

# Dr Uday Abhyankar

## 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

Good 

Are services safe?

Good 

# Overall summary

This practice is rated as Good overall. (Previous inspection March 2017 – Good overall, with requires improvement rating for providing Responsive services)

## The key questions are rated as:

### Are services responsive? – Good

We carried out an announced focused inspection at Dr Uday Abhyankar's practice (also known as Holly Road Surgery) on 1 June 2018. This inspection was in response to our previous comprehensive inspection at the practice in March 2017, where breaches of the Health and Social Care Act 2008 were identified. You can read the report from our last comprehensive inspection on 15 March 2017; by selecting the 'all reports' link for Dr Uday Abhyankar on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

During this inspection in June 2018, we found the provider was in breach of the Care Quality Commission (Registrations) Regulation 2009 – Regulation 15 Notice of Changes due to the provider not having advised the CQC that their registration status had changed from a single-handed GP to a partnership as of October 2017.

Our key findings were as follows:

- We saw the provider had acted to improve on the areas we had identified during our previous inspection. For example, the new partnership had increased face to face consultations and nursing staff hours to manage patient demand and at peak times the number of appointments were increased to reduce patients' waiting times.
- The management team told us they were currently in the process of changing the telephones with a new system being introduced in June 2018 to further improve access.
- The practice now provided extended hours appointments through the local commissioning group federation Improved Access Scheme (ICOF). This included appointments outside of the practice opening hours and weekend appointments.
- The practice had achieved higher than average results for several aspects of care from the 2017 National GP Patient survey.

- The practice had continued to review their carers register and encouraged patients to identify themselves if they had caring responsibilities. We saw the number of patients on the practice's carers register had increased from 1% to 2%.
- At our previous inspection, the practice's uptake for the cervical screening programme was lower than the national average. The practice had increased the availability of the practice nurse and patients could also access appointments at other practices the provider was working with locally. The practice had seen an increase in the number of patients attending appointments and had a system in place to follow up on patients who had not attended their appointments, however results remained lower than the national average.

**Professor Steve Field CBE FRCP FFPH FRCGP**

**Chief Inspector of General Practice**

## Our inspection team

Our inspection team was led by a CQC lead inspector.

## Background to Dr Uday Abhyankar

Dr Uday Abhyankar also known as Holly Road Surgery is located in an inner-city area of Birmingham. The practice has 1486 patients registered and a higher proportion of older patients with 19% of the population being over the age of 65 in comparison to the local average of 12%. The practice is located in a converted house and is in an area with high levels of social and economic deprivation, compared to England as a whole. The practice deprivation level is ranked as two out of 10, with 10 being the least deprived. Many of the people in the practice area are from Black and Minority Ethnic (BME) groups, with 66.9% of the practice population being within this group.

The practice team consists of two GP partners (both male). There is also a part time practice nurse, a health care assistant, a practice manager and a team of administrative and reception staff.

The practice is open between 8am to 1pm and 3.30pm to 6.30pm Mondays to Fridays except for Wednesday afternoons when the practice closes at 1pm. When the

## Overall summary

practice is closed between 1pm and 3.30pm and Wednesday afternoons, appointments are available at another practice, Heathfield Family Centre. Emergency appointments are available daily and telephone consultations are also available for those who need advice. Home visits are available to those patients who are unable to attend the practice.

Appointments were available when the practice was closed, through the local commissioning group federation

Improved Access Scheme (ICOF). Patients could access appointments between 6.30pm to 8pm Monday to Friday and during the weekend from 9am to 1pm Saturday and 10am to 1pm Sunday. These appointments can be booked in advance by the surgery or directly by the patients. When the practice is closed, primary medical services are provided by Primecare, an out of hours service provider and the NHS 111 service.

# Are services responsive to people's needs?

We rated the practice as good for providing responsive services.

**At our previous inspection on 15 March 2017, we rated the practice as requires improvement for providing responsive services. This was due to the July 2016 national GP patient survey which showed that patient satisfaction with how they could access care and treatment was below local and national averages.**

During this inspection we found the practice had worked with a local practice and had implemented improved opening hours, increased appointment availability and nursing staff hours to manage patient demand. Results from the July 2017 annual national GP patient survey showed that patients' satisfaction scores with how they could access care and treatment were lower than CCG and national averages. However, the surveys were distributed to patients during January and March 2017 and the practice had started to implement changes after October 2017. As the national survey data did not reflect the new changes, the practice had completed an in house survey between February 2018 and May 2018 to gather feedback from patients on the changes they had made. The results showed positive responses to the services provided.

## Responding to and meeting people's needs

The practice organised and delivered services to meet patients' needs. It took account of patient needs and preferences.

- The practice understood the needs of its population and tailored services in response to those needs.
- Telephone consultations were available which supported patients who were unable to attend the practice during normal working hours.
- The facilities and premises were appropriate for the services delivered.
- The practice made reasonable adjustments when patients found it hard to access services.

- The practice provided effective care coordination for patients who were more vulnerable or who had complex needs. They supported them to access services both within and outside the practice.
- Care and treatment for patients with multiple long-term conditions and patients approaching the end of life was coordinated with other services.

## Timely access to care and treatment

Patients were able to access care and treatment from the practice within an acceptable timescale for their needs.

- Patients had timely access to initial assessment, test results, diagnosis and treatment.
- Waiting times, delays and cancellations were minimal and managed appropriately.
- Patients with the most urgent needs had their care and treatment prioritised.
- Patients reported that the appointment system was easy to use. Since the previous inspection, the practice had increased face to face consultations and nursing staff hours to manage patient demand and at peak times the number of appointments were increased to reduce patients' waiting times.
- Results from the 2017 national GP patient survey showed 76% of patients found it easy to get through to the surgery by phone. This was higher than the CCG average of 60% and the national average of 71%. The management team told us they were currently in the process of changing the telephones with a new system being introduced in June 2018 to continue to improve telephone access for patients.
- The practice now provided GP appointments outside of normal opening hours through the local commissioning group federation Improved Access Scheme (ICOF). This included appointments outside of the practice opening hours and weekend appointments.

**Please refer to the Evidence Tables for further information.**

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 15 CQC (Registration) Regulations 2009
Treatment of disease, disorder or injury	Notifications – notice of changes
	The provider had not notified the CQC of the changes to their registration from a single-handed provider to a partnership.