

# Dr Iftekhar Majeed

## Inspection 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 location

Inadequate 

Are services safe?

Inadequate 

Are services effective?

Inadequate 

Are services caring?

Inadequate 

Are services responsive?

Inadequate 

Are services well-led?

Inadequate 

# Overall summary

We carried out an unannounced comprehensive inspection at Dr Iftekhar Majeed on 17 and 18 April 2019. This inspection was in response to concerns raised about the lack of clinical cover and care for patients at the practice. We also followed up on a previous comprehensive inspection at the practice in June 2018 where breaches of the Health and Social Care Act 2008 were identified. You can read the report from our last comprehensive inspection on 12 June 2018; by selecting the 'all reports' link for Dr Iftekhar Majeed on our website at .

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.

## We have rated this practice as inadequate overall.

We rated the practice as **inadequate** for providing safe services because:

- The practice did not have clear systems and processes to keep patients safe. This included effective systems to ensure patients were safe from abuse and harm.
- The practice did not have appropriate systems in place for the safe management of medicines. This included an ineffective system for the management of safety alerts, as actions had not been taken to ensure patients were informed of potential risks with certain medicines.
- The practice had limited systems in place to assess, monitor and manage risks to patient safety. This included ineffective management of infection prevention and control.
- There were inadequate arrangements in place to act on clinical correspondence and test results in the absence of the lead GP.
- Recruitment checks had not been completed prior to the employment of clinical staff to ensure they had the appropriate training and competencies.
- The practice did not learn and make improvements when things went wrong.

We rated the practice as **inadequate** for providing effective services because:

- There was limited monitoring of the outcomes of care and treatment.

- Evidence based guidelines were not always followed, placing patients at risk.
- The practice was unable to show that staff had the skills, knowledge and experience to carry out their roles.
- Clinical registers were not up to date and ineffective. This demonstrated a lack of clinical management of patients' health conditions.
- Immunisation rates were significantly below national averages. The practice were unable to demonstrate how they encouraged patients to attend for appointments.
- Some performance data was significantly below local and national averages.
- The practice did not have a programme of clinical audits to demonstrate quality improvements.
- Exception reporting of patients was being used inappropriately, placing patients at risk of not receiving the appropriate monitoring of their care and treatment.

We rated the practice as **inadequate** for providing caring services because:

- The practice were unable to demonstrate any actions they had taken to improve on patient satisfaction. The management team demonstrated a lack of awareness of actions discussed to address areas where satisfaction was below local and national averages.
- Communication with patients was ineffective with evidence of patient reviews being completed inappropriately by telephone consultations.
- We found patients were not supported to access community services for advice.
- The practice's carer register was significantly low and the practice were unable to demonstrate what support was available for carers.

We rated the practice as **inadequate** for providing responsive services because:

- Patients who were housebound were not reviewed appropriately and removed from clinical registers due to being unable to attend the surgery.
- The provider left the practice without appropriate clinical cover. During these times patients had to access GP services from local hub centres.
- We found several home visit requests made which had not been acted on; but dealt with as a telephone consultation. This included multiple telephone consultations with the same patients, medicine reviews and long term condition reviews.

# Overall summary

We rated the practice as **inadequate** for providing well-led services because:

- Leaders could not show that they had the capacity and skills to deliver high quality, sustainable care.
- The practice culture did not effectively support high quality sustainable care.
- The overall governance arrangements were ineffective.
- The practice did not have clear and effective processes for managing risks, issues and performance.
- The practice did not always act on appropriate and accurate information.
- We saw no evidence of systems and processes for learning, improvement and innovation.

**These areas affected all population groups so we rated all population groups as inadequate.**

I am placing this service in special measures. Services placed in special measures will be inspected again within six months. If insufficient improvements have been made such that there remains a rating of inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service.

Following the inspection the provider made the decision to cancel his registration, with immediate effect, to provide regulated activities with the CQC. At the time of this report patients are being cared for under a caretaking arrangement organised by Sandwell and West Birmingham Clinical Commissioning Group.

The service will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration.

Special measures will give people who use the service the reassurance that the care they get should improve.

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

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

<b>Older people</b>	<b>Inadequate</b> 
<b>People with long-term conditions</b>	<b>Inadequate</b> 
<b>Families, children and young people</b>	<b>Inadequate</b> 
<b>Working age people (including those recently retired and students)</b>	<b>Inadequate</b> 
<b>People whose circumstances may make them vulnerable</b>	<b>Inadequate</b> 
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Inadequate</b> 

## Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor and a second CQC inspector.

## Background to Dr Iftekhar Majeed

Dr Iftekhar Majeed's surgery is located at Bloomsbury Health Centre in Nechells, Birmingham. The practice is located in modern, purpose-built premises, which is shared with another GP practice and community teams.

The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures, treatment of disease, disorder or injury, surgical procedures, family planning, maternity and midwifery services.

The practice provides NHS services through a General Medical Services (GMS) contract to 2,900 patients. The practice is part of the Sandwell and West Birmingham City Clinical Commissioning Group (CCG). The practice's clinical team is led by the provider (principal GP), supported by an advanced nurse prescriber and a practice nurse. The non-clinical team consists of administrative and reception staff and a part time practice manager.

Based on data available from Public Health England, the levels of deprivation in the area served by the practice are

below the national average, ranked at one out of ten, with ten being the least deprived. The practice had a lower than national average of patients aged over 65 years. Data showed 68% of the practice population are of black and minority ethnic background.

The practice is open between 8am and 6.30pm Mondays to Fridays. Appointments with the GP are from 9.30am to 12pm and 4pm to 6pm on Mondays, Tuesdays, Thursdays and Fridays and from 9.30am to 12pm on Wednesdays. Appointments are available through local hub centres

each evening until 8pm and on Saturday and Sunday from 9am to 12pm. Telephone consultations and home visits are available if patients who are unable to attend the surgery request them. When the practice is closed, primary medical services are provided by Birmingham and District General Practitioner Emergency Room group (Badger), an out of hours service provider and the NHS 111 service and information about this is available on the practice website.