

# Dr Somendra Lal Ghose

## Quality Report

34-36 Poulter Road,  
Liverpool,  
L9 0HJ  
Tel: 0151 525 5792  
Website: [www.poulterroadmc.nhs.uk](http://www.poulterroadmc.nhs.uk)

Date of inspection visit: 14 July 2016  
Date of publication: 31/08/2016

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

Are services safe?

**Good**



# Summary of findings

## Contents

### Summary of this inspection

Overall summary	2
The five questions we ask and what we found	4

### Detailed findings from this inspection

Our inspection team	5
Background to Dr Somendra Lal Ghose	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	6

## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Somendra Lal Ghose on 14 October 2014 and at this time the practice was rated as good. However, breaches of legal requirements were also found. After the comprehensive inspection the practice wrote to us to say what they would do to meet the following legal requirements set out in the Health and Social Care Act (HSCA) 2008:

- Regulation 21 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014;

During the inspection there were also a number of areas that required improvement and we identified that the provider should:

- Undertake a disabled access audit to ensure the entrance to the practice meets the Equality Act 2010
- Ensure annual PAT tests are completed for all electrical equipment in use.

- Have available the use of equipment such as pulse oximeters, defibrillators and oxygen for emergency treatments in line with current external guidance and national standards.

On the 14 July 2016 we carried out a focused desk top review of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The review was carried out to check whether the provider had completed the improvements identified during the comprehensive inspection carried out in October 2014. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Dr Somendra Lal Ghose on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

The findings of this review were as follows:

- The practice had addressed all of the issues identified during the previous inspection.
- The provider has completed a Disclosure and Barring Service (DBS) check for all staff.
- The provider undertook a disabled access audit to ensure the entrance to the practice met the Equality Act 2010
- Electrical equipment has been PAT tested.

# Summary of findings

- The practice has equipment such as pulse oximeters, defibrillators and oxygen for emergency treatments in line with current external guidance and national standards.

**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 was rated as good for ensuring safe services. The practice had addressed all of the issues identified during the previous inspection. Improved systems had been put into place to ensure that staff were not allowed to undertake a chaperoning role without the necessary checks having been received. The provider undertook a disabled access audit to ensure the entrance to the practice met the Equality Act 2010. Electrical equipment has been PAT tested. The practice had equipment such as pulse oximeters, defibrillators and oxygen for emergency treatments in line with current external guidance and national standards.

**Good**



# Dr Somendra Lal Ghose

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

This desk top review was undertaken by a CQC Inspector.

## Background to Dr Somendra Lal Ghose

Dr Somendra Lal Ghose is registered with the CQC to provide primary care services, which includes access to GPs, minor surgery, family planning, ante and post natal care. The practice provides GP services for 1462 patients living in the Aintree area of Liverpool. The practice has one long standing General Practitioner (GP) partner, one practice nurse, one healthcare assistant, a practice manager and deputy practice manager and a number of receptionist/administration staff. The practice is part of NHS Liverpool CCG .

GP consultation times are Monday to Friday 9.30am to 11.30am and 4.30pm to 6pm. The surgery is closed on the last Thursday afternoon of each month (excluding August and December) for training. Patients can book appointments in person, via the telephone and online. Appointments can be booked for up to a week in advance for the doctors and a month in advance for the nursing

clinics. The practice treats patients of all ages and provides a range of medical services. When the practice is closed patients can access the out of hour's provider for Liverpool, Urgent Care 24 (UC24).

## Why we carried out this inspection

We carried out a desk top review 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 had completed the improvements identified during the comprehensive inspection carried out in October 2014. The checks made were to ensure the provider was now 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

This inspection was carried out as a focused desk based review. The practice was contacted and a request was made to submit evidence to show that the practice had completed the improvements identified during their comprehensive inspection carried out in October 2014. A range of information was submitted by the practice and reviewed by the CQC Inspector.

# Are services safe?

## Our findings

### Overview of safety systems and processes

The practice had clearly defined and embedded systems, processes and practices in place to keep people safe and safeguarded from abuse, identified during the inspection undertaken in October 2014. However the following areas required improvement and action has since been taken by the provider.

### Staffing & Recruitment

At the inspection undertaken in October 2014 we identified that staff who had chaperoning responsibilities had not had a recent Disclosure and Barring Service (DBS) check before commencement of this role. For this review the practice submitted evidence to show that all staff had a completed DBS in December 2014.

### Arrangements to deal with emergencies and major incidents

At the time of our inspection in October 2014 the practice did not have the necessary equipment to appropriately respond to a medical emergency. This included equipment

such as pulse oximeters, defibrillators and oxygen for emergency treatments in line with current external guidance and national standards. The practice has submitted as part of the evidence requested for this review, information to show that emergency equipment such as oxygen and pulse oximeters have now been purchased.

### Equipment

At our inspection carried out in October 2014 we found that while most equipment had been appropriately calibrated and maintained, electrical PAT testing had not been completed. As part of this review evidence was submitted to show the practice had completed the testing after our inspection and systems had been put into place to ensure this was now being routinely monitored.

### Disability Access Audit

At the time of our inspection in October 2014 the practice had not undertaken a disabled access audit to ensure the entrance to the practice meets the Equality Act 2010. Evidence was provided for this review to show that a detailed practice disabled access audit was undertaken in 23 June 2015.