapalan on our website at .

At this inspection we followed up on breaches of regulations identified at our last comprehensive inspection on 29 March 2019. We carried out an announced comprehensive inspection at Dr Thavapalan on 18 November 2019 to check whether the provider was now meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014

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 requires improvement for safe. We rated this practice good for all population groups.

At this inspection we found:

- The practice was monitoring patients on high risk medicines in accordance with guidance and recommendations.
- The practice had all the recommended emergency medicines and equipment.

- Risks associated with fire, infection control and legionella were adequately assessed.
- The practice had clear systems and processes in place for handling significant events.
- There were systems in place to monitor the professional registrations of clinical staff.
- There was a system in place to ensure staff were regularly appraised.

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

- The system for monitoring test results was not effective to assure the safety of patients. However after the inspection the practice provided evidence to show they had discussed the system seen on the day of the inspection and had now changed the process for reviewing test results to assure the safety for patients.
- On the day of the inspection there was no process in place to monitor patients collecting prescriptions for controlled medicines.
- On the day of the inspection no premises/security risk assessment and health and safety risk had been undertaken.

We rated the practice as **good** for providing effective services because:

- Patients' needs were assessed, and care and treatment were delivered in line with current legislation, standards and evidence-based guidance.
- There was evidence of quality improvement activity.
- Staff were receiving regular appraisals.

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

- The practice respected patients' privacy and dignity.
- Patients we spoke with during our inspection and those who completed comments cards, spoke favourably about the practice: that the staff treated them with respect, that they felt listened to and that they had observed improvements in the practice.
- Patient feedback from the GP patient survey results were in line with local and national averages.

We rated the practice as **good** for responsive services because:

• Complaints were managed in a timely fashion and detailed responses were provided.

## **Overall summary**

- Feedback from the patient survey indicated that respondents' ease of access care and treatment was in line with local area and national averages.
- The practice was continually reviewing and adjusting the appointment system to cater to the needs of patients.

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

- The practice had improved since our inspection 29 March 2019 and had addressed the concerns we found at our previous inspection.
- There were clear responsibilities, roles and systems of accountability to support good governance and management.

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

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

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

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

- Introduce a system for the collection of controlled medicine prescriptions.
- Allocate protected time to staff for training and admin duties.
- Take action so safeguarding training for staff is to the appropriate level.
- Record detail and action taken in meeting minutes.
- Continue to develop and support the Patient Participation Group.

## 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 CQC lead inspector. The team included a GP specialist advisor and a second CQC inspector.

#### Background to Dr Thavapalan

Dr Thavapalan is located at 55 Littleheath Road, Bexleyheath, Kent, DA7 5HL.

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

Dr Thavapalan is situated within Bexley Clinical Commissioning Group (CCG) and provides services to 5200 patients under the terms of a personal medical services (PMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The practice has recently taken on between 700 and 800 patients over a period of 12 months from a nearby practice which closed down in March 2019. The practice told us that this had presented a challenge both to contend with the administrative burden of associated with registering these patients and to ensure that their care and treatment was optimised.

The practice is a partnership practice led by one male GP and one female GP. The practice provides a total of 14 GP

sessions. There is a nurse prescriber working 0.75 whole time equivalent. In addition, the service employs a part time health care professional/diabetes clinical auditor and a part time assistant practitioner.

There are comparable numbers of patients of working age registered with Dr Thavapalan compared with the national average and higher numbers of patients over the age of 65. The age demographics were broadly comparable to those of other practices within the CCG although this practice has a slightly lower proportion of children. The percentage of patients not in employment was comparable to the national average and the practice has a slightly higher proportion of patients with long standing health conditions. The National General Practice Profile states that 14% of the practice population is from a black ethnic background. Information published by Public Health England rates the level of deprivation within the practice population group as nine, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. The practice has lower levels of deprivation affecting children and half the level of deprivation affecting older people compared to the national average.

## **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	<ul> <li>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</li> <li>How the regulation was not being met.</li> <li>The system for monitoring test results was not effective to assure the safety for patients.</li> <li>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</li> </ul>