

Dr Shabir Ahmad Malik

Inspection report

Kent Elms Health Centre 1 Rayleigh Road, Eastwood Leigh On Sea Essex SS9 5UU Tel: 01702 529333

Date of inspection visit: 10 October 2018 Date of publication: 01/11/2018

Good

Good

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

Are services safe?

Overall summary

This practice is rated as Good overall. (Previous rating 12 October 2017 – Good)

We carried out an announced comprehensive inspection at Dr Shabir Ahmad Malik on 12 October 2017. The overall rating for the practice was good, with requires improvement for safe. The full comprehensive report on the October 2017 inspection can be found by selecting the 'all reports' link for Dr Shabir Ahmad Malik on our website at www.cqc.org.uk.

The key question at this inspection is rated as:

Are services safe? – Good

We carried out an announced focused inspection at Dr Shabir Ahmad Malik on 10 October 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 12 October 2017. We inspected the key question safe as this area related to the breach of regulation.

This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

At this inspection we found:

• The practice had evidence to confirm the immunisation status of applicable clinical and non-clinical staff in relation to other immunisations (other than hepatitis B) recommended by the Health and Safety at Work Act 1974.

- The practice had a system to securely store blank prescription forms and monitor their use.
- The practice had backup temperature data loggers in both medicine and vaccine refrigerators.
- The practice had acted on the recommended improvements following a fire risk assessment.
- The practice could now evidence they had medical defence indemnity for professional negligence claims or allegations of malpractice for a specific clinical staff member.
- We viewed the practice's unverified cervical screening data, which showed that the practice was on track to deliver this programme to eligible patients.
- Verbal complaints were documented.
- The practice had identified 1% of their patient population as carers.
- The practice had a good awareness of their patients with hearing loss and offered adjustments to support those patients access care in the preferred way for that patient.
- There was a monitoring schedule in place to ensure that the alarm in the patient toilet was functioning correctly.
- There was an ongoing review process in place for all policy documents, this was to ensure that they were updated and so they reflected current effective dates and future review dates.

Professor Steve Field CBE FRCP FFPH FRCGPChief Inspector of General Practice

Please refer to the detailed report and the evidence tables for further information

Our inspection team

Our inspection team consisted of a Care Quality Commission (CQC) lead inspector.

Background to Dr Shabir Ahmad Malik

Dr Shabir Ahmad Malik situated at Kent Elms Health Centre in Leigh on Sea is a GP practice which provides primary medical care for approximately 3,198 patients living in Eastwood and the surrounding areas.

Dr Shabir Ahmad Malik provides primary care services to local communities under a Personal Medical Services (PMS) contract, which is a locally agreed contract between general practices and NHS England. The practice population is predominantly white British along with a small ethnic population of Asian and Eastern European origin. There is a principal GP (male) who is supported by three locum GPs (female) and a practice nurse. There is a practice manager who is supported by a team of administrative and reception staff.

The practice operates out of a single storey building which is shared with two other practices. There is a car park outside with adequate disabled parking available.

The practice is open Monday to Friday from 8am until 6.30pm. Extended opening is available on Monday and Thursday until 7.30pm. When the practice is closed services are provided by Integrated Care 24 Limited via the 111.

Are services safe?

At our previous inspection on 12 October 2017, we rated the practice as requires improvement for providing safe services. This was because there was absence of action following a fire risk assessment. There was also a lack of security and monitoring of prescription stationery. Expected immunisation checks had not taken place and there was no evidence of indemnity insurance being in place for one of the clinicians. There was no back up thermometer in place or alternative means of back up.

When we undertook a follow up inspection of the service on 26 September 2018, we found arrangements had significantly improved.

We rated the practice as good for providing safe services.

Safety systems and processes

The practice had clear systems to keep people safe.

• The practice carried out appropriate staff checks at the time of recruitment and on an ongoing basis. We found

that the practice had recorded the immunisation status of both clinical and non-clinical staff for the immunisations recommended by the Health and Safety at Work Act 1974.

• We found evidence that medical defence indemnity for professional negligence claims or allegations of malpractice was available for clinical staff.

Appropriate and safe use of medicines

The practice had reliable systems for appropriate and safe handling of medicines.

- The practice had backup temperature data loggers for their vaccine and medicines refrigerator.
- There was a system in place to securely store and monitor the use of blank prescription forms.

Track record on safety

The practice had a good track record on safety.

• We found that all recommendations from the July 2017 fire risk assessment had been implemented.

Please refer to the evidence tables for further information.