

# Dr Roman Sumira

## Inspection report


1 Studfall Court  
Corby  
Northamptonshire  
NN17 1QP  
Tel: 01536 401371

Date of inspection visit: 2bd, 3rd, 4th September  
2019  
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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

Inadequate 

Are services safe?

Inadequate 

Are services effective?

Inadequate 

Are services caring?

Good 

Are services responsive?

Requires improvement 

Are services well-led?

Inadequate 

# Overall summary

Dr Roman Sumira had been inspected previously on the following dates: -

6 October 2015 under the comprehensive inspection programme. The practice was rated as Good overall

We carried out an inspection of this service following our annual review of the information available to us including information provided by the practice. Our review indicated that there may have been a significant change to the quality of care provided since the last inspection.

This inspection focused on the following key questions: Safe, Effective, Caring, Responsive and Well-led.

We carried out an announced comprehensive inspection at Dr Roman Sumira on 2nd, 3rd and 4th September 2019.

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 Inadequate overall.**

- The practice had no clear leadership structure, insufficient leadership capacity and limited formal governance arrangements.
- Patients were at risk of harm because some systems and processes in place were not effective to keep them safe.
- On the day of the inspection we could not establish if the practice had an effective system in place to safeguard service users from abuse and improper treatment.
- Risks to patients were assessed but the systems and processes to address these risks were not implemented well enough to ensure patients were kept safe.
- Feedback from people who use the service and stakeholders was positive. 78 patients expressed high levels of satisfaction about all aspects of the care and treatment they received. The feedback from comments cards we reviewed said patients felt they were treated with care, compassion, dignity and respect.

We rated the practice as Inadequate for providing a Safe service because we found:-

- Patients were at risk of harm because some systems and processes in place were not effective to keep them safe. For example, patient safety alerts, safeguarding, medicine reviews, monitoring of patients on high risk medicines, monitoring of the cold chain.
- The practice did not have an effective system in place to safeguard service users from abuse and improper treatment.
- Risks to patients were assessed but the systems and processes to address these risks were not implemented well enough to ensure patients were kept safe. For example, fire and legionella
- Patients' health was not always monitored in a timely manner to ensure medicines were being used safely and followed up on appropriately.
- The registered person had failed to ensure that the premises at Weldon used by the service were suitable and properly maintained for the purpose of which they were being used.

We rated the practice as Inadequate for providing Effective services because we found:-

- Patients' needs were not always assessed, and care and treatment was not always delivered in line with current legislation, standards and evidence-based guidance supported by clear pathways and tools.
- There was no evidence to suggest that staff were aware of current evidence based guidance.
- There was no evidence of clinical audits to demonstrate quality improvement.
- The practice could not demonstrate role-specific training, for example, updates for dispensers once they had obtained their qualification.
- The practice did not have an effective system in place to monitor training. Therefore, we could not be assured that staff had the skills, knowledge and experience to deliver effective care and treatment.
- Staff told us they had received an appraisal in the last 12 months.

We rated the practice as Requires Improvement for providing a responsive service because we found:-

- The practice had not developed services in response to patient needs.
- The premises at the branch surgery at Weldon were not fit for purpose.

# Overall summary

We rated the practice as Inadequate for providing a well-led service because we found:-

- We found a lack of leadership and governance relating to the overall management of the service. The practice was unable to demonstrate strong leadership in respect of safety.
- There was a limited governance framework which supported the delivery of the strategy and good quality care. For example, patient safety alerts, safeguarding, medicine reviews, monitoring of patients on high risk medicines, monitoring of the cold chain, NICE guidance, staff training and meeting minutes.
- The arrangements in place for managing risks were not effective.
- The practice could not demonstrate that they proactively sought feedback from staff and patients, which it acted on. The patient participation group was active.
- The provider had some awareness of the requirements of the duty of candour but the systems and processes in place did not always support this.
- The practice had a number of policies and procedures to govern activity.
- There was no evidence of innovation or service development. There was also no evidence of learning and reflective practice.

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

- Ensure care and treatment is provided in a safe way to patients.
- Ensure patients are protected from abuse and improper treatment.
- Ensure all premises used by the service is fit for use.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

I am placing this service in special measures. Services placed in special measures 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, 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 will 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

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

## Our inspection team

Our inspection team was led by a CQC inspector and included a GP specialist advisor, a practice nurse specialist advisor and a practice manager specialist advisor.

## Background to Dr Roman Sumira

Dr Roman Sumira provides a range of services under a General Medical Services (GMS) contract which is a nationally agreed contract between general practices and NHS England.

The GP practice is run from a purpose built facility at Studfall Medical Centre. The practice's services are commissioned by Nene and Corby Clinical Commissioning Group (CCG).

The practice serves a population of approximately 2,035 patients.

Patient demographics reflect the national average and information published by Public Health England, rates the level of deprivation within the practice population group as five, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The service at the practice is provided by one GP partner, two locum GPs, one practice nurse and one healthcare assistant. The team is supported by a practice manager along with a team of administration and reception staff.

The practice has a branch surgery in the village of Weldon. It is located at 11a High Street, Weldon, Northamptonshire, NN17 3JJ.

Although patients can access either surgery we were informed that generally patients visit one of the sites. The branch is a dispensing practice. The branch surgery is staffed from 10am until 12pm Mondays, Tuesdays and Fridays. Patients can access the surgery from 10.30am until 11.30am. The surgery is also staffed from 4pm until 6pm each Tuesday and patients have access between 4.30pm and 5.30pm. We inspected the branch surgery as part of this inspection.

The practice population is predominantly white British (97%) along with small ethnic populations of Asian (1%) and mixed race (1.2%).

Dr Roman Sumira has one location registered with the Care Quality Commission (CQC) which is 1 Studfall Court, Corby Northamptonshire. NN17 1QP and provides the regulated activities of Family planning, Treatment of disease, disorder or injury, surgical procedures, diagnostic and screening procedures and maternity and midwifery services.

The local NHS trust provides health visiting and community nursing services to patients at this practice.

The practice at Studfall Medical Centre is open between 8am and 6.30pm Monday to Friday.

As part of the Corby locality extended access hub at Woodsend Medical Centre , patients can access extended hours appointments. Additional same day and booked appointments are provided by GPs, Nurse Prescribers, Clinical Pharmacists, Practice Nurses and other clinicians outside of the core General Practice hours.

Appointments are available :-

4pm to 8pm Monday to Friday

8.30am to 12.30 Saturday

8.30am to 12.30 Bank Holidays

When the practice is closed patients are directed to contact the out-of-hours GP services by calling the NHS 111 service.

This section is primarily information for the provider

## Enforcement actions

### 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. We took enforcement action because the quality of healthcare required significant improvement.

#### Regulated activity

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

#### Regulation

Regulation 15 HSCA (RA) Regulations 2014 Premises and equipment  
**Urgent notice of decision to stop regulated activities at the branch surgery at 11A High Street, Weldon near Corby Northants.**

#### Regulated activity

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

#### Regulation

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment

#### Regulated activity

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

#### Regulation

Regulation 13 HSCA (RA) Regulations 2014 Safeguarding service users from abuse and improper treatment  
...

#### Regulated activity

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

#### Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance