

Dr Anoop Sahal

Inspection report

94 Navigation Road
Altrincham
Cheshire
WA14 1LL
Tel: 01619299300

Date of inspection visit: 05 February 2020
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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

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Requires improvement 

Overall summary

Dr Anoop Sahal had a full comprehensive inspection on 14 January 2015 when it was rated good overall but required improvement for the key question of safe because staff had not been appropriately trained in safeguarding. On 21 December 2016 we undertook a desk top review of documents submitted to the Commission providing assurance that the appropriate training had been completed. At that time the practice was rated good for the key question safe and remained good overall and for all the other key questions.

We carried out an announced focused inspection at Dr Anoop Sahal on 5 February 2020 as part of our inspection programme. We focused our inspection on the key questions effective and well led. The key questions safe, caring and responsive were not rated at this inspection and the ratings of good from the last inspection were carried forward. 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 good overall. The key questions of safe, caring, and responsive were not rated at this inspection and the previous rating has not changed. We rated the key question effective as good.

The key question well led is rated requires improvement because the governance arrangements do not ensure that fire risks are sufficiently identified, understood and managed.

The population groups are all rated good with the exception of families and young people which is rated requires improvement because of the very low rate of uptake in child immunisations.

We found that:

- Systems processes, and practices safeguarded people from abuse.
- There were systems and processes in place to ensure the proper and safe use of medicines.
- There were arrangements to ensure the premises were kept clean and infection free.
- There was a process to report and learn when things went wrong.
- Patients' needs, and choices were assessed, and care, treatment and support were delivered in line with current legislation.
- Staff were appropriately trained and dealt with patients with kindness and respect.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.
- Risks were not always identified or managed. There was no evidence that a fire risk assessment had ever been completed, and we saw evidence of fire risk.

The provider **must**

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

The provider **should**:

- Make improvements to the system for managing safety alerts so that it is failsafe.
- Formalise meetings so that actions are recorded and managed effectively.
- Improve the uptake of childhood immunisations.

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	Requires improvement	
Working age people (including those recently retired and students)	Good	
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 and included a GP specialist advisor.

Background to Dr Anoop Sahal

Dr Anoop Sahal is the registered provider and provides primary care services to its registered list of 2419 patients. The practice delivers commissioned services under the General Medical Services contract and is a member of Trafford Clinical Commissioning Group (CCG). Services are located in a two-storey converted house on a main road in Trafford. The downstairs area of the building is used for patients.

The practice is registered with the Care Quality Commission (CQC) to provide the regulated activities of diagnostic and screening procedures, family planning and treatment of disease, disorder and injury.

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

94 Navigation Road

Altrincham

Cheshire

WA14 1LL

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:

Dr Sahal is a single-handed male GP assisted clinically by a part time practice nurse and a full time health care assistant. They are supported by a practice manager and a small team of reception and 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 in the ninth least deprived decile (from a possible range of between 1 and 10). In general, people living in more deprived areas tend to have greater need for health services.

The practice is open:

Monday 8.00am to 6.30pm

Tuesday 8.00am to 6.30pm

*on Tuesday mornings extended hours are provided
06.40am to 8.00am

Wednesday 8.00am to 6.30pm

Thursday 8.00am to 6.30pm

Friday 8.00am to 6.30pm

Patients can also access extended hours at one of the Trafford hubs Monday to Friday 6.30pm to 8.00pm and Saturday and Sunday mornings from 8.00am to 12.00 noon. Appointments are arranged via patient's own GP surgery.

Overall summary

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 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 requirements.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 17 HSCA (RA) Regulations 2014 Good governance The registered person had systems or processes in place that were operating ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks relating to the fire safety of service users and others who may be at risk.
Family planning services	
Treatment of disease, disorder or injury	

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	Regulation
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