

Dr Emad Gabrawi

Quality Report

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30 September 2016

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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

Contents

Summary of this inspection

| | |
|---|--------|
| Overall summary | Page 2 |
| The five questions we ask and what we found | 3 |

Detailed findings from this inspection

| | |
|------------------------------------|---|
| Our inspection team | 4 |
| Why we carried out this inspection | 4 |
| How we carried out this inspection | 4 |
| Detailed findings | 5 |

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of this practice on 12 May 2015. Breaches of legal requirements were found. After the comprehensive inspection, the practice wrote to us to say what they would do to meet legal requirements in relation to the regulatory breaches of the Health and Social Care Act 2008 (Regulated Activities) 2014 Regulation 15 Premises and equipment. We undertook a desk top review on 30 September 2016 to check that they had followed their plan and to confirm that they now met the legal requirements.

This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Dr Emad Gabrawi on our website at www.cqc.org.uk.

Overall the practice is rated as Good. Specifically, following the focused desk top inspection we found the practice to be good for providing safe services. Our key findings across all the areas we reviewed were as follows:

- A fire risk assessment was completed in September 2015 and an infection prevention and control audit was completed in June 2015. The practice documented and shared with us actions taken in accord with the findings.

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. Systems and processes had been reviewed and were in place to keep people safe. For example:

- A fire risk assessment was completed in September 2015 and an infection prevention and control audit was completed in June 2015. The practice documented and shared with us actions taken in accord with the findings.

Good



Dr Emad Gabrawi

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC inspector.

Why we carried out this inspection

We undertook a desk top focused inspection of Dr Emad Gabrawi on 30 September 2016. This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 12 May 2015 had been made.

We inspected the practice against one of the questions we ask about services: is the service safe? This is because during our comprehensive inspection in May 2015 the service was not meeting some legal requirements and regulations associated with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Regulation 15 Premises and equipment.

During the May 2015 comprehensive inspection we found the provider had not protected people against the

risk of inappropriate or unsafe care and treatment, by means of maintaining the premises and equipment. This was in breach of regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because a fire risk assessment of the premises had not been completed in the last 12 months. Fire alarm tests and evacuation drills were not performed regularly. A recent (within the last 16 months) infection prevention and control audit had not been performed.

How we carried out this inspection

We reviewed a range of information we hold about the practice:

- The action report submitted by the practice and subsequent actions it told us they had implemented.
- Reviewed the fire risk assessment completed in September 2015, reviewed the infection prevention and control audit completed in June 2015.

To get to the heart of patients' experiences of care and treatment, we asked the following one question:

- Is it safe?

Are services safe?

Our findings

Cleanliness and infection control

We reviewed the infection prevention and control audit completed on 16 June 2015 and updated by the practice again in November 2015. We noted actions identified were documented within the audit and documented on the plan when completed. For example, as an action, cleaning schedules and records had been introduced to use when cleaning the practice.

Monitoring safety and responding to risk

The practice shared with us a fire risk assessment that was completed in September 2015. Staff told us the fire equipment was tested annually. In response to the risk assessment the practice produced a new fire safety policy and emergency plan. Actions identified in the action plan had been completed. For example, a wireless smoke detector and break glass point had been installed on 20 July 2016. We were shown evidence fire alarm tests were performed weekly and evacuation drills were performed on 4 August 2015, 17 December 2015 and 19 April 2016. Records previously shared with us showed staff were up to date with fire training and this was due for renewal and planned for September 2016.