

# The Medical Centre - Dr Kukar

## Inspection report

The Medical Centre  
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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.

# Overall summary

We carried out an announced focused inspection at The Medical Centre-Dr Kukar on 04 November 2019.

The practice was previously inspected on 27 June 2019. Following this inspection, the practice was rated Inadequate overall and in safe, effective and well-led domains and placed in special measures. We issued warning notices for breaches of Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance). The practice was required to address these concerns by 11 September 2019.

We did not review the ratings awarded to this practice at this inspection.

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 found the provider had made improvements in providing safe services regarding:

- Safeguarding systems.
- Fire safety practices.
- Premises management.
- Premises risk assessments.
- Cold chain.
- Electrical systems.

We found the provider had not made sufficient improvements in providing safe services regarding:

- Safeguarding processes and DBS checks for clinical staff.

We found the provider had made improvements for providing effective services regarding:

- Appraisals for the practice nurse and healthcare assistants.

We found the provider had not made improvements for providing effective services regarding:

- Staff did not have the skills, knowledge and experience to deliver effective care, support and treatment.
- Clinical supervision for the practice nurse and healthcare assistants.

We found the provider had made some improvements to concerns we found in the well led domain:

- All staff had completed regular training regarding infection control, basic life support, fire safety and information governance.

We found the provider had not made sufficient improvements to concerns we found in the well led domain. They could not demonstrate they had:

- Effective processes in place for managing risks, issues and performance.
- A safe system to monitor and manage patients who had been prescribed high-risk medicines.
- A fail-safe system to monitor and manage patients who had been referred via the urgent two week-wait referral system.
- A fail-safe system to monitor and manage patient safety alerts.
- A fail-safe system in place to safely manage and monitor cervical smear screening.

The areas where the provider **must** make improvements are:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

The service will remain in special measures until we have undertaken the next inspection and this will be reviewed at that time. This 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 are set out in the evidence table.**

**Dr Rosie Benneworth BM BS BMedSci MRCGP**

**Chief Inspector of Primary Medical Services and Integrated Care**

## Population group ratings

## Our inspection team

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

## Background to The Medical Centre - Dr Kukar

The Medical Centre also known as Dr Kukar is located at 13 Ollgar Close, Shepherds Bush, London W12 0NF. The practice is located in an adapted premises which is managed by NHS Property Services. The building is set over two floors with stair access only. There are two clinical consultation rooms and a health care assistants' room on the ground floor and three offices on the first floor. The reception and waiting area are on the ground floor with wheelchair access to the entrance of the building. There are toilet facilities on the ground floor. There is pre-payable off street parking in the surrounding area. There are good transport links with tube and over ground stations nearby.

The practice provides NHS services through a General Medical Services (GMS) contract to patients and is part of a local network of GP practices called the Northern Network.

We previously inspected the provider in May 2016 when the provider was rated as good in all areas, including patient population groups, except for caring domain which was rated as requires improvement. A desk-top review of the caring domain was undertaken in 2017 and the provider was rated as good overall.

The full comprehensive reports of the previous inspections can be found by selecting the 'all reports' link for The Medical Centre-Dr Kukar on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

The practice provides NHS primary care services to approximately 6647 patients, and operates under a General Medical Services (GMS) contract. In addition, the practice holds a Directed Enhanced Services Contract. This is a contract between general practices and NHS England for delivering services to the local community. The practice is part of the Hammersmith and Fulham GP Federation and the NHS North West London Clinical Commissioning Group (CCG).

The practice was registered with the Care Quality Commission in April 2013 to carry out the following

regulated activities: diagnostic and screening procedures, treatment of disease, disorder or injury, surgical procedures, family planning, and maternity and midwifery services.

There are two partners in place who run the service at the practice. A non-GP partner and CQC Registered Manager and a GP partner who leads the clinical team. The lead clinical GP does not provide any clinical sessions at the practice and acts in an advisory capacity only. The provider employs four long-term sessional locum GPs. A female practice nurse works at the practice and there are two healthcare assistants. There is a practice manager, a part-time external practice manager and five administrators/receptionists.

The practice population is in the third most deprived decile in England. The practice population is ethnically diverse with the majority of Middle Eastern and South-East Asian ethnicities. There is a higher than the national average number of patients between 5 and 16 years of age and between 20 and 44 years of age. There is a lower than the national average number of patients 60 years plus. 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 reception is open Monday to Friday between 8.00am-8.00pm Monday-Friday. Patients may book appointments by telephone, online or in person. When the practice is closed, patients are directed to contact the local out of hours service and NHS 111. Out of hours services are provided by London Central and West and contact details are communicated in a recorded message accessed by calling the practice when it is closed, or by accessing the information on the practice website.

Patients can book appointments up to one week in advance using online services, in person or by telephone. Extended hours services are available at three practices across the borough in the evening between

6.30pm-8.00pm or at the weekend. During the practice's opening hours, patients may request to book an appointment at one of these sites for an evening or weekend appointment. On Saturdays, at all sites, pre-bookable practice nurse appointments are available

which can be booked through the practice. Information is available on the practice website regarding GP extended hours services open to all patients in the borough running 7 days a week in Hammersmith and Fulham.

This section is primarily information for the provider

## Enforcement actions

### Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p><b>Warning Notice</b></p> <p>How the regulation was not being met:</p> <p><b>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.</b></p> <p><b>In particular we found:</b></p> <ul style="list-style-type: none"><li>• The provider could not demonstrate they have an effective system in place to safely manage patients who had been prescribed high-risk medicines.</li><li>• The provider could not demonstrate they have an effective system in place to safely manage patients who had been referred via the urgent two week-wait system.</li><li>• The provider could not demonstrate they have an effective system in place to safely manage regarding patient safety alerts.</li><li>• The provider could not demonstrate they have a fail-safe system in place to safely manage and monitor cervical smear screening.</li><li>• The provider could not demonstrate they operated a safe system regarding DBS checks.</li><li>• The provider could not demonstrate they operated a safe system regarding emergency medicines.</li><li>• The provider could not demonstrate they operated a safe system to manage and monitor infection prevention and control.</li><li>• The provider could not demonstrate that all staff had the skills, knowledge and experience to carry out their roles and had access to regular clinical supervision.</li></ul> <p><b>This was in breach of Regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</b></p>