

Dr Simria Tanvir (also known as North Hyde Practice)

Quality Report

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Date of inspection visit: 12 December 2016

Date of publication: 19/05/2017

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 service	Good	
Are services safe?	Good	
Are services effective?	Good	

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Simria Tanvir (also known as North Hyde Practice) on 19 January 2016. The overall rating for the practice was requires improvement. The full comprehensive report on the 19 January 2016 inspection can be found by selecting the 'all reports' link for Dr Simria Tanvir on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 12 December 2016 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 19 January 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is now rated as good.

Our key findings were as follows:

- The practice ensured that non-clinical staff undertaking chaperone duties completed relevant training
- The practice had made improvements in the assessment of risks to patients, visitors and staff. There was evidence of completed risk assessments for health and safety, fire, and legionella. Fire safety arrangements now included a schedule of internal fire alarm testing and drills.
- The practice had implemented a comprehensive cleaning schedule and log including the frequency of deep cleaning tasks.
- Arrangements were in place for the monitoring of prescription stationery from when received and distributed within the practice.
- The practice had a defibrillator for use in a medical emergency.
- There was evidence of completed audit cycles to demonstrate quality improvement.
- Processes were in place for the induction of locum GPs who were recruited to work at the practice.

Professor Steve Field CBE FRCP FFPH FRCGP

Chief Inspector of General Practice

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

The practice is rated as good for providing safe services.

- Non-clinical staff who undertook chaperone duties had received relevant training for the role.
- The practice had completed risk assessments for health and safety, fire, and legionella and undertook water system testing. Fire safety arrangements included a schedule and of fire alarm testing and fire drills.
- A comprehensive cleaning schedule and log including the frequency of deep cleaning tasks was maintained.
- Effective arrangements were in place for the monitoring and distribution of prescription stationery within the practice.
- The practice had a defibrillator for use in a medical emergency.

Good



Are services effective?

The practice is rated as good for providing effective services.

- An induction pack had been implemented for locum doctors recruited to work at the practice.
- There was evidence of completed audit cycles to demonstrate quality improvement.

Good



Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

The provider had resolved the concerns for safety and effective identified at our inspection on 19 January 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People with long term conditions

The provider had resolved the concerns for safety and effective identified at our inspection on 19 January 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Families, children and young people

The provider had resolved the concerns for safety and effective identified at our inspection on 19 January 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Working age people (including those recently retired and students)

The provider had resolved the concerns for safety and effective identified at our inspection on 19 January 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People whose circumstances may make them vulnerable

The provider had resolved the concerns for safety and effective identified at our inspection on 19 January 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



People experiencing poor mental health (including people with dementia)

The provider had resolved the concerns for safety and effective identified at our inspection on 19 January 2016 which applied to everyone using this practice, including this population group. The population group ratings have been updated to reflect this.

Good



Dr Simria Tanvir (also known as North Hyde Practice)

Detailed findings

Our inspection team

Our inspection team was led by:

This follow up desk-based focused inspection was conducted by a CQC inspector.

Background to Dr Simria Tanvir (also known as North Hyde Practice)

Dr Simria Tanvir (also known as North Hyde Road Surgery) is a well-established GP practice situated within the London Borough of Hillingdon. The practice lies within the administrative boundaries of NHS Hillingdon Clinical Commissioning Group (CCG) and is a member of the Clover Health GP Network GP network in the Hillingdon locality.

The practice provides primary medical services to approximately 3,300 patients living in Hayes. The practice holds a core General Medical Services contract and Directed Enhanced Services contracts. The practice is located at 167 North Hyde Road, Hayes, Hillingdon UB3 4NS with good bus transport links. The practice premises include three consulting rooms, a conference room, administration rooms and patient waiting area. There is wheelchair access to the entrance of the building and accessible toilet facilities. Off street car parking is available nearby.

The practice population is ethnically diverse and has a higher than the national average number of male and female patients between 0 and 19 years of age and

between 25 and 44 years of age. There is a lower than the national average number of patients 55 years plus. The practice area is rated in the fifth more deprived decile of the national Index of Multiple Deprivation (IMD). People living in more deprived areas tend to have greater need for health services. Data from Public Health England 2015/16 shows the practice has a lower percentage of patients with a long-standing condition compared to CCG and England averages (49%, 50%, and 53% respectively).

The practice team comprises of one principal female GP, one female regular locum GP and a male locum GP who collectively work 10 sessions per week. They are supported by a part time female practice nurse, a health care assistant/receptionist, a practice manager, facilities manager and three receptionists.

