

# Dr Parveen Singh Ghatora

## Inspection report

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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?

Requires improvement



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Inadequate



# Overall summary

We carried out a comprehensive inspection at Dr Parveen Singh Ghatora on 11 March 2020 as part of our inspection programme.

The service was previously inspected in December 2015 and was rated Good overall at that inspection.

We carried out an inspection of this service as we believed there may have been a change in its overall rating since our previous inspection.

Following our review of the information available to us, including information provided by the practice, we carried out a comprehensive inspection.

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.

We rated the practice as **Inadequate** for providing safe services because:

- There were insufficient systems for safeguarding children and adults.
- Appropriate recruitment checks had not been undertaken before employing new staff.
- Staff immunisation status was not fully monitored.
- The practice did not have clear systems in place to ensure staff maintained their professional registration.
- Processes to minimise the risk of infection were not always followed.
- Medicines were not always safely managed or monitored.
- The practice did not learn and make improvements when things did not go well.
- Safety alerts were not always received and acted on appropriately.

We rated the practice as **Inadequate** for providing well-led services because:

- The delivery of high-quality care was not assured by the leadership, governance or culture in place.

We rated the practice as **Requires Improvement** for providing effective services because:

- Clinical audit was limited and no two cycle audits had been completed to demonstrate improvement.
- There was no effective system for monitoring or recording staff training and not all staff received regular appraisals or comprehensive documented inductions.
- These requires improvement areas impacted all population groups and so we have rated all population groups as requires improvement.

We rated the practice as **Good** for providing caring services because:

- Staff treated patients with kindness and respect and involved them in decisions about their care. Patients were very positive regarding the quality of care they received from practice staff.

We rated the practice as **Good** for providing responsive services because:

- The practice organised services to meet patients' needs. Patients could access care and treatment in a timely way.

The area where the provider **must** make improvements is:

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

(Please see the specific details on action required at the end of this report).

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

- Continue to identify carers amongst the practice population and review the support offered to carers.
- Continue to improve telephone access for patients.
- Improve complaints information available to patients.
- Continue to explore ways of increasing the number of patients in their patient participation group.

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

# Overall summary

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.

The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

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

## Our inspection team

Our inspection team consisted of by a CQC lead inspector, a GP specialist adviser and a nurse specialist adviser.

## Background to Dr Parveen Singh Ghatora

Dr Parveen Singh Ghatora is registered with the CQC to carry out the following regulated activities: diagnostic and screening procedures, surgical procedures, maternity and midwifery services and treatment of disease, disorder or injury.

Dr Parveen Singh Ghatora provides primary medical services to approximately 2400 patients through a general medical services contract (GMS). Patients are predominantly of white British origin, with only 2.9% of people within the practice area being from BME groups. The age profile of registered patients shows a higher percentage of patients aged over 65 compared to the national average at 23% compared to 17.4%. The practice's population are measured as being in the eight least deprived decile. Deprivation is higher than the CCG average but lower than national averages .

Dr Parveen Singh Ghatora is located in the village of Shepshed near Loughborough in the county of

Leicestershire. The practice has one male GP and two locum GPs, (one male and one female), two practice nurses, one healthcare assistant, a practice manager, administrative staff and reception staff.

The practice reception is open between 8.30am and 6.30pm Mondays to Fridays except Thursdays when the practice closes at 1pm. Appointments are offered within these times. Pre-booked evening appointments are available Monday to Friday at other GP practices as part of a local extended access scheme. Saturday and Sunday morning appointments are also available as part of this scheme. The practice has opted out of providing GP services to patients out of hours. During these times GP services are currently provided by the Out of Hours Service based at Loughborough Hospital and accessed via contacting the 111 service.

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 Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>Care and treatment was not provided in a safe way for service users. In particular:</p> <ul style="list-style-type: none"><li>• Medicines were not always safely managed or monitored.</li><li>• Processes to minimise the risk of infection were not always followed.</li></ul> <p>Regulation 12 (1) (2) (g) and (h)</p>
Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The provider had failed to ensure that systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance. In particular:</p> <ul style="list-style-type: none"><li>• Clinical audit was limited and no two cycle audits had been completed to demonstrate improvement.</li><li>• Internal infection control audits were not taking place.</li><li>• Policies and procedures were not effectively managed.</li><li>• There was limited evidence of learning from incidents and incident documentation was poorly completed.</li><li>• Not all patient safety alerts were being received and acted on appropriately.</li><li>• There was a lack of focus in the clinical leadership, oversight and governance systems required in relation to the safety and management of medicines, infection control, safeguarding and training.</li></ul>

This section is primarily information for the provider

## Requirement notices

- Systems to ensure the safe recruitment of staff and monitoring of staff immunisation status and professional registration were not effective.

Regulation 17(1) and (2)(a)(b)