

Dr Philip Abiola

Quality Report

Lord Lister Health Centre 121 Woodgrange Road, London, **E7 0EP**

Tel: 0208 250 7550 Website: No website Date of inspection visit: 14 September 2017 Date of publication: 13/10/2017

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	

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of this practice on 25 July 2016. The overall rating for the practice was good. However, a breach of legal requirements was found during that inspection within the safe key question. After the comprehensive inspection, the practice sent us evidence and actions detailing what they would do to meet the legal requirements. We conducted an on-site focused inspection on 14 September 2017 to check that the provider had followed their plans and to confirm that they now met legal requirements, and also in response to information the CQC received regarding processes at the practice for safeguarding children. This report only covers our findings in relation to those requirements and safeguarding children.

During our previous inspection on 25 July 2016 we found the following area where the practice must improve:

 Assess and mitigate the risk of unsafe care and treatment by ensuring Patient Specific Directions (PSDs) are put in place for the administration of medicines by the healthcare assistant. Our previous report also highlighted the following areas where the practice should improve:

- Ensure personnel files include copies of all relevant documentation including proof of identification and qualifications.
- Improve processes to ensure learning from meetings was identified and shared.
- Continue to monitor and review patient's views about their involvement in planning and making decisions about their care and treatment and on consultations with GPs and nurses and take appropriate steps to address these concerns.
- Improve practice performance and patient outcomes, particularly relating to levels of exception reporting.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link on our website at www.cqc.org.uk

During the inspection on 14 September 2017 we found:

 Appropriate PSDs were in place to allow the administration of specific injectable medicines by the healthcare assistant.

- · Relevant documentation such as staff proof of identification and qualifications was maintained on staff files but post recruitment processes such as staff induction and contracts had not always been appropriately formalised.
- Arrangements were in place to ensure learning from meetings was identified and shared.
- The latest GP Patient survey results published on 6 July 2017 showed improvement since our previous inspection regarding patient's views about their involvement in planning and making decisions about their care and treatment during consultations with GPs and nurses. 73% of patients said GPs were good at involving them in decisions about their care compared to the local average of 74% and the national average
- of 82%, and 86% said the last nurse they saw or spoke to was good at involving them in decisions about their care compared to the local average of 77% and the national average of 85%.
- Exception reporting had fallen from 12% at our previous inspection. The most recent exception data obtained locally from the practice for the period April 2016 to March 2017 showed exception reporting was 7%.
- Arrangements to safeguard children were effective.

The areas where the provider should make improvement are:

• Review and formalise post recruitment processes for staff.

Professor Steve Field (CBE FRCP FFPH FRCGP) Chief Inspector of General Practice

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.

• Health Care Assistants were trained to administer vaccines and medicines against a patient specific prescription or direction (PSD) from a prescriber.

• The practice had clearly defined and embedded systems and processes to safeguard children from abuse.

Good



The six population groups and what we found

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

Areas for improvement

Action the service SHOULD take to improve

• Review and formalise post recruitment processes for staff.



Dr Philip Abiola

Detailed findings

Our inspection team

Our inspection team was led by:

Our inspection team was led by a lead CQC inspector and included a GP specialist adviser.

Background to Dr Philip Abiola

Dr Philip Abiola is situated in Lord Lister Health Centre 121 Woodgrange Road, Forest Gate, Newham, E7 0EP. It is one of three separate GP practices situated in the health centre. The practice Provides NHS primary care services through a Personal Medical Services contract to approximately 3900 patients living in the London Borough of Newham. Forest Gate is a town in the north west of Newham. The practice is located on a main road which is well served by public transport. Parking facilities in the area are limited; however a few spaces are available to the front of the building.

The practice is staffed by a male lead GP working six sessions and two female salaried GPs collectively working six sessions per week. The long term permanent practice nurse left the service on a planned basis during August 2017 and the practice promptly recruited two part time female practice nurses due to commence duty September 2017 to collectively provide four weekday sessions per week. At the time of authoring this report one of the practice nurses has commenced duty and the other is planned to start imminently pending completion of the recruitment checks process. There is also a female health care assistant, a practice manager working full time 37 hours per week, and team of reception and administrative staff working a variety of regular hours.

