

Littlelever Health Centre 2

Inspection report

Mytham Road Little Lever Bolton BL3 1JF Tel: 01204462988 www.drjainanddrsubramanian.nhs.uk

Date of inspection visit: 20 February 2023 Date of publication: 17/04/2023

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	Requires Improvement	
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?	Requires Improvement	

Overall summary

We carried out an announced full comprehensive inspection of Dr Thirrupathy Subramanian on 15, 17 and 20 February 2023. All key questions were inspected. Although we saw significant improvements since the previous inspection, we have rated the practice requires improvement overall with the following ratings for individual key questions, reflecting the improvements that are further required:

Safe - Requires Improvement

Effective - good

Caring - good

Responsive - good

Well-led - Requires Improvement

We previously inspected at Dr Thirrupathy Subramanian also known as Little Lever Health Centre 2, on 18 February 2022 when the practice was rated as Requires Improvement and the following ratings were given.

- Safe Requires Improvement
- Effective Requires Improvement

Caring - Good

Responsive - Good

Well-led - Requires Improvement

The full reports for previous inspections can be found by selecting the 'all reports' link for Dr Thirrupathy Subramanian on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was a comprehensive inspection of all five key questions. We also followed up on the breaches of regulations we found in our previous inspection.

How we carried out the inspection/review

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

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system remotely? (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.
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Overall summary

- Requesting evidence from the provider.
- A site visit.

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 have rated this practice as Requires Improvement overall.

We rated the provider as requires improvement for providing safe services:

• The practice provided care in a way that mostly kept patients safe and protected them from avoidable harm. Systems introduced to manage safety within the practice were improved. Meetings which had been implemented to regularly monitor and discuss safety concerns were now embedded. However, the systems to oversee and manage medicines and safety alerts was still not failsafe and we found that further improvements were required.

We rated the provider as requires improvement for providing well led services:

• The practice was able to evidence that improvements had been made. Systems had been implemented and the practice was being managed in a way which better promoted the delivery of good quality person centred care. However, further improvements were required to ensure staff were sufficiently trained in all areas of their work. Staff wellbeing was promoted until numbers could be increased and risks were identified and managed at all times.

We rated the provider as good for providing effective, caring and responsive services.

We also found that:

- Patients received effective care and treatment that met their needs. There was evidence of two-cycle audits and future defined clinical audit plans.
- There was a system to formally discuss clinical outcomes and ensure treatment was delivered according to evidence-based guidance.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients could access care and treatment in a timely way.

We found a breach of regulation. The provider must:

- Ensure care and treatment is provided in a safe way to patients.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Overall summary

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 via telephone prior to the inspection, undertook a site visit and spoke with staff on site. The team included a GP specialist advisor who completed clinical searches and records reviews remotely and also conducted a remote interview with the lead GP.

Background to Littlelever Health Centre 2

Dr Thirrupathy Subramanian is located in Bolton at:

Dr T Subramanian

Little Lever Health Centre 2 Mytham Road Little Lever Bolton, BL3 1JF Tel: 01204 462988

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

The practice is situated within the NHS Greater Manchester Integrated Care (Bolton Locality)

and delivers General Medical Services (**GMS**) to a patient population of approximately 3,000 patients. This is part of a contract held with NHS England. The practice is part of a wider network of five GP practices known as the primary care network.

The patient age profile for the practice is similar to the CCG average. Life expectancy for males is 77 years, which is in line with the CCG average of 77 years and below the national average of 79. Life expectancy for females is 82 years, which is above the CCG average of 81 and below the national average of 83. Information published by Public Health England, rates the level of deprivation at number five on the deprivation scale. Level one represents the highest levels of deprivation and level ten the lowest.

7% of patients are 75 years or over and the demographic is mainly white British with recent increasing numbers of patients from Eastern Europe and the Middle East. The practice is a member of **NHS Greater Manchester Integrated Care (Bolton Locality)**. There is a high number of patients over the age of 65.

Dr Thirrupathy Subramanian is the sole and lead GP and also the registered manager. There is a long term female locum GP covering six sessions at the practice and a part time practice nurse, supported by an assistant practitioner. There are two practice managers who job-share and a team of part time administration and reception staff supporting the practice.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, some GP appointments are telephone consultations. However, this practice was proud to report they have never closed their doors and have continued to see patients face to face at all times, safely and when required.

A new service in Bolton was introduced to give patients more flexibility in where, when and how they use local health services. Patients registered with this GP practice can also book appointments to see a doctor or nurse at weekends at Waters Meeting Health Centre, Winifred Kettle, Washacre Lane and the Urgent treatment centre at Royal Bolton Hospital. Appointments are available 9am – 1pm Saturday and Sunday and Bank Holidays and Monday to Friday 6.30pm – 9.30pm. Appointments are accessed via the GP surgery.

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	Regulation 12 CQC (Registration) Regulations 2009 Statement of purpose
Family planning services Maternity and midwifery services	The registered persons had not done all that was reasonably practicable to mitigate risks to the health and
Surgical procedures	safety of service users receiving care and treatment. In
Treatment of disease, disorder or injury	particular:
	 Processes implemented to ensure that care and treatment was managed in a safe and evidence based way were not maintained. There was limited evidence of structured medicine

 There was limited evidence of structured medicine reviews, the system to manage safety alerts was not failsafe, patients with atrial fibrillation still required review, and patients taking medicines that could be harmful in pregnancy had not been reviewed.

Regulated activity

Diagnostic and screening procedures

Family planning services

Maternity and midwifery services

Surgical procedures

Treatment of disease, disorder or injury

Regulation

Regulation 17 CQC (Registration) Regulations 2009 Notification of death or unauthorised absence of a person who is detained or liable to be detained under the Mental Health Act 1983

The registered persons had not done all that was reasonably practicable to ensure good governance in accordance with the fundamental standards of care

- The process for receiving and acting on safety alerts was not effective.
- The process to manage staff training was not effective.
- The process to manage complaints was not consistent and there was no information about how to make a complaint on the practice website.