

# Dr AK and N Atrey

## Quality Report

Meadowview Surgery

Nelson Street

Atherton

M46 0LE

Tel: 01942 481060

Website: [www.meadowviewsurgery.co.uk](http://www.meadowviewsurgery.co.uk)

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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 service

Good



Are services safe?

Good



Are services well-led?

Good



# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

This is a focused follow-up inspection of Dr AK and N Atrey for areas within the key questions safe. We now found the practice to be good in providing safe services.

We carried out an announced comprehensive inspection at Dr AK and N Atrey on 1 March 2016. The overall rating for the practice was good. The full comprehensive report on the 1 March 2016 inspection can be found by selecting the 'all reports' link for Dr AK and N Atrey on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

At our previous inspection on 1 March 2016, we rated the practice as requires improvement for providing safe services as the arrangements in place for managing the following issues were not adequate:

- Suitable processes were not in place to identify children at risk and vulnerable adults.
- A paediatric oxygen mask was not available.

In addition we identified the following issues the service should improve:

- The systems for recording significant events should be reviewed.

- The arrangements for monitoring the supply of prescription pads should be reviewed.
- GPs should ensure that there is a clear and to deliver high-quality care and promote good outcomes for patients, which is shared with staff and patients.

In line with agreed timescales the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the overview of safety systems and processes since the last inspection.

At this inspection we found that sufficient improvement had been achieved to update the rating for provision of safe services to good. The practice had addressed the breaches of regulation and was now compliant with all regulations. This report covers our findings in relation to those improvements.

Our key findings were as follows:

- There were suitable processes to identify children and adults at risk and vulnerable children, adults and families.
- A paediatric oxygen mask was available.
- The systems for recording significant and monitoring the supply of prescription pads had been reviewed.

# Summary of findings

- The provider had produced a mission statement which outlined the practice's and to deliver high-quality care and promote good outcomes for patients.

**Professor Steve Field (CBE FRCP FFPH FRCGP)**  
Chief Inspector of General Practice

# Summary of findings

## The five questions we ask and what we found

We always ask the following five questions of services.

### Are services safe?

At our previous inspection on 1 March 2016, we rated the practice as requires improvement for providing safe services as the arrangements in place for managing the following issues were not adequate:

- Suitable processes were not in place to identify children at risk and vulnerable adults.
- A paediatric oxygen mask was not available.

In addition we identified the following issues the service should improve:

- The systems for recording significant events should be reviewed.
- The arrangements for monitoring the supply of prescription pads should be reviewed.

At this inspection we spoke with the practice manager and reviewed documentary evidence to demonstrate how the practice had improved their systems in relation to the overview of safe services since the last inspection. The practice is now rated as good for providing safe services.

- There were suitable processes to identify children and adults at risk and vulnerable children, adults and families.
- A paediatric oxygen mask was available.
- The systems for recording significant and monitoring the supply of prescription pads had been reviewed.

Good



### Are services well-led?

At our previous inspection on 1 March 2016, we rated the practice as good for providing well led services although we identified the following issue that should be improved:

- GPs should ensure that there is a clear and to deliver high-quality care and promote good outcomes for patients, which is shared with staff and patients.

At this inspection we found this issue had been addressed. A mission statement had been drawn up and discussed with the staff team and there was evidence that the staff had been briefed on any proposed changes to the staff team.

Good



# Summary of findings

## The six population groups and what we found

We always inspect the quality of care for these six population groups.

### Older people

The provider had resolved the concerns for safe identified at our inspection on 1 March 2016 which applied to everyone using this practice, including this population group. The population group rating has been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for Dr AK and N Atrey on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Good



### People with long term conditions

The provider had resolved the concerns for safe identified at our inspection on 1 March 2016 which applied to everyone using this practice, including this population group. The population group rating has been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for Dr AK and N Atrey on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Good



### Families, children and young people

The provider had resolved the concerns for safe identified at our inspection on 1 March 2016 which applied to everyone using this practice, including this population group. The population group rating has been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for Dr AK and N Atrey on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Good



### Working age people (including those recently retired and students)

The provider had resolved the concerns for safe identified at our inspection on 1 March 2016 which applied to everyone using this practice, including this population group. The population group rating has been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for Dr AK and N Atrey on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Good



### People whose circumstances may make them vulnerable

The provider had resolved the concerns for safe identified at our inspection on 1 March 2016 which applied to everyone using this practice, including this population group. The population group rating has been updated to reflect this.

