

Dr Avinash Suri

Inspection report

34 New North Road Hainault Ilford IG6 2XG Tel: 02085013431

Date of inspection visit: 18 and 25 January 2023 Date of publication: 24/04/2023

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

Inadequate

Overall summary

We carried out an announced unrated warning notice follow-up inspection at Dr Avinash Suri (also known as Hainault Surgery) on 18 and 25 January 2023. The practice was previously inspected on 2 and 9 August 2022, when we rated the practice as follows: -

Safe - Inadequate

Effective – Inadequate

Well-led – Inadequate

The full reports for previous inspections can be found by selecting the 'all reports' link for Dr Avinash Suri on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was to assure ourselves that the provider had complied with the warning notice issued as a result of the surgery being rated overall inadequate following our previous announced focused inspection of the surgery in August 2022.

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

Our findings

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 found that:

- The practice had put in place a system to monitor patients on some high risk medications.
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Overall summary

- The practice had put in place a system to ensure that vaccines held at the practice were kept according to manufacturer's guidance.
- Clinical searches undertaken by the inspection team identified that not all patients were receiving appropriate clinical monitoring by way of medicines reviews.
- Systems had been established at the practice to ensure that clinical staff were working within their scope of knowledge.
- Clinical searches undertaken by the inspection team identified that not all patient records contained detailed information relating to face-to-face consultations.

We found one 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:

• Continue with embedding operational processes within the practice to ensure the practice can operate safely.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor.

Background to Dr Avinash Suri

Dr Avinash Suri is based at:

34 New North Road

Hainault

Ilford

Essex

IG6 2XG

The provider is registered with CQC to deliver the following Regulated Activities:-

- Diagnostic and screening procedures
- Family planning service
- Maternity and midwifery services
- Surgical procedures
- Treatment of disease, disorder or injury

The practice is situated within the North East London Integrated Care System and delivers Primary Medical Services (PMS) to a patient population of about 3,400. This is part of a contract held with NHS England.

The practice is part of a wider network of the local GP Primary Care Network (PCN). This PCN is made up of three GP practices within this geographical area.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the sixth lowest decile (6 of 10). The lower the decile, the more deprived the practice population is relative to others.

There is one male GP provider who is supported by a team of three long-term locum GPs who provide clinical care at the practice. The provider is in the process of taking on a new female partner. There are two practice nurses who work 18 hours per week. The clinical staff are supported by a team of part-time reception staff, a part-time practice manager and a part-time assistant practice manager. The practice has employed a clinical pharmacist who works at the practice one day per week.

Enhanced infection prevention and control measures had put in place since the pandemic and in line with the national guidance, most GP appointments at the practice were a combination of telephone and face-to-face consultations.

The practice opening hours are as follows: -

• 8:30am to 7pm Monday to Friday

Extended access is provided locally by the local GP Federation where late evening and weekend appointments are available. Patients requiring medicial assistance outside of the extended hours service are advised to contact NHS 111.

Enforcement actions

Action we have told the provider to take

The table below shows the legal requirements that were not being met.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment
Maternity and midwifery services Treatment of disease, disorder or injury	The registered provider did not do all that was practicable to ensure that systems in place allowed safe care to be provided:-
	• The provider did not ensure the monitoring of patients with long-term conditions was consistent. With

overdue annual reviews and lack of consistent evidence that the practice contacted patients when blood tests results indicated further action was required.

reference to patient records not being coded correctly, limited information contained within records, requests

for patients to have blood tests were not timely,

This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.