

# Drs. Sreelatha and Thachankary

## Inspection report

The Surgery  
Stuart Road  
Pontefract  
WF8 4PQ  
Tel: 01977703437

Date of inspection visit: 14 June 2023  
Date of publication: 20/07/2023

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           | Good                 |  |
| Are services safe?                         | Requires Improvement |  |
| Are services effective?                    | Good                 |  |
| Are services caring?                       | Good                 |  |
| Are services responsive to people's needs? | Good                 |  |
| Are services well-led?                     | Good                 |  |

# Overall summary

We carried out an announced follow up comprehensive inspection at Drs. Sreelatha and Thachankary on 13 and 14 June 2023. Overall, the practice is rated as good.

Safe - requires improvement

Effective - good

Caring - good

Responsive - good

Well-led - good

Following our previous inspection on 9 December 2021, the practice was rated requires improvement overall. The key questions for the provision of safe, caring and well-led services were rated as requires improvement, and the ratings for the provision of effective and responsive services were rated as good.

As a result of the December 2021 inspection we issued the provider with a requirement notice for a breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 for Regulation 12: Safe care and treatment.

During this inspection, undertaken on 13 and 14 June 2023, we saw the provider had taken action to tackle the issues raised in the requirement notice. However, we found new areas of concern with regard to aspects of medicines management which necessitated the issue of a further requirement notice for a further breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 for Regulation 12: Safe care and treatment. We also found that the provider had improved caring and well-led services and these were no longer rated as requires improvement. Responsive remained as good.

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

## **Why we carried out this inspection**

We carried out this inspection to follow up concerns and a breach of regulation from the previous inspection.

The inspection included:

All key questions.

A review of the actions taken to address the breach of Regulation 12 Safe care and treatment.

A review of progress on actions we told the provider they should take in relation to:

- improving processes for dealing with incidents of abusive behaviour from patients to staff.
- improving uptake rates for cervical screening.
- developing ways to improve patient satisfaction.
- taking steps to increase clinical capacity.

# Overall summary

## How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- Undertaking a visit to the practice location.

## 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:

- Improvements had been made since the last rated inspection undertaken in December 2021. However, there were still areas which needed further improvement regarding medicines management.
- Patients' needs were assessed. However, care and treatment had not always been delivered in line with current standards and evidence-based guidance in relation to medicines management, and reviews and support of patients with long-term conditions.
- Internal clinical capacity and the ability to meet patient demand had increased since the last inspection.
- Antibiotic prescribing rates had shown an over reduction over the past 4 years.
- The practice had developed and implemented a sophisticated assurance framework, which gave them an improved ability to oversee and effectively manage the operation of the practice in key areas.
- Staff informed us that they had witnessed or been subject to abusive and aggressive behaviour from patients.
- Patient feedback indicated that access to care and treatment could be difficult at times. The provider had responded to this and made a number of improvements such as adding additional incoming telephone lines and recruiting additional staff.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

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

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

In addition, the provider **should**:

- Embed improvements to improve patient access to services.
- Continue to work to improve cervical cancer screening rates.
- Complete actions required to comply with the most recent Infection Prevention and Control (IPC) audit and fire safety risk assessment.

# Overall summary

- Develop an approach to the management of patients who have not engaged with the practice for necessary medicines monitoring checks.

**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 who spoke with staff using video conferencing facilities and undertook a site visit with a second CQC team member. The team also 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 Drs. Sreelatha and Thachankary

Drs. Sreelatha and Thachankary (also known as Stuart Road Surgery) is located in Pontefract at:

The Surgery

Stuart Road

Pontefract

West Yorkshire

WF8 4PQ

We visited the surgery as part of this inspection activity.

The building is accessible for those with a disability and has been adapted further. For example, the reception desk had been lowered for wheelchair users and a hearing loop had been installed for those with a hearing impairment. There is parking available nearby for patients and an independent pharmacy is adjacent to the practice.

The practice is situated within the NHS West Yorkshire Integrated Care Board and delivers Personal Medical Services (PMS) to a patient population of around 8,125.

According to the latest available data, the ethnic make-up of the practice patient population is 97.3% White British, 1.3% Asian and 1.4% Other non-white ethnic groups.

Attached to the practice, or closely working with the practice, is a team of community health professionals that includes health visitors, midwives and members of the district nursing team.

The practice is part of a wider network of GP practices and works as part of the Wakefield Health Alliance Primary Care Network.

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

Information published by the Office for Health Improvement & Disparities shows deprivation within the practice population group as 4 on a scale of 1 to 10. Level 1 represents the highest levels of deprivation and level 10 the lowest.

The practice has 2 GP partners (1 male, 1 female) supported by locum GPs. In addition, there are 3 advanced care practitioners, 1 practice nurse, 1 part-time locum practice nurse and 2 healthcare assistants. Services are also provided to practice patients by a pharmacist and pharmacy technician, a mental health worker, a health and wellbeing worker and a physiotherapist from the local Primary Care Network. Clinical staff are supported by a practice manager and an administration and reception team.

Practice appointments and support include:

- Telephone triage and advice
- Pre-bookable appointments for certain conditions and reviews
- On the day/urgent appointments
- Telephone/video/face to face consultations
- Home visits
- Support to registered patients who live in three residential care settings

The practice is open between 8am and 6.30pm Monday to Friday Additionally, the practice can make appointments for patients to access primary care services via a local extended hours service. Out of hours care is provided by Local Care Direct Limited.

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<br>Family planning services<br>Maternity and midwifery services<br>Surgical procedures<br>Treatment of disease, disorder or injury | Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment<br><b>How the regulation was not being met:</b><br>Medicines management processes had not been effectively implemented, or evidenced in the patient record, and some patients had not received the required level of monitoring, review or necessary follow-up.<br><br>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. |