

The Medical Centre - Dr Kukar

Inspection report

The Medical Centre
13 Ollgar Close, Uxbridge Road
London
W12 0NF
Tel: 02087407407

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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 location		Good	
Are services safe?		Good	
Are services effective?		Good	
Are services caring?		Good	
Are services responsive to people's needs?		Good	
Are services well-led?		Requires Improvement	

Overall summary

We carried out an unannounced inspection at The Medical Centre – Dr Kukar on 25 May 2022. Overall, the practice is rated as Good.

Safe - Good

Effective - Good

Caring - Good

Responsive - Good

Well-led – Requires improvement

Following our previous inspection on 27 April 2021, the practice was rated requires improvement overall. At that time, it was rated as good for providing safe and caring services and requires improvement for providing effective, responsive and well-led services.

The full reports for previous inspections can be found by selecting the 'all reports' link for The Medical Centre – Dr Kukar on our website at www.cqc.org.uk

Why we carried out this inspection

This inspection was carried out to follow up on a breach of regulation 17 of HSCA (RA) Regulations 2014 (Good governance). At the previous inspection we found that uptake rates of cervical cancer screening and childhood immunisations were below target and that the practice had not responded to negative patient feedback about access to the service. We also followed up on information of concern received by CQC about the practice, specifically in relation to the clinical staffing rota and completion of required training. We carried out an unannounced, comprehensive inspection and covered the five key questions in their entirety.

How we carried out the inspection

This inspection was carried out on site. The site visit included:

- Manager and staff interviews
- Telephone interviews with staff who were unavailable during the site visit
- Telephone interview with patient representatives
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Review of documentary evidence
- Observation of the practice premises and equipment

Our findings

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected

Overall summary

- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We have rated this practice as Good overall

We found that:

- The specific concerns reported to CQC about this practice were not supported by the evidence we reviewed during the inspection.
- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- Patients could access care and treatment in a timely way.
- While we saw evidence that the practice had sustained and embedded the improvements noted at the previous inspection, progress in improving published cancer screening uptake rates was variable and limited.
- The practice stored key organisational records on a single laptop which was inaccessible on the day of the inspection visit and posed an unnecessary risk to information governance.

We found a breach of regulations. The provider **must**:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

In addition, the provider **should**:

- Review its DNACPR process to ensure this is being initiated, with the involvement of patients and their families, as appropriate.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC inspector. The team included a GP specialist advisor and a second CQC inspector. All team members attended the site visit.

Background to The Medical Centre - Dr Kukar

The Medical Centre – Dr Kukar is situated at The Medical Centre, 13 Ollgar Close, Uxbridge Road, London, W12 0NF. The practice has three consulting rooms, a reception and waiting area (located on the ground floor of the practice) and an administrative space on the first floor.

The practice provides NHS primary care services to approximately 6,300 people living in the Shepherds Bush area of Hammersmith and Fulham through a General Medical Services (GMS) contract (a contract between NHS England and general practices for delivering general medical services). The practice is part of the NHS Hammersmith and Fulham Clinical Commissioning Group (CCG) and the North H&F PCN (primary care network) of local GP practices.

The practice population is in the fourth (out of ten) most deprived decile in England. The population is ethnically diverse and relatively young (with a larger than average 30-55 year old cohort of males). The prevalence of long-term conditions is lower than average except for mental illness. The rate of A&E attendances is also below average.

The practice staff comprises one full-time GP and two part-time salaried GPs (one male and one female), a full-time practice nurse/midwife and a part-time healthcare assistant. The team are supported by a clinical GP lead (who does not undertake any patient consultations sessions at the practice), a managing partner and reception and administrative staff. The practice is open between 8am and 7pm Monday to Friday and open for pre-booked practice nurse appointments on alternate Sundays.

The practice is registered with the Care Quality Commission (CQC) as a partnership to provide the regulated activities of diagnostic and screening procedures; treatment of disease, disorder or injury; and maternity and midwifery services.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Maternity and midwifery services Treatment of disease, disorder or injury Diagnostic and screening procedures	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The provider had failed to establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care. We found:</p> <ul style="list-style-type: none">• The provider had not improved published uptake rates for cancer screening programmes, with breast cancer screening uptake rates remaining low both comparatively and in absolute terms.• The provider had failed to ensure that key management information was appropriately secured and maintained and was accessible when required. <p>This was in breach of Regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>