

# Dr Abdul Raouf Ismail Al Sayed

## 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.

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out a desk based review for Dr Abdul Raouf Ismail Al Sayed on 20 July 2016. This was to follow up on actions we asked the provider to take after our announced comprehensive inspection on 31 March 2015. During the inspection in March 2015, we identified that

the provider must improve recruitment procedures so that a consistent approach was taken to the completion of recruitment checks and the completion of induction programmes for new staff.

# Summary of findings

The provider wrote to tell us about the action they planned to take in order to comply with Regulation 19 Fit and proper persons employed. We reviewed the evidence of the improvements that had been completed.

Our key findings were as follows:

- there was a robust recruitment process in place for the safe recruitment of new staff.

**Professor Steve Field (CBE FRCP FFPH FRCGP)**  
Chief Inspector of General Practice

# Dr Abdul Raouf Ismail Al Sayed

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

This desk based review was completed by a CQC lead inspector.

## Background to Dr Abdul Raouf Ismail Al Sayed

Brimpton House Surgery is situated in Kelvedon, Essex. The practice is one of 48 GP practices in the Mid Essex Clinical Commissioning (CCG) area. The practice has a general medical services (GMS) contract with the NHS. There are approximately 3000 patients registered there.

The practice has one GP working at the practice with the occasional use of a locum GP. There is one practice nurse supported by two healthcare assistants, one of whom is also a receptionist. The clinical staff are supported by a practice manager and a deputy practice manager and a number of receptionists and administration staff.

The practice is open for appointments 8.30am to 5.30pm on weekdays and one late evening takes place each Wednesday until 8pm. The practice is closed at weekends.

The practice has opted out of providing 'out of hours' services to their own patients. If emergency medical help is

required patients call the main practice telephone number and they are directed to an out of hour's service. Otherwise non-urgent medical advice is available using the 111 system.

## Why we carried out this inspection

This was a desk based inspection to follow up on actions taken by the provider since our last CQC inspection visit in March 2015. We carried out a desk based inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

## How we carried out this inspection

We reviewed the action plan supplied by the practice following the inspection in March 2015. Additional evidence of the improvements made were sent by the practice for us to review.

# Are services safe?

## Our findings

When we inspected Brimpton House on 31 March 2015 we found that the recruitment process was not being consistently applied. Staff recruitment records showed there was a lack of consistency in relation to obtaining references, verifying identity, completing a formal induction process and undertaking Disclosure and Barring Service checks. We were concerned that an ineffective recruitment process may not protect patients against the risks of inappropriate care and treatment.

The practice responded by completing a review of its policies to support the recruitment process. This included a

reference request protocol, a process for checking the qualifications of registered health professionals and a detailed policy to guide staff on which staff roles required a disclosure and barring service check. This included a risk assessment form to be completed as part of the recruitment process.

In addition, the practice reviewed the induction process for all new staff ensuring that staff received key information in relation to issues such as health and safety and the management of confidential information.

These changes had ensured that safe recruitment procedures were in place.