

# Dr Sarita Bhatia

## Quality Report

13 Pump Lane Rainham Mark  
Gillingham Kent ME8 7AA  
Tel: 01634 231856  
Website: None

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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 service

Good



Are services safe?

Good



# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Sarita Bhatia on 10 September 2015. Breaches of the legal requirements were found. Following the comprehensive inspection, the practice wrote to us to tell us what they would do to meet the legal requirements in relation to the breaches.

We undertook this focussed inspection on 22 June 2016, to check that the practice had followed their plan and to confirm that they now met the legal requirements. 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 Sarita Bhatia on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

However, the provider should:

- Revise emergency medicines provision to ensure that medical oxygen is a licensed medical product carrying an expiry date.

### 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?

At our previous comprehensive inspection on 10 September 2015 the practice had been rated as requires improvement for providing safe services.

- The practice had been unable to demonstrate they had an effective system for the routine management, testing and investigation of legionella (a germ found in the environment which can contaminate water systems in buildings).
- The practice had been unable to demonstrate that vaccines were being stored in accordance with Department of Health guidance. They were not monitoring and recording the highest and lowest temperatures of the refrigerators where vaccines were stored to help ensure they were kept within the safe temperature range.
- The practice had been unable to demonstrate they carried out all appropriate recruitment checks prior to the employment of staff. For example, references, proof of identification and checks through the Disclosure and Barring Service (DBS).
- The practice had been unable to demonstrate they were able to respond to a medical emergency in line with national guidance before the arrival of an ambulance. They did not have access to medical oxygen or an automated external defibrillator (AED). An AED is a device used to attempt to restart a person's heart in an emergency.
- The practice had been unable to demonstrate they had carried out a fire risk assessment to identify any risks and required actions to help maintain fire safety.

At our focussed follow-up inspection on 22 June 2016, the practice provided records and information to demonstrate that the requirements had been met.

- The practice had revised infection control systems and was able to demonstrate they now had a system for the routine management, testing and investigation of legionella (a germ found in the environment which can contaminate water systems in buildings).
- The practice was able to demonstrate they had revised their medicines management systems and were now storing vaccines in accordance with Department of Health guidance.

Good



# Summary of findings

- Records showed that the practice had obtained proof of identification and DBS checks for relevant staff. They had revised their recruitment policy to help ensure references were obtained prior to the employment of staff.
- The practice had updated emergency equipment and emergency medicines and were now able to respond to a medical emergency in line with national guidance. However, the medical oxygen did not carry an expiry date.
- The practice had carried out a fire risk assessment and implemented required actions to help maintain fire safety.

# Dr Sarita Bhatia

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

Our inspection team was led by a CQC Lead Inspector.

## Background to Dr Sarita Bhatia

Dr Sarita Bhatia is situated in Rainham Mark, Gillingham, Kent and has a registered patient population of approximately 2,050.

The practice staff consists of one GP (female), one practice manager, one practice nurse (female) as well as administration and reception staff. There is a reception and a waiting area on the ground floor. All patient areas are accessible to patients with mobility issues as well as parents with children and babies.

The practice is not a teaching or training practice (teaching practices take medical students and training practices have GP trainees and Foundation Year Two junior doctors).

The practice has a general medical services (GMS) contract with NHS England for delivering primary care services to local communities.

Primary medical services are provided Monday, Tuesday, Wednesday and Friday between the hours of 8.30am to 1pm and 3.30pm to 6.30pm. Patients are able to contact the practice by telephone from 8am and throughout the day. Extended hours surgeries are offered Monday 6.30pm to 7.45pm. Primary medical services are available to

patients registered at Dr Sarita Bhatia via an appointments system. There are a range of clinics for all age groups as well as the availability of specialist nursing treatment and support. There are arrangements with other providers (Medway On Call Care) to deliver services to patients outside of Dr Sarita Bhatia's working hours.

Services are provided from 13 Pump Lane, Rainham Mark, Gillingham, Kent, ME8 7AA only.

## Why we carried out this inspection

We undertook an announced focused inspection of Dr Sarita Bhatia on 22 June 2016. This inspection was carried out to check that improvements had been made to meet the legal requirements planned by the practice, following our comprehensive inspection on 10 September 2015.

We inspected this practice against one of the five questions we ask about services; is the service safe. This is because the service was not meeting some of the legal requirements in relation to this question.

## How we carried out this inspection

Before visiting, we reviewed information sent to us by the practice that told us how the breaches identified during the comprehensive inspection had been addressed. During our visit we spoke with the practice manager and reviewed information, documents and records kept at the practice.

# Are services safe?

## Our findings

### Cleanliness and infection control

The practice had revised infection control systems and was able to demonstrate they now had a system for the routine management, testing and investigation of legionella (a germ found in the environment which can contaminate water systems in buildings). There was a legionella risk assessment dated 6 January 2016 which included an action plan that detailed measures required to help reduce the risk of infection to staff and patients from legionella.

### Medicines management

The practice had revised their medicines management systems and records showed they were now storing vaccines in accordance with Department of Health guidance. This included monitoring and recording the highest and lowest temperatures of the refrigerators where vaccines were stored to help ensure they were kept within the safe temperature range.

### Staffing and recruitment

Records showed that the practice had obtained proof of identification as well as Disclosure and Barring Service (DBS) clearance (a criminal records check) for relevant staff such as the practice nurse and receptionists who acted as chaperones.

The practice had revised their system of recruitment and updated relevant policies to help ensure all relevant checks were undertaken prior to employment of staff. For example, references.

### Arrangements to deal with emergencies and major incidents

The practice had revised emergency equipment and emergency medicines. Medical oxygen was now available for staff to use in the practice. However, this did not carry an expiry date and the practice was unable to demonstrate it was a licensed medical product. A risk assessment had been carried out and records showed the practice was in the process of purchasing an AED. The practice was therefore able to demonstrate they could respond to a medical emergency in line with national guidelines, before the arrival of an ambulance.

The practice had carried out a fire risk assessment and implemented required actions to help maintain fire safety.