The practice is open every weekday between 8.30am and 6.30pm Monday to Friday except Thursday when it closes at 1pm. GP appointments are available:

- Monday and Wednesday 9.30am to 12.30pm and 4.30pm to 6.30pm
- Tuesday 9.30am to 12.30pm and 2.30pm to 5.30pm
- Thursday 9.30am to 11am
- Friday 9.30am to 12.30pm and 3pm to 5pm

Extended hours provided by Newham GP Co-operative are from 6.30pm to 9pm on Tuesday and Thursday and from 9am to 1pm on Saturday. Patients telephoning when the practice is closed are transferred to the local out-of-hours service provider.

An Additional Capacity service is provided by Newham GP Coop which operates seven days a week. Appointments can be booked from 9am to 6pm on a designated number. Appointments are available from 6.30pm to 9.30pm Monday to Friday, 9am to 6pm on Saturday and 9am to 1pm on Sunday. This service is not held at the practice but at one of the six designated hubs in Newham.

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. The practice has a higher percentage than national average of people whose working status is unemployed (12% compared to 4% nationally), and a lower percentage of people over 65 years of age (7% compared to 17% nationally).

Dr Philip Abiola is registered with the CQC to provide the regulated activities of Diagnostic and screening procedures, Maternity and midwifery services, Surgical procedures, and Treatment of disease, disorder or injury.

Detailed findings

Why we carried out this inspection

We undertook a comprehensive inspection of Dr Philip Abiola on 25 July 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement for providing safe services and good overall. We undertook a follow up inspection on 14 September 2017 to check that action had been taken to comply with legal requirements. The full comprehensive report on the 25 July 2016 inspection can be found by selecting the 'all reports' link for Dr Philip Abiola on our website at www.cqc.org.uk.

How we carried out this inspection

Before visiting, we reviewed a range of information we hold about the practice and asked other organisations such as NHS England and Newham Clinical Commissioning Group (CCG) to share what they knew. We carried out an announced focused visit on 14 September 2017.

During our visit we:

- Spoke with the lead GP, practice manager and reception staff.
- Reviewed practice documentation.

Please note that when referring to information throughout this report relates to the most recent information available to the CQC at that time.



Are services safe?

Our findings

At our previous inspection on 25 July 2016 we found that most safety systems and processes for monitoring risks to patients were well managed. However, there were gaps or weaknesses in maintaining relevant information on staff files and arrangements for Patient Specific Directions (PSDs) to allow the administration of specific medicines by the healthcare assistant.

We issued a requirement notice in respect of PSDs and found arrangements had significantly improved when we undertook a follow up inspection of the service on 14 September 2017. The practice is now rated as good for providing safe services.

Overview of safety systems and processes

The practice had clearly defined and embedded systems and processes to safeguard children and to minimise risks to patient safety.

 Arrangements for safeguarding reflected relevant legislation and local requirements. Policies were accessible to all staff. The policies clearly outlined who to contact for further guidance if staff had concerns about a patient's welfare. There was a lead member of staff for safeguarding. From the sample of documented examples we reviewed we found that the GPs attended safeguarding meetings when possible or provided reports where necessary for other agencies.

- Staff interviewed demonstrated they understood their responsibilities regarding safeguarding and had received training on safeguarding children and vulnerable adults relevant to their role. GPs were trained to child protection or child safeguarding level 3.
- The health care assistant was trained to administer vaccines and medicines and patient specific prescriptions or directions from a prescriber were produced appropriately.

We reviewed two personnel files and found appropriate recruitment checks had been undertaken prior to employment. For example, proof of identification, evidence of satisfactory conduct in previous employments in the form of references, qualifications, registration with the appropriate professional body and the appropriate checks through the DBS.