

Dr Paramjit Wasu

Inspection report

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Date of inspection visit: 07 July 2020

Date of publication: 13/08/2020

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.

Overall summary

We carried out an announced focused inspection of Dr Paramjit Wasu on 7 July 2020 to check whether the practice had addressed the issues we identified at our previous inspection on 10 February 2020. This report covers our findings in relation to those specific areas and does not change the current ratings held by the practice.

The full report of the 10 February 2020 inspection and all previous inspections can be found by selecting the 'all reports' link for Dr Paramjit Wasu on our website at www.cqc.org.uk.

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

- What we found when we inspected;
- Information from our ongoing monitoring of data about services; and
- Information from the provider, patients, the public and other organisations.

At this inspection on 7 July 2020 we found the provider had made improvements since our last inspection, although there were still weaknesses in the overall governance and some systems and processes were not yet fully embedded.

Our key findings were as follows:

- Safeguarding policies had been updated and were accessible to staff and the practice's child protection and vulnerable adults registers had been reviewed.
- Appropriate recruitment checks had been completed and the practice had copies of necessary employment documents.
- Appropriate standards of cleanliness and hygiene were met.
- Since the previous inspection the practice had cancelled their registration as a Yellow Fever Centre.

- The Royal College of General Practitioners ('RCGP') had been supporting the lead GP to maintain clear patient records and our review of records demonstrated improvement in this area.
- The practice had effective systems to monitor urgent two-week wait referrals and cervical screening results.
- Patient Group Directions ('PGDs') were appropriately signed and in date.
- Emergency medicines and equipment were appropriately stored and were checked on a regular basis.
- There was a system for recording and acting on safety alerts.
- We found there were still some gaps in relation to staff training and supervision.
- The practice, with external support, had introduced new processes for managing risks, issues and performance.
- The overall governance arrangements had improved since the last inspection, although systems and processes were not fully embedded.
- Many of the changes to the practice's systems and processes had been made recently and with significant input and direction from the RCGP, so there was limited evidence at the time of our inspection that this improvement would be sustained over a significant period of time and that the improvement was being driven by practice leaders.

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

Dr Rosie Benneyworth *BM BS BMedSci MRCGP*

Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

Our inspection team was led by a CQC Inspection Manager, who was accompanied by a GP specialist adviser, a practice nurse specialist adviser, and a second CQC Inspector.

Background to Dr Paramjit Wasu

Dr Paramjit Wasu (also known as First Choice Medical Care) is situated within NHS Harrow Clinical Commissioning Group (CCG). The practice provides services to approximately 2500 patients under a Primary Medical Services (PMS) contract (a locally agreed alternative to the standard General Medical Services contract used when services are agreed locally with a practice which may include additional services beyond the standard contract).

The practice operates from a single surgery in a residential area of Harrow in North West London. The practice is located in an adapted residential property and is accessible to people with mobility needs on the ground floor. Consultations and treatments are provided on the ground and first floors. The first floor is accessible by stairs. There are good transport links with underground and overground stations nearby.

The practice is registered with the CQC to carry on the following regulated activities: Diagnostic and screening procedures; Family planning; Surgical procedures; and Treatment of disease, disorder or injury.

The clinical team at the practice consists of a male lead GP partner, one male and one female locum GP, one female practice nurse and one female healthcare assistant. The practice manager is supported by a deputy practice manager, and there is a team of reception and administrative staff members.

The practice is open on Monday and Friday from 8am to 7.30pm and on Tuesday, Wednesday and Thursday from 8am to 6.30pm, with appointments available from 9am. In addition to pre-bookable appointments, urgent appointments are also available for people who need them.