

Dr Amir Ipakchi

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 summary

We carried out an announced comprehensive inspection at Dr Amir Ipakchi's Practice on 28 November 2017. The overall rating for the practice was requires improvement. Safe, Effective and Well-led were rated requires improvement, and Caring and Responsive were rated as good. The practice was issued with a warning notice to improve. The full report of the November 2017 inspection can be found by selecting the 'all reports' link for Dr Amir Ipakchi's Practice on our website at .

This inspection was an announced focused inspection carried out on 15 May 2018 to confirm that the practice had made the required improvements to comply with the warning notice.

Our key findings across all the areas we inspected were as follows:

- Training records showed staff had received training appropriate and relevant to their roles.
- Staff appraisals were provided at all levels throughout the practice.
- Evidence of staff members that required immunisation for their role was recorded.
- Policies and procedures were readily available for staff.
- Recruitment procedures and policies had been updated.

- Staff chaperone training had been carried out.
- DBS checks had been carried out for staff members undertaking the role of a chaperone.
- Prescription stationery was monitored for safety and held securely.
- The infection control policy had been updated to meet local and national guidance. However, the named infection control lead within the policy had not been trained to meet the responsibilities of their role. Risk assessments, monitoring and audits had not been undertaken by the named lead as stated within the policy.

Despite the absence of improvement in infection control, we found that the practice had made sufficient improvements and had complied with the warning notice. A further comprehensive inspection will be carried out later this year and we will check progress in relation to infection control. The practice will be rerated at the next inspection.

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

Please refer to the detailed report and the evidence tables for further information.

Population group ratings

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector and a GP specialist adviser.

Background to Dr Amir Ipakchi

Dr Amir Ipakchi is located on the outskirts of Harlow town providing GP services for approximately 5,100 people living in the area.

The individual male GP works with two long-term GP locums when they are required. There are two part-time members of the nursing staff, along with full-time and part-time administrative and reception staff.

The practice is open between 8.30am and 6.30pm on weekdays. Appointments are available from 9.30am to 12.30pm and 1.30pm to 6pm. On Wednesday and Friday

evenings and the weekends, appointments can be made at the local 'hub'. This service is provided by local GPs to offer GP and nurse appointments outside of usual working hours.

The practice population is comprised of fewer patients aged over 70 than the England average. There are more patients aged 35-39. The average life expectancy of male and female patients is comparable to the England average.

Are services safe?

At the previous inspection of 28 November 2017, we rated the practice as requires improvement for providing safe services and issued the practice with a warning notice. We found no clear record of safeguarding training, or oversight of staff learning needs. Recruitment checks for non-clinical staff were not consistent. Improvements were required to infection control procedures and policy. Practice-specific safeguarding children and infection control policies were not available to staff. Staff acting as chaperones had not been trained or appropriately DBS checked or risk assessed for the role. There was no system to monitor the use of prescription stationery or ensure its security.

Safety systems and processes

The practice had systems to keep people safe and safeguarded from abuse.

- The practice had appropriate systems to safeguard children and vulnerable adults from abuse. Records showed all staff had received up-to-date safeguarding and safety training appropriate to their role. They knew how to identify and report concerns. Learning from safeguarding incidents were available to staff. Staff who acted as chaperones were trained for their role and had

received a Disclosure and Barring Service (DBS) check. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable.)

- Records demonstrated the practice carried out appropriate staff checks at the time of recruitment and on an ongoing basis.
- The infection control policy had been updated to meet local and national guidance. However, the named infection control lead within the policy had not been trained to meet the responsibilities of their role and the improvements required had not been made. Risk assessment's monitoring and audits had not been undertaken by the named lead as stated within the policy. The practice told us that this area for improvement would receive attention and the improvements made in the near future.
- The practice monitored the use of prescription stationery to ensure it was tracked through the practice and secure.

Please refer to the evidence tables for further information.

Are services effective?

At the previous inspection of 28 November 2017, we rated the practice as requires improvement for providing effective services and issued them with a warning notice. We found that there was no overall staff training record, or oversight of staff learning needs.

Effective staffing

Staff had the skills, knowledge and experience to carry out their roles.

- The practice had an updated record of all staff members learning needs. Staff were provided protected time for training. Up to date records of skills, qualifications and training were seen. Staff were encouraged, and given opportunities to develop their skills. Staff received appraisals.

Please refer to the evidence tables for further information.