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
Summary of findings

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Rajiv Chitre on 17 August 2017. The overall rating for the practice was good. However, it was rated requires improvement for providing safe services. The full comprehensive report on the August 2017 inspection can be found by selecting the ‘all reports’ link for Dr Rajiv Chitre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 7 March 2018 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 17 August 2017. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Our key findings were as follows:

- The practice had reviewed it process to ensure patient safety alerts such as those from Medicines and Healthcare products Regulatory Agency (MHRA) were received and actioned appropriately.

- The practice had established a system to ensure relevant alerts were communicated to relevant staff at both sites. If there were urgent risks that needed to be communicated to staff they would be escalated by the practice manager either through a telephone call or by visiting the site.

- To meet the needs of the increasing patient list size the practice had recruited extra administration staff and increased clinical sessions.

Professor Steve Field (CBE FRCP FFPH FRCGP)
Chief Inspector of General Practice
Our inspection team

Our inspection team was led by: Our inspection team was led by a CQC Lead Inspector.

Background to Dr Rajiv Chitre

Dr Rajiv Chitre has two practices; Dr Rajiv Chitre, 168 Hamstead Road, Handsworth Road, Birmingham and NHS Tanhouse Clinic, Hamstead Road, Great Barr, Birmingham. The practice has a combined list size of approximately 5600 patients. Patients are able to visit either of the two sites in order to access primary medical services.

The staff group, polices, systems and procedures at Dr Rajiv Chitre are centrally managed and operate across both sites. Therefore we inspected the main site at Dr Rajiv Chitre (168 Hamstead Road, Handsworth) on 7 March 2018. However, as both practices are registered individually with CQC, both sites have individual reports and ratings.

The two GP partners (both male) and two long term locum GP (both female) work across both sites along with two practice nurses and a healthcare assistant. The practice manager is responsible for overseeing both sites; there is an assistant practice manager who supports the practice manager. They are supported by an administration team that work across both sites.

The practice is located in an urban area of Birmingham in a converted residential building which is leased from a landlord. It was recently renovated through funding secured from the CCG.

Based on data available from Public Health England, the levels of deprivation (deprivation covers a broad range of issues and refers to unmet needs caused by a lack of resources of all kinds, not just financial) in the area served by Dr Rajiv Chitre are below the national average, ranked at two out of 10, with 10 being the least deprived.

The opening hours at the main practice at Handsworth are:

- Monday 9.00-12.00, 4pm to 6.30pm.
- Tuesday 9am to 12pm and 4pm to 6pm.
- Wednesday 9am to 12pm (closed in the afternoon).
- Thursday 8am to 6.30pm
- Friday 9am 12pm and 4pm to 6pm.

If the main site was closed during contracted hours, patient calls would be transferred to the branch site. The practice offers extended hours from 6.30pm to 8pm Monday to Friday as well as Saturday and Sunday opening from 9am to 12pm. This was offered through a federation of practices organised by the CCG and patients had a choice of a number of practices they could attend.

Why we carried out this inspection

We undertook a comprehensive inspection of Dr Rajiv Chitre Health Centre on 17 August 2017 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 August 2017 can be found by selecting the ‘all reports’ link for Dr Rajiv Chitre on our website at www.cqc.org.uk.
We undertook a follow up focused inspection of Dr Rajiv Chitre on 7 March 2018. 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.
Our findings

At our previous inspection on 17 August 2017, we rated the practice as requires improvement for providing safe services as the practice was unable to demonstrate an effective system for the management of medicine safety alerts.

At this follow up inspection on 7 March 2018 we saw that improvements had been made. The practice is now rated as good for providing safe services.

Safety systems and processes

The practice manager, the assistant practice manager as well as clinical staff were registered to receive medical safety alerts such as those from the Medicines and Healthcare products Regulatory Agency (MHRA). The practice had reviewed its safety alerts policy which stated that the practice manager was responsible disseminating alerts to relevant staff members. If the practice manager was away the assistant practice manager was responsible.

We saw evidence that relevant alerts were kept in file signed by clinical staff members to acknowledge receipt with action taken. We saw an example of a medicine safety alert from February 2018 where searches on the patient record system had been carried out to identify relevant patents. Minutes of meeting we looked at showed that alerts were discussed with relevant actions.

To ensure that all clinical staff at both sites received the alerts the practice manager or the assistant practice manager emailed alerts and we saw examples of this. Clinicians were then asked to sign a log sheet to confirm that they had received the alert. If there were urgent risks they would be escalated by the practice manager through telephone a call or by visiting the site.

Monitoring risks to patients

During our previous inspection we found that the services patient list size was increasing and staff members we spoke with told us that at times they were starting to struggle providing timely access to appointments and were in need of extra GP sessions. Staff members we spoke with confirmed this.

At this inspection one of the GP partner had increased their clinical time by one session and one of the locum GP had been asked to provide an extra session on a Wednesday from 10.30am to 1.30pm to improve access. The practice had also recruited an extra part time administration staff to meet patient needs in January 2018. We spoke with a new administration staff member who had been recruited recently. We also spoke with an existing staff member who confirmed that new staff had been recruited and extra clinical sessions had been introduced.