

# Dr Ashraf Botros

## Quality Report

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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

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Ashraf Botros on 25 May 2017. The overall rating for the practice was good. However, within the key question of safe areas were identified as 'requires improvement' as the practice was not meeting the legislation for providing safe care and treatment. The practice was issued a requirement notice under Regulation 12, safe care and treatment. The full comprehensive inspection on 25 May 2017 can be found by selecting the 'all reports' link for the Dr Ashraf Botros on our website at [www.cqc.org.uk](http://www.cqc.org.uk). This inspection was a focused follow-up inspection carried out on 23 January 2018 to confirm the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations we identified at our previous inspection on 25 May 2017. This report covers our findings in relation to those requirements and also any additional improvements made since our last inspection.

Overall the practice is rated as good.

Our key findings are as follows:

- The practice had implemented an effective system to monitor patients on high risk medicines.
- The practice had reviewed their emergency medicine provisions and a log of checks had been implemented for all medicines and emergency equipment.

In addition improvements had been made in the following areas we had recommended:

- The practice had implemented a system to ensure that results were received for all samples sent for the cervical screening programme.
- The practice had taken steps to improve uptake for national bowel and breast cancer screening programmes and they had taken steps to improve childhood immunisation uptake.

**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. The practice had implemented an effective system to monitor patients on high risk medicines, reviewed their emergency medicine provisions and a log of checks had been implemented for all medicines and emergency equipment.

**Good**



# Dr Ashraf Botros

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

The inspection team was led by a CQC inspector and included a specialist advisor from our medicines team.

## Background to Dr Ashraf Botros

Dr Ashraf Botros also known as St. Georges Medical Centre is situated at 276 Lady Margaret Road, Southall, Middlesex, UB1 2RX. The practice provides NHS primary care services through a General Medical Services (GMS) contract to approximately 3,000 people living in the Southall area of the London Borough of Ealing. The practice is part of the NHS Ealing Clinical Commissioning Group (CCG). The practice is also part of the North Southall GP network which comprises 15 GP practices.

The practice population is ethnically diverse with a higher than average number of children and people between 20 and 50 years old. The population over 50 years is lower than average. The practice area is rated in the fourth most deprived decile of the Index of Multiple Deprivation (IMD). People living in more deprived areas tend to have a greater need for health services.

The practice is registered with the Care Quality Commission (CQC) to provide the regulated activities of diagnostic and screening procedures, treatment of disease, disorder or injury, family planning and surgical procedures. The practice team consists of a male full time GP, a female locum GP (one session), two practice nurses, a health care

assistant, a practice manager and four reception staff. The practice is open between 8.30am and 6.30pm Monday, Tuesday, Thursday and Friday and 8.30am to 1.30pm Wednesday.

The practice is providing the following services; anticoagulation clinics, long-term conditions management, insulin initiation, minor surgery, phlebotomy, smoking cessation, cervical smears, travel and childhood immunisations, and well women / men clinics.

## Why we carried out this inspection

We undertook a comprehensive inspection of Dr Ashraf Botros on 25 May 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 for the Safe domain. The full comprehensive report following the inspection can be found by selecting the 'all reports' link for Dr Ashraf Botros on our website at [www.cqc.org.uk](http://www.cqc.org.uk). We undertook a focused follow-up inspection at Dr Ashraf Botros on 23 January 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.

## How we carried out this inspection

Before visiting, we reviewed an action plan submitted by the practice. We carried out an announced visit on 23 January 2018. During our visit we:

- Spoke with the lead GP and the practice manager.
- Reviewed a sample of personal care or treatment records of patients and other documentation.

## Are services safe?

### Our findings

At our inspection on 25 May 2017 we rated the practice as requires improvement for providing safe services as we identified shortfalls in respect of monitoring patients on high risk medicines and shortfalls in the management of emergency medicines and equipment. We found that there was not an effective system in place to check that patients on DMARDS (disease modifying anti-rheumatic drugs) and lithium had received blood tests before issuing repeat prescriptions. We also found that there was no log of

checks of emergency equipment to ensure it was in good working order, no medicine to treat hypoglycaemia (low blood sugar) and we found two out of date medicines in the doctors bag.

Significant improvements had been made when we undertook the follow-up inspection on 23 January 2018. We reviewed patients on DMARDS and lithium and found that an effective system had been implemented to ensure blood tests had been carried out before prescriptions were issued. In addition the practice had reviewed their emergency medicine provisions and a log of checks had been implemented for all medicines and emergency equipment.