

Dr Raphael Rasooly

Inspection report

21 Tanfield Avenue
London
NW2 7SA
Tel: 08444778747

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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 location

Inspected but not rated



Are services safe?

Inspected but not rated



Are services effective?

Inspected but not rated



Are services caring?

Inspected but not rated



Are services responsive to people's needs?

Inspected but not rated



Are services well-led?

Inspected but not rated



Overall summary

We carried out an announced comprehensive at Dr Raphael Rasooly's practice on 27 October 2022.

Following our previous inspection on 7 December 2020, the practice was rated requires improvement overall. It was rated requires improvement for providing safe, effective, caring, responsive and well-led services.

At the previous inspection we found that the practice did not have clear or effective systems of governance; the practice was not prescribing higher-risk medicines in line with guidelines and not always carrying out medicines reviews appropriately. We found individual care records were not always written in line with current guidance and relevant legislation and there was insufficient oversight of sessional GPs. The process for seeking patient consent was not monitored. Practice performance in relation to the uptake of cervical screening and childhood immunisation was below the national targets.

The full reports for previous inspections can be found by selecting the 'all reports' link for Dr Raphael Rasooly on our website at www.cqc.org.uk

Why we carried out this inspection

We carried out this inspection to follow up concerns following the practice's application to change their registration with CQC. We carried out a visit to the practice in relation to the registration application in September 2022 and identified continuing concerns at that time. This was a comprehensive inspection covering all key questions. We did not rate any key questions at this inspection.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit.

Our findings

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 that:

- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs. However, the practice was still underperforming on the patient uptake of population cancer screening and childhood immunisations.

Overall summary

- Staff were able to provide examples of how they treated patients with kindness and respect but the practice scored below others in relation to patient experience.
- Patients could access care and treatment in a timely way, prioritising patients with more urgent needs.
- The way the practice was led and managed had improved since our previous inspection. However there were areas of performance that remained below expected targets.

We found one breach of regulations. The provider **must**:

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

Additionally, the provider **should**:

- Take action to improve patient engagement, for example by expanding the patient participation group.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

Our inspection team was led by a CQC inspector who undertook a site visit with a second CQC inspector. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Dr Raphael Rasooly

Dr Raphael Rasooly's practice is located at 21 Tanfield Avenue, London, NW2 7SA and is known locally as Neasden Medical Centre. The provider also runs a branch practice at Greenhill Park, London, NW10 9AR. The practice provides NHS services through two General Medical Services (GMS) contracts to around 12,000 patients living in the areas of Harlesden and Neasden in North West London. The practice is part of the North West London Integrated Care Board and part of both the North Brent Primary Care Network and the South Brent Primary Care Network.

The practice is run by a principal male GP and employs a salaried female GP, four sessional GPs, two practice nurses and two clinical pharmacists. The administration team is led by a practice manager and includes several administrators and reception staff. Two receptionists are trained to carry out phlebotomy duties and one is a trained healthcare assistant. The practice also has access to associated staff through its membership of the primary care network, for example an additional clinical pharmacist and a social prescriber.

The practice population is in the seventh most deprived decile in England. 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 level of deprivation and level ten the lowest. There is a higher than the national average proportion of patients between 15 and 44 years of age. The population is ethnically diverse with around a third of patients identifying as white.

The practice reception is open at the main and branch sites Monday to Friday between 8.00am and 6.30pm. Patients may book appointments by telephone, online or in person. The practice offers extended hours appointments on a Tuesday evening and on Sunday and evening and weekend primary care appointments are also available at other sites in Brent.

When the practice is closed, patients are directed to contact the local out of hours service via NHS 111. This information can be accessed on the practice website.

The practice is registered with CQC to carry out the following regulated activities: diagnostic and screening procedures; treatment of disease, disorder or injury and surgical procedures.

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The registered person had systems or processes in place that operated ineffectively in that they failed to enable the registered person to assess, monitor and improve the quality and safety of the services being provided. In particular:</p> <ul style="list-style-type: none">• The provider had failed to improve the uptake of childhood immunisations. These remained markedly below expected target levels to protect the health of the local child population.• The provider had failed to improve cervical screening uptake rates to a level approaching the national target level.• The practice had not yet understood or addressed the reasons underpinning lower than average published indicators of patient experience. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>