

Al-Shifa Medical Centre

Quality 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 service		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?		Good	

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

This is a focused desk top review of evidence supplied by Al-Shifa Medical Centre, for two areas within the key question safe.

We found the practice to be good in providing safe services.

Overall, the practice is rated as good.

The practice was inspected on 1 December 2015. The inspection was a comprehensive inspection under the Health and Social Care Act 2008 (HSCA). At that inspection, the practice was rated 'good' overall. However, within the key question safe, two areas were identified as requires improvement, as the practice was not meeting the legislation at that time; Regulation 12 Safe care and treatment and Regulation 19 Fit and proper persons employed HSCA (RA) Regulations 2014

At the inspection in December 2015 we found that; a control of substances hazardous to health (COSHH) risk assessment was in place for Hystofreezer which is used in

the practice but other cleaning products did not have a risk assessment in place. (Hystofreezer is a product for treating warts and benign skin lesions using the local application of intense cold to destroy unwanted tissue).

At the inspection in December 2015 we did not see evidence that the practice had carried out safe recruitment checks for all staff. This included; a review of employment history, professional references, professional registration and DBS checks. Reception staff confirmed that on occasion they undertook the role of chaperone but had not received specific training for this role.

The practice supplied an action plan and a range of documents which demonstrated they are now meeting the requirements of Regulation 12 Safe care and treatment and Regulation 19 Fit and proper persons employed of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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 is rated as good for providing safe services.

In line with agreed timescales the practice supplied a range of documentary evidence to demonstrate how they had improved their practices in relation to safe care and treatment and fit and proper persons employed since the inspection carried out in December 2015.

The practice provided copies of the cleaning schedule and risk assessment in relation to controls of substances hazardous to health (COSHH).

Evidence supplied included copies of controls of substances hazardous to health (COSHH) data sheets for the cleaning materials used in the practice.

The practice supplied other documents such as training records and Disclosure and Barring Service (DBS) checks that were not in the recruitment files when we inspected the service in December 2015.

Good



Are services effective?

The practice is rated as good for providing effective services.

This rating was given following the comprehensive inspection 1 December 2015. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

Good



Are services caring?

The practice is rated as good for providing caring services.

This rating was given following the comprehensive inspection 1 December 2015. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

Good



Are services responsive to people's needs?

The practice is rated as good for providing responsive services.

This rating was given following the comprehensive inspection 1 December 2015. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

Good



Are services well-led?

The practice is rated as good for providing well-led services.

Good



Summary of findings

This rating was given following the comprehensive inspection 1 December 2015. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

Summary of findings

The six population groups and what we found

We always inspect the quality of care for these six population groups.

Older people

The practice is rated as good for the care of older people

This rating was given following the comprehensive inspection on 1 December 2015. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

Good



People with long term conditions

The practice is rated as good for the care of people with long term conditions.

This rating was given following the comprehensive inspection on 1 December 2015. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

Good



Families, children and young people

The practice is rated as good for the care of families, children and young people.

This rating was given following the comprehensive inspection on 1 December 2015. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

Good



Working age people (including those recently retired and students)

The practice is rated as good for the care of working age people (including those recently retired and students).

This rating was given following the comprehensive inspection on 1 December 2015. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

Good



People whose circumstances may make them vulnerable

The practice is rated as good for the care of people whose circumstances may make them vulnerable.

This rating was given following the comprehensive inspection on 1 December 2015. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

Good



Summary of findings

People experiencing poor mental health (including people with dementia)

The practice is rated as good for the care of people experiencing poor mental health (including people with dementia).

This rating was given following the comprehensive inspection on 1 December 2015. A copy of the full report following this inspection is available on our website <http://www.cqc.org.uk/search/services/doctors-gps>

Good



Summary of findings

What people who use the service say

As part of this focused desk top review we did not speak to any people who use the service.

Al-Shifa Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

A CQC inspector reviewed and analysed the documentary evidence submitted.

Background to Al-Shifa Medical Centre

The Al-Shifa Medical Centre is part of the NHS South Manchester Clinical Commissioning Group (CCG). Services are provided under a general medical service (GMS) contract with NHS England. The practice has approximately 2850 (data provided by the practice) patients on their register.

Information published by Public Health England rates the level of deprivation within the practice population group as three on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male and female life expectancy in the practice geographical area is below the England average for males at 76 years and 80 years for females (England average 79 and 83 respectively).

