

# Dr Amar Kaw

## 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 previously carried out an announced comprehensive inspection at Dr Amar Kaw on 30 August 2016. The overall rating for the practice was good. Within that overall rating the practice was rated as requires improvement for providing safe services. This was because it was not meeting legal requirements in relation to some aspects of:

- Infection prevention and control.
- Fire and electrical safety.
- Disclosure and Barring Service (DBS) checks for staff. DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable.

The full comprehensive report of the August 2016 inspection can be found at [www.cqc.org.uk/location/1-507808099](http://www.cqc.org.uk/location/1-507808099).

This inspection on 24 October 2017 was an announced focused inspection and was carried out to confirm that the practice had completed its plan to meet the legal

requirements in relation to the breaches in regulations that we identified in our previous inspection on 30 August 2016. This report covers our findings in relation to those requirements.

Overall the practice is rated as good.

Our key findings were as follows:

- Every member of staff carrying out chaperone duties had received a DBS check.
- The practice took action to mitigate risks associated with the spread of infection and with legionella.
- Staff had completed fire training.
- An exposed light socket in the patient toilet had been replaced.

The provider had also acted on recommendations we made at our previous inspection and implemented additional improvements:

- The practice had reviewed and updated its service continuity plan for major incidents such as power failure or building damage. The plan included emergency contact numbers for staff.

# Summary of findings

- Action had been taken to increase child immunisation rates and the practice had vaccinated 100% of children up to age two. The national expected coverage of vaccinations is 90%.
- From the sample of two documented examples we reviewed we found that care plans for people with learning disabilities were complete. The practice had ten people on its learning disabilities register.

At our previous inspection on 30 August 2016 we rated the practice as requires improvement for providing safe services because not all risks to the health and safety of service users were being managed and mitigated. At this inspection we found the shortfalls we identified had been remedied. Consequently, the practice is rated as good for providing safe services.

**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 strengthened systems, processes and practices to minimise risks to patient safety.

**Good**



# Summary of findings

## The six population groups and what we found

We always inspect the quality of care for these six population groups.

### Older people

The practice is rated as good for the care of older people.

The rating was given following the comprehensive inspection in August 2016. A copy of the full report following the August 2016 inspection is available on our website at [www.cqc.org.uk/location/1-507808099](http://www.cqc.org.uk/location/1-507808099).

Good



### People with long term conditions

The practice is rated as good for the care of people with long-term conditions.

The rating was given following the comprehensive inspection in August 2016. A copy of the full report following the August 2016 inspection is available on our website at [www.cqc.org.uk/location/1-507808099](http://www.cqc.org.uk/location/1-507808099).

Good



### Families, children and young people

The practice is rated as good for the care of families, children and young people.

The rating was given following the comprehensive inspection in August 2016. A copy of the full report following the August 2016 inspection is available on our website at [www.cqc.org.uk/location/1-507808099](http://www.cqc.org.uk/location/1-507808099).

Good



### Working age people (including those recently retired and students)

The practice is rated as good for the care of working age people (including those recently retired and students).

The rating was given following the comprehensive inspection in August 2016. A copy of the full report following the August 2016 inspection is available on our website at [www.cqc.org.uk/location/1-507808099](http://www.cqc.org.uk/location/1-507808099).

Good



### People whose circumstances may make them vulnerable

The practice is rated as good for the care of people whose circumstances may make them vulnerable.

The rating was given following the comprehensive inspection in August 2016. A copy of the full report following the August 2016 inspection is available on our website at [www.cqc.org.uk/location/1-507808099](http://www.cqc.org.uk/location/1-507808099).

Good



# Summary of findings

## People experiencing poor mental health (including people with dementia)

The practice is rated as good for the care of people experiencing poor mental health (including people with dementia).

The rating was given following the comprehensive inspection in August 2016. A copy of the full report following the August 2016 inspection is available on our website at [www.cqc.org.uk/location/1-507808099](http://www.cqc.org.uk/location/1-507808099).

Good



# Dr Amar Kaw

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

Our inspection team was made up of a CQC Inspector.

### Background to Dr Amar Kaw

Dr Amar Kaw, also known as Ingrebourne Medical Centre, is located in a converted house within a residential area of London. The practice is a part of Havering Clinical Commissioning Group.

There are 2855 patients registered at the practice. Data showed 55% of working aged patients were in paid work or full time education, which is lower than the CCG average of 62% and the national average of 61%.

The practice has one male principal GP completing nine sessions per week, two female practice nurses carrying out 13 sessions per week, a practice manager a business manager and six reception/administration staff members. There are arrangements in place to enable access to a female GP if requested. The practice is a designated teaching practice for third to fifth year medical students.

The practice provides services under a General Medical Services (GMS) Contract with NHS England. This is the commonest form of GP contract.

The practice's opening times are:

- Monday 8:30am to 8:00pm.
- Tuesday to Friday 8:30am to 6:30pm.

Phone lines are open from 8:00am.

Appointment times are as follows:

- Monday 8:30am to 1:00pm and 2:00pm to 8:00pm.

- Tuesday 8:30am to 12:00pm and 2:00pm to 6:00pm.
- Wednesday 8:30am to 1:00pm (door closed but phones still answered).
- Thursday 8:40am to 12:00pm and 1:30pm to 6:30pm.
- Friday 8:40am to 1:00pm and 4:00pm to 6:00pm.

The locally agreed out of hours provider covers calls made to the practice whilst it is closed.

Dr Amar Kaw operates regulated activities from one location 135 Straight Road, Harold Hill, Romford, RM3 7JJ and is registered with the Care Quality Commission to provide surgical procedures, diagnostic and screening procedures, treatment of disease disorder or injury and maternity and midwifery services.

### Why we carried out this inspection

We undertook a comprehensive inspection of Dr Amar Kaw on 30 August 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall, and within that overall rating it was rated requires improvement for providing safe services. This was because the practice was not meeting some legal requirements. The full comprehensive report following the inspection in August 2016 can be found at [www.cqc.org.uk/location/1-507808099](http://www.cqc.org.uk/location/1-507808099).

We undertook a follow up focused inspection of Dr Amar Kaw on 24 October 2017. This inspection was carried out to review the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

# Detailed findings

## How we carried out this inspection

During our visit on 24 October 2017 we reviewed information provided by the practice and spoke with a GP, practice nurse, practice manager and receptionist / administrative staff.



# Are services safe?

## Our findings

At our previous inspection on 30 August 2016 we rated the practice as requires improvement for providing safe services. This was because there were shortfalls in some of the practice's arrangements in respect of health and safety risks and Disclosure and Barring Service (DBS) checks for staff. DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable.

These arrangements had improved when we undertook a follow up inspection on 24 October 2017. The practice is now rated as good for providing safe services.

### Overview of safety systems and processes

The practice had clearly defined and embedded systems, processes and practices in place to minimise risks to patient safety.

- All staff who acted as chaperones had received a Disclosure and Barring Service (DBS) check. DBS checks

identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable.

The practice maintained appropriate standards of cleanliness and hygiene.

- Clinical waste was being separated from domestic waste and stored appropriately using orange bags in line with national guidance.
- The practice had completed a legionella risk assessment and was carrying out regular water safety monitoring. Monitoring included sending water samples for laboratory analysis and checking the temperatures at which water was distributed throughout the practice.

### Monitoring risks to patients

There were procedures for assessing, monitoring and managing risks to patient and staff safety.

- Staff had completed fire training. The practice had put a system in place to ensure training was updated on a regular basis.
- An exposed light socket in the patient toilet had been replaced.