

# Dr Parmod Luthra (Spring Grove Medical Practice)

#### **Inspection report**

Thornbury Road Centre for Health Thornbury Road Isleworth Middlesex TW7 4HQ Tel: 020 8630 1058

Website: www.nhs.uk/Services/GP/Overview/ DefaultView.aspx?id=44206

Date of inspection visit: 3 January 2019 Date of publication: 15/02/2019

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?	Requires improvement	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Good	

## Overall summary

We carried out an announced comprehensive inspection at Dr Parmod Luthra (also known locally as Spring Grove Medical Practice) on 03 January 2019 as part of our inspection programme.

At the last inspection in December 2017 we rated the practice as requires improvement overall and specifically requires improvement for providing safe, effective and well-led services because:

- The practice had failed to act on patient correspondence and pathology results in a timely manner.
- We found concerns regarding the management of blank prescription forms, infection control, fire drills and effective monitoring of people experiencing poor mental health (including people with dementia).
- There was a lack of good governance in some areas.

Previous reports on this practice can be found on our website at: https://www.cqc.org.uk/location/1-525624918

At this inspection, we found that the provider had demonstrated improvements in most areas, however, they were required to make further improvements in some areas and are rated as requires improvement for providing safe services.

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 good overall and good for all population groups, except requires improvement for Working age people (including those recently retired and students) for providing effective services, because of low cervical screening.

We rated the practice as requires improvement for providing safe services because:

- Risks to patients were assessed and well managed in most areas, with the exception of those relating to the management of the spread of infections to the patients and staff were not adequate.
- Other risks to patients were assessed and well managed.

• Staff understood and fulfilled their responsibilities to raise concerns, and report incidents and near misses. When incidents did happen, the practice learned from them and improved their processes.

We rated the practice as good for providing effective, caring, responsive and well led services because:

- The practice routinely reviewed the effectiveness and appropriateness of the care it provided.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The practice was encouraging patients to register for online services and 40% of patients were registered to use online Patient Access.
- The practice was aware of and complied with the requirements of the Duty of Candour.
- There was a clear leadership structure and staff felt supported by management.

The areas where the provider **must** make improvements as they are in breach of regulations are:

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

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

- Consider ways to improve the identification of carers to enable this group of patients to access the care and support they need.
- Review ways to improve uptake of childhood immunisation, cervical and bowel cancer national screening.
- Improve the system in place to assure that the appropriate recruitment checks are always carried out in accordance with regulations.
- Take appropriate actions to reduce identified risks while waiting for concerns to be resolved.

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

**Professor Steve Field** CBE FRCP FFPH FRCGPChief Inspector of General Practice

#### Population group ratings

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

#### Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor and a practice nurse specialist advisor.

### Background to Dr Parmod Luthra

Dr Parmod Luthra (also known as Spring Grove Medical Practice) is situated at Thornbury Road Centre for Health, Thornbury Road, Isleworth, Middlesex, TW7 4HQ. The location is shared with another GP practice.

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

Dr Parmod Luthra is situated within the Hounslow City Clinical Commissioning Group (CCG) and provides services to 7,530 patients under the terms of a General Medical Services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

There is one principal GP, three salaried GPs, a trainee GP and a long term locum GP. Four GPs are male and two female, who work a total of 28 sessions (plus 4.5 trainee GP sessions) per week. The practice employs a clinical pharmacist, two locum practice nurses and two health care assistants. The practice manager is supported by a team of administrative and reception staff.

This is a training practice, where a doctor who is training to be qualified as a GP has access to a senior GP throughout the day for support. There are a full-time trainee GP.

The practice does not have a dedicated website but online services can be accessed through online Patient Access and NHS choices website.

There are higher than average number of patients under the age of 18, and fewer patients aged over 65 than the national average. The National General Practice Profile states that 45% of the practice population is from an Asian background with a further 13% of the population originating from black, mixed or other non-white ethnic groups. Information published by Public Health England, rates the level of deprivation within the practice population group as six, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is 81 years compared to the national average of 79 years. Female life expectancy is 86 years compared to the national average of 83 years.

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 12 HSCA (RA) Regulations 2014 Safe care and treatment Family planning services Care and treatment must be provided in a safe way Maternity and midwifery services for service users. Surgical procedures How the regulation was not being met: Treatment of disease, disorder or injury The provider had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular: • The provider had failed to address the risks found during the previous inspection regarding to control the spread of infections, including those that are health care associated. The provider had not maintained complete and

which could log all the data and provide assurance that temperatures had been within the required range, nor was the existing thermometer calibrated at least monthly, as recommended in Public Health England guidance.

contemporaneous record of the steps taken by the practice to address the infection control related risks.The provider did not have a secondary thermometer

This was in breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.