National data showed that the percentage of patients within the different age ranges were similar or lower than the Clinical Commissioning Group (CCG) and England averages. Data from 2014/15 showed that 15.7% of the patient population was unemployed compared to the CCG average of 7.3% and the England average of 4.9%. The GP partners told us that they accepted patients from a wide geographical area and usually kept patients on their register even when they moved out of area.

The practice is a family run business. The GP partners are father and daughter and the practice manager is the wife of the senior partner. The practice employs one long term locum GP (male) and one practice nurse, both work half a day per week. There are also three reception staff.

The practice is a teaching practice and supports undergraduate medical students. Manchester University has recently awarded the practice a bronze award for their "Quality Teaching" of undergraduate medical students.

The practice opens Monday, Tuesday, Thursday and Friday from 8.30am to 6pm. The practice offers extended opening hours on Mondays until 8pm and on Wednesdays is open from 8.30 am to 12.30pm. Emergency calls from 6.00pm are managed by the Out of Hours service provided by Go To Doc.

The practice provides online patient access that allows patients to book appointments. The practice is an older property that has been adapted to allow access to people with disabilities.

Why we carried out this inspection

We inspected this service as part of our new comprehensive inspection programme on 1 December 2015. This inspection was a planned focused desk top review to check whether the provider had taken the required action and was now meeting the legal requirements and regulations associated with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, now amended by the current legal requirements and regulations associated with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Detailed findings

How we carried out this inspection

At the inspection in December 2015, we found that safe care and treatment and fit and proper persons employed required improvement. Following the inspection the practice supplied an action plan with timescales telling us

how they would ensure they met regulation ensure they met Regulation 12 and Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

In line with their agreed timescale the practice supplied a range of documentary evidence to demonstrate how they had improved their practices in relation to safe care and treatment and fit and proper persons employed.

We reviewed this information and made an assessment of this against the regulations.

Are services safe?

Our findings

The practice is rated as good for providing safe services.

In line with agreed timescales the practice supplied a range of documentary evidence to demonstrate how they had improved their practices in relation to safe care and treatment and fit and proper persons employed since the inspection carried out in December 2015.

Evidence supplied included copies of controls of substances hazardous to health (COSHH) data sheets for the cleaning products used in the practice and the materials in the bodily fluids spillage kit. The practice provided copies of the cleaning schedule and COSHH risk assessment. The risk assessment covered all cleaning products used in the practice. We received a copy of the COSHH audit which was undertaken 13 June 2016.

In addition the practice had purchased new colour coded cleaning equipment. This was in line with the recommendations laid down by the national patient safety agency (NPSA) good practice guidance for infection

prevention and control. The practice was conducting monthly audits of the cleaning materials and spot checks to ensure the appropriate equipment was being used in line with the colour coding guidelines.

At the inspection in December 2015 the recruitment files for the locum GP and practice nurse were not available so there was no evidence to demonstrate that a thorough recruitment procedure had been carried out. At the inspection in December 2015 some recruitment files did not have a Disclosure and Barring Service checks (DBS) or evidence of staff qualifications. The practice supplied evidence of DBS checks and evidence of professional training for the locum GP and practice nurse that were not available at the inspection in December 2015.

The recruitment process has been revised to ensure there is a system in place to check the required documents have been obtained prior to employment. The practice had not appointed any new staff since the inspection in December 2015. The practice manager will oversee implementation of the updated recruitment process as and when new staff are recruited.

Are services effective?

(for example, treatment is effective)

Our findings

Please note this is a focused desk top review of safe care and treatment and fit and proper persons employed within the key question safe. We did not review this key question.

Please refer to the comprehensive inspection report for this service that is available on our website at the following web site <http://www.cqc.org.uk/search/services/doctors-gps>

Are services caring?

Our findings

Please note this is a focused desk top review of safe care and treatment and fit and proper persons employed within the key question safe. We did not review this key question.

Please refer to the comprehensive inspection report for this service that is available on our website at the following web site <http://www.cqc.org.uk/search/services/doctors-gps>

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

Please note this is a focused desk top review of safe care and treatment and fit and proper persons employed within the key question safe. We did not review this key question.

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Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

Please note this is a focused desk top review of safe care and treatment and fit and proper persons employed within the key question safe. We did not review this key question.

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