

# Dr Nalliah Sivananthan

## Inspection report

125 Alexandra Park Road  
Wood Green  
London  
N22 7UN  
Tel: 02088882518

Date of inspection visit: 18 October 2021  
Date of publication: 22/12/2021

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 well-led?

Good



# Overall summary

We carried out an announced focussed inspection at Alexandra Surgery on 18 October 2021. Overall, the practice is rated as Good.

Set out the ratings for each key question

Safe - Requires Improvement

Effective - Good

Well-led - Good

Following our previous inspection on 23 November 2016, the practice was rated Good overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Dr Nalliah Sivananthan on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## **Why we carried out this inspection**

This inspection was a focused inspection to follow up on information of concern we hold about the location, regarding the practice's child immunisation and cervical screening uptake rates.

## **How we carried out the inspection**

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

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 using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A site visit

## **Our findings**

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.

# Overall summary

**We have rated this practice as Good overall.**

We found that:

- Systems, processes and practices were not always reliable or appropriate to keep people safe. For example, systems for locum GP pre-employment checks and locum GP induction; and arrangements for monitoring patients prescribed a high risk medicine called Lithium, placed patients at risk.
- The practice was not meeting its cervical screening uptake target but we saw evidence of actions being undertaken to improve performance.
- Although the practice kept a significant incidents log, it was unclear how reflection and learning from these incidents took place.
- Appropriate standards of cleanliness and hygiene were met.
- Risk assessments had been undertaken regarding fire safety; and health and safety.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic. Patients could access care and treatment in a timely way.
- There was compassionate, inclusive and effective leadership at all levels.
- We saw evidence of systems for learning and continuous improvement.

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

- Ensure that care and treatment is provided in a safe way.

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

- Continue to improve systems for patient recall and patient monitoring.
- Take action to improve how learning from significant events is shared.

**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

## Our inspection team

Our inspection team was led by a CQC lead inspector who undertook a site visit and spoke with staff. The team included a GP specialist advisor who attended the site visit, completed on site clinical searches and spoke with staff.

## Background to Dr Nalliah Sivananthan

Alexandra Surgery is located at 125 Alexandra Park Road, London, N22, 7UN. The practice is in a converted house within a busy residential and commercial area of Bounds Green, North London. The practice has a disabled parking bay at the front of the surgery. The nearest bus stops are approximately three minutes' walk from the practice. The practice is part of a primary care network of four other local practices.

The practice operates under a Personal Medical Services (PMS) contact (a locally agreed alternative to the standard GMS contract used when services are agreed locally with a

practice which may include additional services beyond the standard contract). The practice provides NHS services through a Personal Medical Services (PMS) contract to approximately 5,700 patients. The practice is part of NHS Haringey Clinical Commissioning Group (CCG) and has a deprivation score of 6 out 10 (1 being the most deprived). Alexandra Surgery cares for a diverse population (with approximately 27% of its patients from Black and minority ethnic backgrounds).

The practice's clinical team is led by a female lead GP (working ten sessions per week), supported by six locum GPs (three male, three female working a combined 17 sessions per week). A further female locum GP works one session per month.

A female practice nurse works at the practice (6 sessions per week) and a female clinical pharmacist works the equivalent of a 0.64 full time role. The clinical team are supported by a practice manager, an IT manager and a team of reception/administration staff.

The practice is registered with the Care Quality Commission to provide the following regulated activities:

- Diagnostic and screening procedures
- Family planning
- Maternity and midwifery services
- Surgical procedures
- Treatment of disease, disorder or injury

The practice's opening hours are 8:00am to 6:30pm on weekdays. Extended hours (telephone) appointments are also available Mondays, Thursdays, Fridays 6:30pm - 9:00pm and Tuesdays, Wednesdays 6:30pm - 7:30pm. Patients can also book appointments to be seen at local hub centres between 6:30pm and 8:30pm on weekdays and 8:00am to 8:00pm at weekends.

Due to the enhanced infection prevention and control measures put in place since the pandemic and in line with the national guidance, most GP appointments were telephone consultations.

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 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	Regulation
Diagnostic and screening procedures	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment
Family planning services	Regulation 12 HSCA (RA) Regulations 2014
Maternity and midwifery services	Safe care and Treatment
Treatment of disease, disorder or injury	<b>Care and treatment must be provided in a safe way for service users</b>
Surgical procedures	<b>How the regulation was not being met:</b> <ul style="list-style-type: none"><li>The provider did not have effective arrangements in place to ensure blood test results were appropriately reviewed prior to prescribing Lithium high risk medication.</li></ul> This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.