

# Dr Narendra Patel

## Inspection report

The Surgery  
Main Road, Betley, Wrinnehill  
Crewe  
Cheshire  
CW3 9BL  
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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

We previously carried out an announced comprehensive inspection of Dr Narendra Patel on 15 December 2017 and rated the practice requires improvement overall and for providing safe, effective and well-led services. We carried out an inspection on 16 October 2018 to monitor that the required improvements had been made. At the inspection in October 2018 we rated the practice as good overall and requires improvement for providing effective services because:

- The care provided to patients near the end of their life was not delivered according to evidence-based guidelines or supported through a coordinated approach between services.
- Unverified quality indicators for patients with diabetes or patients experiencing poor mental health remained below national averages.

We also made four best practice recommendations:

- Update the recruitment policy so that it reflects legal requirements.
- Consider systems to reconcile safeguarding registers with the health visiting team.
- Complete a formal risk assessment to record the processes non-clinical staff followed to protect themselves and patients in the absence of immunisation for hepatitis B.
- Consider ways of gathering feedback from the virtual patient participation group to shape and improve services.

The full comprehensive reports for the inspections in December 2017 and October 2018 can be found by selecting the 'all reports' link for Dr Narendra Patel on our website at .

We carried out an announced focused inspection at Dr Narendra Patel on 10 December 2019. We decided to undertake an inspection of this service following our annual review of the information available to us. Due to the assurance received from our review of information we carried forward the ratings of good for the following key questions, caring and responsive, from our last inspection in October 2018. This inspection looked at the following key questions: safe, effective and well-led.

We based our judgement of the quality of care at this service is 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 and in safe and effective but requires improvement in well-led. We rated all the population groups as good.**

We rated the practice as **good** in safe because:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Guidance for access to patient online services, health and safety risk assessments and evidence of hardwire electrical testing were not in place. The day after our inspection the practice forwarded to us the appropriate documents.
- Appropriate standards of cleanliness and hygiene were met.
- Recruitment checks were carried out in accordance with legal requirements.
- A formal risk assessment to record the processes non-clinical staff followed to protect themselves and patients in the absence of immunisation for hepatitis B had been completed.

We rated the practice as **good** in effective because:

- Patients received effective care and treatment that met their needs.
- The care provided to patients near the end of their life was delivered according to evidence-based guidelines and supported through a coordinated approach between services.
- Quality indicators for patients with diabetes or patients experiencing poor mental health were comparable to the national averages.

We rated the practice as **requires improvement** in well-led because:

- Systems for storing emergency, controlled drugs were not secure and a risk assessment to mitigate any risks had not been completed.
- Systems were not in place to support or monitor the competency of dispensary staff who worked unsupervised. We found ongoing recording errors in the controlled drugs log book.

# Overall summary

- Opportunities to reduce the high exception reporting for patients with asthma, COPD and atrial fibrillation had been missed.
- A clear practice vision and strategy was not in place.
- Ways of engaging with patients to seek out their views on the way in which care and treatment was delivered had not been explored as recommended at our previous inspection.

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

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

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

- Make staff aware of and, embed into practice the new policy for access to patient online services.
- Make staff aware of and, embed into practice the new health and safety risk assessments.

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

## Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector and included a GP specialist advisor.

## Background to Dr Narendra Patel

Dr Narendra Patel is located at The Surgery, Main Road, Betley, Wrinehill, Crewe, Cheshire, CW3 9BL. The practice has good transport links and there is a dispensary within the practice.

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

Dr Narendra Patel is situated within the North Staffordshire Clinical Commissioning Group (CCG) and provides services to approximately 1,918 patients under the terms of a General Medical Services (GMS) contract. A GMS contract is a contract between NHS England and general practices for delivering general medical services to the local community.

The practice employs a male GP, two practice nurses, a practice manager and five administrative/dispensing staff working a range of hours.

The practice area is one of low deprivation when compared with the national average. Demographically the practice has a lower than average population of young patients and a higher older population. For example, 14.5% of patients are under 18-year olds compared with the national average of 20.7% and 29% of the practice population are 65 years and over compared with the national average of 17.3%. The general practice profile shows that the percentage of patients with a long-standing health condition is 51% which is comparable with the local CCG average of 55% and national average of 51%. National General Practice Profile describes the practice ethnicity as being 97.2% white British, 1.2% Asian, 0.3% black, 1.2% mixed and 0.1% other non-white ethnicities. Average life expectancy is 81 years for men and 85 years for women compared to the national averages of 79 and 83 years respectively.

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 17 HSCA (RA) Regulations 2014 Good governance</p> <p><b>How the regulation was not being met.</b></p> <p>The registered person had systems or processes in place that operating ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk. In particular:</p> <ul style="list-style-type: none"><li>• Systems for storing emergency, controlled drugs were not secure. A risk assessment to mitigate any risks had not been completed.</li><li>• Systems were not in place to support or monitor the competency of dispensary staff who worked unsupervised. We found ongoing recording errors in the controlled drugs log book.</li><li>• Opportunities to reduce the high exception reporting for patients with asthma, COPD and atrial fibrillation had been missed.</li></ul> <p>The registered person had systems or processes in place that operating ineffectively in that they failed to enable the registered person to evaluate and improve their practice in respect of the processing of the information obtained throughout the governance process. In particular:</p> <ul style="list-style-type: none"><li>• A clear practice vision and strategy was not in place to support the delivery of the service.</li></ul> <p>The registered person had systems or processes in place that operating ineffectively in that they failed to enable the registered person to seek and act on feedback from relevant persons and other persons on the services provided in the carrying on of the regulated activity, for the purposes of continually evaluating and improving such services. In particular:</p>

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## Requirement notices

- Ways of engaging with patients to seek out their views through the virtual patient participation group on the way in which care and treatment was delivered had not been explored as recommended at our previous inspection.