Good



# Summary of findings

The specific findings on these groups can be found by selecting the 'all reports' link for Dr AK and N Atrey on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

## **People experiencing poor mental health (including people with dementia)**

The provider had resolved the concerns for safe identified at our inspection on 1 March 2016 which applied to everyone using this practice, including this population group. The population group rating has been updated to reflect this.

The specific findings on these groups can be found by selecting the 'all reports' link for Dr AK and N Atrey on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

**Good**



# Dr AK and N Atrey

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

A CQC inspector reviewed and analysed the evidence provided at the time of the inspection.

## Background to Dr AK and N Atrey

The practice of Drs A K and N Atrey also known as Meadowview surgery is based in a purpose built facility in a residential area of Atherton close to local amenities. The practice is located in a more deprived area when compared to other practices nationally. The male life expectancy for the area is 76 years compared with the CCG average of 77 years and the national average of 79 years. The female life expectancy for the area is 81 years compared with the CCG average of 81 years and the national average of 83 years. There were 4700 patients on the practice list at the time of inspection.

The practice, which is also a training practice, has three (two male and one female) GP's two are partners, a permanent salaried GP and a GP in their third year of training. At the time of inspection one of the partners had retired and the practice was in the process of recruiting for another partner and this vacancy was being covered by a locum GP. The practice has two practice nurses, two healthcare assistants a practice manager and seven reception and administration staff.

The practice advertises that it is open Monday to Friday from 8am to 6.30pm and each Monday it offers extended opening hours from 6.30pm-8pm. 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 Bridgewater NHS Foundation Trust through NHS 111. Additionally patients can access GP services on Saturdays and Sundays through the Wigan GP access alliance at locations across the borough.

## Why we carried out this inspection

We undertook a comprehensive inspection of Dr AK and N Atrey on 1 March 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. Overall the practice was rated as good although it was rated as requires improvement for providing safe services. The full comprehensive report following the inspection on 1 March 2016 can be found by selecting the 'all reports' link for Dr AK and N Atrey on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We undertook this focussed follow-up inspection of on 9 October 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting its legal requirements.

## How we carried out this inspection

Following the inspection on 1 March 2016 the practice supplied an action plan with appropriate timescales telling us how they would ensure they made the relevant improvements. In line with their agreed timescale the practice supplied documentary evidence to demonstrate how they had improved their practices in relation to the safe domain.

## Detailed findings

We carried out a focussed follow-up inspection of Dr AK and N Atrey on 9 October 2017. This involved looking at information the practice used to deliver care and speaking with the practice manager.



# Are services safe?

## Our findings

At our previous inspection on 1 March 2016, we rated the practice as requires improvement for providing safe services as the arrangements in place for managing the following issues were not adequate:

- Suitable processes were not in place to identify children at risk and vulnerable adults.
- A paediatric oxygen mask was not available.

In addition we identified the following issues the service should improve:

- The systems for recording significant events should be reviewed.
- The arrangements for monitoring the supply of prescription pads should be reviewed.

At this inspection we spoke with the practice manager and reviewed documentary evidence to see how the practice had improved their systems in relation the provision of safe services.

- Suitable processes were now in place to identify children and adults at risk, vulnerable children adults and looked after children. We saw minutes of meetings where safeguarding issues were discussed and a specific list of these patients was now kept for staff reference.
- A paediatric oxygen mask was now available. The health care assistant checked this equipment regularly with the practice manager carrying out a regular audit of these checks. When the equipment was used, a replacement mask was ordered straight away.
- The systems for recording significant events had been reviewed and discussed with the staff team. We saw evidence of a trend analysis of significant events since the last inspection and more detailed records were now kept of discussions held and actions taken as a result of the significant event.
- A new protocol for the management of prescription pads had been drawn up and records were now kept of when prescription pads were ordered, received and distributed to GPs.

# Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

## Our findings

At our previous inspection on 1 March 2016, we rated the practice as good for providing well led services although we identified the following issue that needs improving:

- GPs should ensure that there is a clear and to deliver high-quality care and promote good outcomes for patients, which is shared with staff and patients.

There is now a mission statement which outlines the practice values. Staff were informed about the mission statement and a copy was displayed in the patient waiting area. The staff team were told about proposed changes to the staff team and the future developments of the service.