

Dr Mahadeva Selvarajan

Inspection report

Deane Clinic One Stop Health Centre
Horsfield Street
Bolton
Lancashire
BL3 4LU
Tel: 01204 471444

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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

Requires improvement



Are services safe?

Good



Are services effective?

Requires improvement



Are services caring?

Good



Are services responsive?

Requires improvement



Are services well-led?

Good



Overall summary

We carried out an announced comprehensive inspection at Mahadeva Selvarajan on 5 July 2019. This practice is rated Requires Improvement in the responsive domain and Good overall. (Previous rating November 2018 – Inadequate)

The key questions at this inspection are rated as:

Are services safe? – Good

Are services effective? – Requires Improvement

Are services caring? – Good

Are services responsive? – Requires Improvement

Are services well-led? – Good

The practice was previously given an overall rating of Inadequate on 6 November 2018 with the following domain ratings:

Safe – Inadequate

Effective – Inadequate

Caring – Requires Improvement

Responsive – Inadequate

Well-led – Inadequate

Warning Notices were issued in respect of Regulation 12 of the Health & Social Care Act 2008 (Regulated Activities) Regulations 2014 (safe care and treatment), Regulation 13 of the Health & Social Care Act 2008 (Regulated Activities) Regulations 2014 (safeguarding) and Regulation 17 of the Health & Social Care Act 2008 (Regulated Activities) Regulations 2014 (good governance).

We went back to follow up the issues identified in the Warning Notices on 5 April 2019. At that inspection we found that significant progress had been made and the practice had met the requirements of the Warning Notices although some further improvement was still required.

At this inspection we found:

- The provider and the practice staff had engaged with the Clinical Commissioning Group (CCG), The Royal College of General Practitioners and the Primary Care Networks to facilitate improvement from an inadequate rating. The inspection team saw evidence of a collective response from all members of the practice team who demonstrated hard work and collaborative desires to achieve the improvements.

- GP cover was now sufficient to manage long term conditions of patients safely and effectively. For example, the GP was now each day and was available on-site to support the advanced nurse practitioner and practice nurse during clinics if required.
- Systems and processes had been implemented and embedded to keep patients safe. The previous risks found around incident reporting, clinical record keeping, patient safety alerts, prescription protocols, emergency equipment, fridge monitoring and information sharing had been removed.
- Staff were clear about reporting incidents, near misses and concerns and all staff reported significant improvement around formal communication, access to information and learning.
- The provider had produced audits and we saw evidence of a significant number of patient outcomes that had improved since our last inspection.
- The practice had joined in the Bolton Quality Contract and was able to demonstrate twelve months of positive data. (This is a Clinical Commissioning Group (CCG) incentive to monitor whether practices are providing the best services for patients in their population).
- Complaints were sufficiently dealt with and the practice took a more open and constructive approach with regard to verbal comments received from patients which were being logged and reviewed.
- Recruitment checks and personnel information were sufficiently maintained in accordance with requirements.
- Appointment systems were improved so that all patients had access to care when they needed it.
- There was improved practice leadership and evidence of a whole team approach.

We rated the population group families, children and young people as **inadequate** in effective and **requires improvement** in responsive. This led to an overall rating of inadequate for that population group.

We rated the population Working age people (including those recently retired and students) as **requires improvement** in effective and **requires improvement** in responsive. This led to an overall rating of requires improvement for that population group.

Overall summary

These ratings were because:

- Although we noted many improvements there were still areas below average in the quality outcome framework (QOF).
- Immunisation data was much lower than average and had not improved.
- Cancer screening data was lower than average.
- Satisfaction scores for making appointments remained lower than average at the current time.
- The practice website had only just become available after a period of twelve months, meaning patients could not book appointments or order prescriptions online through that method. However we were told these facilities were available through the practice's clinical system.
- The practice had identified more than 2% of the population as carers at the practice.

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

- Continue to improve quality outcomes for patients.
- Continue to increase the number of carers recorded on the practice system.
- Continue to improve patient experiences around access.
- Highlight to patients and encourage the use of on-line services.

- Facilitate a productive patient participation group.

We saw improvement to patient safety, and clinical care had significantly improved. There was an improved, structured process and governance system in place to keep patients safe. We were told the aim would be to maintain these standards and continue to improve in areas of Quality Outcome Framework and patient access and experiences and the inspection team felt confident that this would continue.

I am keeping this service in special measures. The service will be kept under review and will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any population group, or key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

Special measures give people who use the service the reassurance that the care they get should improve.

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	Inadequate	
Working age people (including those recently retired and students)	Requires improvement	
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 practice nurse specialist advisor.

Background to Dr Mahadeva Selvarajan

Dr Mahadeva Selvarajan is the registered individual and sole provider and offers primary care services to a registered list of 3,500 patients. The list is gradually increasing due to closure of a neighbouring practice. The practice delivers commissioned services under the General Medical Services (GMS) contract and is a member of NHS Bolton Commissioning Group (CCG).

The GMS contract is the contract between general practices and NHS England for delivering primary care services to local communities. The practice is registered with the Care Quality Commission (CQC) to provide the regulated activities of diagnostic and screening procedures; family planning; maternity and midwifery services; surgical procedures, and treatment of disease, disorder and injury.

Regulated activities are delivered to the patient population from the following address:

Deane Clinic One Stop Health Centre
Horsfield Road
Bolton
BL3 4LU

The practice has a website that contains information about what they do to support their patient population and the in house and online services offered. However, the website was inactive for a long period of time and was only reactivated on 5 July 2019.

There is one GP, and one advanced nurse practitioner and a practice nurse, supported by a practice manager and a small team of reception/administration staff.

The average life expectancy and age profile of the practice population is broadly in line with the CCG and national averages. Information taken from Public Health England placed the area in which the practice is located in the second most deprived decile (from a possible range of between 1 and 10). In general, people living in more deprived areas tend to have a greater need for health services.

Patients requiring a GP outside of normal working hours are advised to contact the surgery and they will be directed to the local out of hours service which is provided by Bolton GP Federation. Additionally, patients can access GP services in the evening and on Saturdays and Sundays through the Wigan GP access alliance at locations across Wigan Borough.