

Dr Sahota's Practice (The Medical Centre)

Inspection report

The Medical Centre 6 The Green West Drayton UB7 7PJ Tel: 01895442026

Date of inspection visit: 4 October 2023 Date of publication: 22/12/2023

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?	Requires Improvement	
Are services caring?	Requires Improvement	
Are services responsive to people's needs?	Requires Improvement	
Are services well-led?	Requires Improvement	

Overall summary

We carried out an announced comprehensive inspection) at Dr Sahota's Practice (The Medical Centre) on 4 October 2023. Overall, the practice is rated as requires improvement.

Safe - requires improvement.

Effective - requires improvement.

Caring - requires improvement.

Responsive - requires improvement.

Well-led - requires improvement.

Following our previous inspection on 8 September 2016, the practice was rated good overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Dr Sahota's Practice (The Medical Centre) on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection in response to concerns reported to us. We reviewed all key questions as part of this inspection.

How we carried out the inspection

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

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (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.
- Requesting evidence from the provider.
- A short 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 found that:

Overall summary

- The practice provided care in a way that kept patients safe and protected them from avoidable harm. However, we identified shortfalls in the processes for medicines monitoring and acting on safety alerts.
- Most patients received effective care and treatment that met their needs. However, we identified that patients with hypothyroidism were not always reviewed to ensure their treatment was optimised in line with national guidance and some patients did not always receive medicine reviews in line with national guidance.
- Feedback from patients was mixed about the way staff treated people. Data from the National GP Patient Survey (2023) showed that the practice was rated below local and national averages for most questions relating to interactions with healthcare professionals
- Data from the National GP Patient Survey (2023) showed that the practice was rated below local and national averages for most questions relating to accessing the service. Although we saw the practice was attempting to improve access, this was not yet reflected in the GP patient survey data or other sources of patient feedback.
- There were clear responsibilities, roles and systems of accountability to support good governance and management. However, improvements to some systems and processes were needed.

We found a breach of regulations. The provider **must**:

• Ensure care and treatment is provided in a safe way to patients.

In addition, the provider **should**:

- Continue to address all outstanding actions from the recent health and safety risk assessment.
- Improve the system for recruitment checks.
- Continue to improve the systems and processes to increase childhood immunisations and cervical screening uptake.
- Continue to seek and act on feedback from patients and staff.

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Dr Sahota's Practice (The Medical Centre)

Dr Sahota's Practice (The Medical Centre) is located in West Drayton at:

6 The Green

West Drayton

Middlesex

UB7 7PJ

The provider is registered with CQC to deliver the following Regulated Activities; Diagnostic and screening procedures, Maternity and midwifery services, Surgical procedures and Treatment of disease, disorder or injury.

The practice is situated within the borough of Hillingdon and is part of the North West London Integrated Care System (ICS). The practice delivers General Medical Services (GMS) to a patient population of about 11,000. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices known as Colne Union Primary Care Network (PCN).

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the fourth decile (four of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 66% White, 19% Asian, 8% Black, 4% Mixed, and 3% Other.

The practice is led by a GP principal (female). The GP principal is supported by a business manager, an administration manager, a long-term GP locum (male), an advanced nurse practitioner, a practice nurse, two health care assistants, and a team of reception/administration staff.

The practice is open between 8.00am and 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally at three hub locations where late evening and weekend appointments are available.

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 Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	 Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment Clinical searches identified shortfalls with medicines management as some patients had not received the required level of monitoring prior to receiving a prescription. Clinical searches identified a medicines safety alert had not been fully actioned. Patients with hypothyroidism were not always reviewed to ensure their treatment was optimised in line with national guidance. Some patients were overdue or had not received medicine reviews in line with national guidance. This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.