The practice is registered with the Care Quality Commission to provide the regulated activities of diagnostic & screening procedures, family planning, maternity & midwifery services and treatment of disease disorder & Injury.

The practice opening hours are 9am to 6.30pm Monday to Friday with the exception of Wednesday when it is closed from 1pm. Appointments in the morning are available from 9am to 11.30am Monday to Friday and from 4pm to 6pm Monday, Tuesday, Thursday and Friday. Extended hours pre-bookable appointments are offered from 6.30pm to 7.20pm Monday and Friday. Telephone consultation appointments are available daily. The details of the out-of-hours service are communicated in a recorded message accessed by calling the practice when it is closed and on the practice website.

The practice provides a wide range of services including chronic disease management, childhood immunisations, cervical screening and travel vaccinations.

Detailed findings

Why we carried out this inspection

We undertook a comprehensive inspection of Dr Simria Tanvir (also known as North Hyde Practice) on 19 January 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement. The full comprehensive report following the inspection on 19 January 2016 can be found by selecting the 'all reports' link for Dr Simria Tanvir on our website at www.cqc.org.uk.

We undertook a follow up desk-based focused inspection of Dr Simria Tanvir (also known as North Hyde Practice) on 12 December 2016. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

We carried out a desk-based focused inspection of Dr Simria Tanvir (also known as North Hyde Practice) on 12 December 2016. This involved the review of documentation we had asked the practice to submit to demonstrate that improvements had been made in the areas of concern that were identified at our previous inspection on 19 January 2016.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 19 January 2016, we rated the practice as requires improvement for providing safe services. The practice could not demonstrate effective processes and practices to assess, manage and mitigate foreseeable risks across all areas.

Some staff who undertook chaperone duties had not been appropriately trained for the role, there was no formal schedule for the deep cleaning of the practice and prescription stationery stock was not monitored. A health and safety risk assessment for the whole practice environment had not been undertaken, actions identified to mitigate risks in relation legionella had not been completed and there were weaknesses in the provisions to deal with medical emergencies.

These arrangements had significantly improved when we undertook a follow up inspection on 12 December 2016. The practice is now rated as good for providing safe services.

Overview of safety systems and process

- Training records demonstrated that non-clinical staff who acted as chaperones had received relevant training for the role.
- The practice cleaning schedule log had been revised to include areas where and when deep cleaning was required to be undertaken.

- Effective arrangements were in place for the monitoring and distribution prescription stationery. The practice had implemented a log for the recording of blank prescription serial numbers on receipt into the practice and when distributed within the practice.

Monitoring risks to patients

The practice had made improvements in the assessment of risks to patients, visitors and staff. Since our comprehensive inspection on January 2016, the practice had completed risk assessments for health and safety, fire, and legionella. (Legionella is a term for a particular bacterium which can contaminate water systems in buildings). There was evidence that the practice had implemented processes and systems in response to risk assessment recommendations. For example, regular monitoring of the water system, twice yearly fire drills and weekly fire alarm testing.

Arrangements to deal with emergencies and major incidents

At our previous inspection in January 2016 the practice did not have a documented risk assessment to underpin the decision not to have a defibrillator available for use in a medical emergency and did not stock all of the recommended medicines for the treatment of severe anaphylaxis. At this inspection the practice provided evidence of the purchase of a defibrillator and the training of staff in its use, along with a stock list of all the recommended medicines for the treatment of severe anaphylaxis.

Are services effective?

(for example, treatment is effective)

Our findings

At our previous inspection on 19 January 2016, we rated the practice as requires improvement for providing effective services as there were no formal arrangements in respect of GP local induction and there was no evidence of completed clinical audit cycles.

These arrangements had significantly improved when we undertook a follow up inspection on 12 December 2016. The practice is now rated as good for providing effective services.

Management, monitoring and improving outcomes for people

There was evidence of clinical audit which demonstrated quality improvement. The practice had completed two full cycle audits within the last year. For example, the practice had conducted an audit on use of emergency packs given

to patients with Chronic Obstructive Pulmonary Disease (COPD) to manage acute exacerbations. Initial data collected showed that three out of 33 eligible patients had received an emergency pack with advice on how and when to use it. The remainder of COPD patients had either received the pack with no advice or had not been given one at all. The results were discussed in the practice clinical meeting and NICE guidelines on the management of COPD were reviewed. Following this patients were contacted for an appointment to discuss emergency pack prescription and instructions for use. Second cycle data showed an improvement with 31 patients having received an emergency pack and advice on use.

Effective staffing

The practice had implemented an induction pack and recruitment check list for GP locum staff appointed to work at the practice.