

# Dr Joann Amin

## **Inspection report**

The Willows Lords Avenue, Salford Salford M5 5JR Tel: 01617362356 www.thewillowssurgery.co.uk

Date of inspection visit: 27 June 2023 Date of publication: 21/09/2023

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?	<b>Requires Improvement</b>	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Good	

# **Overall summary**

We previously carried out an announced inspection at Dr Joann Amin on 22 July 2022. At that earlier inspection, the practice was rated as requires improvement with the following key question ratings:

Safe - requires improvement

Effective - requires improvement

Caring – good (rating awarded at the inspection 24 May 2016)

Responsive - good (rating awarded at the inspection 24 May 2016)

Well-led - requires improvement

We found breaches of Regulation 17 (Good governance) and 19 (Fit and proper persons employed).

At this inspection, on 27 June 2023, we found improvements had been made to the service, but further improvement was required. We have rated the practice as good overall; the key questions of safe, caring, responsive and well led are rated as good. We have rated effective as requires improvement. We found a breach of Regulation 12 (Safe care and treatment).

The full reports for previous inspections can be found by selecting the 'all reports' link for Dr Joann Amin on our website at www.cqc.org.uk

#### Why we carried out this inspection

We carried out a full comprehensive inspection in response to risk as the last inspection rated the practice as requires improvement overall.

### How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews remotely.
- Completing clinical searches on the practice's patient records system and discussing findings with the provider.
- Requesting evidence from the provider.
- A short site visit.
- Gaining feedback from staff by using staff questionnaires.

### **Our findings**

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
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# **Overall summary**

- 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 **good** overall.

We rated the practice **good** for providing safe services:

- Recruitment checks were carried out in accordance with regulations.
- The system for receiving and acting on safety alerts was effective.

We rated the practice **requires improvement** for providing effective services:

- Dementia care plans were not effective.
- Patients with long-term conditions were not always effectively monitored.
- The practice did not consistently record repeated consent to care and treatment in line with legislation and guidance.

We rated the practice **good** for providing caring services:

• Staff dealt with patients with kindness and respect and involved them in decisions about their care.

We rated the practice **good** for providing responsive services:

• Patients could access care and treatment in a timely way.

We rated the practice **good** for providing well-led services:

• Governance and assurance systems had improved since our last inspection.

We found a breach of regulation. The provider **must**:

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

The provider **should**:

- Continue efforts to improve the take up of childhood immunisations and cervical screening programmes.
- Undertake a review of the approach to the recording and review of Do Not Attempt Cardio Pulmonary Resuscitation (DNACPR) decision making and recording and be assured that an appropriate policy is in line with current practice guidelines.

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

### Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

## Our inspection team

Our inspection team was led by a CQC lead inspector who undertook a site visit with a second inspector. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

### Background to Dr Joann Amin

Dr Joann Amin, also known as The Willows Medical Practice, is located in Salford at:

The Willows Medical Practice

Lords Avenue

Salford

Manchester

M5 5JR

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

The practice is situated within the Greater Manchester Integrated Care System (ICS) and delivers General Medical Services (GMS) to a patient population of about 3610. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices in the Salford South East primary care network (PCN).

Information published by Public Health England shows that deprivation within the practice population group is in the lowest decile (one of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 87.2% White, 5.4% Asian, 4.2% Black, 2.3% Mixed and 0.9% Other.

The age distribution of the practice population closely mirrors the local and national averages.

There is one GP and one advanced nurse practitioner who provide cover at the practice. The practice is a training practice and regularly has student doctors provide care and treatment at the practice. The practice has one long term locum nurse who provides nurse led clinics for long-term conditions. The GP is supported at the practice by a team of reception/administration staff. There is a practice manager to provide managerial oversight.

The practice is open between 8:30am to 6:30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

# **Requirement notices**

# Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity R	Regulation
Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<ul> <li>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</li> <li>The provider had failed to assess the risks to the health and safety of service users receiving care or treatment and had not done all that is reasonably practicable to mitigate any such risks. In particular:</li> <li>Dementia care plans did not contain enough evidence that the reviewer had discussed the patient's current medical conditions, performed physical examination and considered the patient's wishes.</li> <li>Patients diagnosed with atrial fibrillation had not routinely been prescribed an anticoagulant to reduce the risk of stroke.</li> <li>Patients with long term conditions were not always reviewed to ensure their treatment was optimised in line with national guidance.</li> <li>Patients requiring high dose steroid treatment for severe asthma episodes were not always followed up in line with national guidance to ensure they received appropriate care.</li> <li>We found patients who had potentially undiagnosed diabetes who were not reviewed in line with national guidance to ensure they received appropriate care.</li> <li>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations</li> </ul>
	2014.