

Dr Gulzar Ahmed

Inspection report

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Date of inspection visit: 30 October 2019
Date of publication: 24/12/2019

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

Requires improvement



Are services safe?

Requires improvement



Are services effective?

Requires improvement



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at Dr Gulzar Ahmed, also known as Crompton Medical Centre, on 30 October 2019 as part of our inspection programme.

We decided to undertake a focused inspection of this service following our annual review of the information available to us. Our inspection focused on the safe, effective and well-led domains.

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 have rated this practice as requires improvement overall.

We rated the practice as **requires improvement** for providing safe services because:

- Safeguarding training had been completed by all staff relevant to their role.
- Recruitment records were not maintained in accordance with regulations.
- Arrangements in relation to infection control did not mitigate the risk of spread of infection.
- The immunisation status of all staff was not maintained in line with guidance.
- Not all staff had the appropriate authorisations to administer medicines through signed Patient Group Directions.

We rated the practice as **requires improvement** for providing effective services because:

- Some long-term condition patient outcomes, childhood immunisations and cervical screening uptake were below national averages.
- Some of the staff had not completed appropriate core training in line with guidance and practice policy.

- There was no system in place to undertake any formal appraisal or review of their long-term locum GPs or locum practice nurse.

We rated the practice as **requires improvement** for providing well-led services because:

- There were gaps in governance systems and processes which included safe recruitment, infection prevention and control and staff core training.
- There was no formal written strategy.

These areas affected all population groups, so we rated all population groups as requires improvement.

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

- Ensure care and treatment is provided in a safe way to patients
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

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

- Review and action the outcomes of the recent fire, health and safety and legionella risk assessments.
- Review staff understanding of the process to respond to a needlestick injury.
- Establish a formal audit of the patient record summarising process to assess that it is undertaken in line with the protocol.
- Continue to review and improve the uptake of cervical screening and the childhood immunisation programme.

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

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Requires improvement 
People with long-term conditions	Requires improvement 
Families, children and young people	Requires improvement 
Working age people (including those recently retired and students)	Requires improvement 
People whose circumstances may make them vulnerable	Requires improvement 
People experiencing poor mental health (including people with dementia)	Requires improvement 

Our inspection team

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

Background to Dr Gulzar Ahmed

Dr Gulzar Ahmed, also known as Crompton Medical Centre, is located at 1 Crompton Street, London W2 1ND and is situated on the ground floor of a purpose-built health centre. The practice is co-located with another GP practice which occupies the first and second floor. The practice has access to four consultation rooms.

The practice provides NHS primary care services to approximately 3,400 patients and operates under a General Medical Services (GMS) contract (GMS is a contract between NHS England and general practices for delivering general medical services and is the commonest form of GP contract). The practice is part of NHS Central Clinical Commissioning Group (CCG).

The practice is registered as an individual with the Care Quality Commission (CQC) to provide the regulated activities of diagnostic and screening procedures, treatment of disease, disorder or injury, maternity and midwifery services, family planning and surgical procedures.

The practice staff comprises one male lead GP undertaking nine clinical sessions and three long-term

female locum GPs undertaking a total of three clinical sessions. The GPs are supported by two part-time practice nurses and a healthcare assistant. The administration team comprises a full-time practice manager, a part-time practice development manager and five administrative staff.

The practice is open between 9am and 12.30pm and 1.30pm and 6.30pm Monday to Friday. Extended opening is provided on Monday from 6.30pm to 7pm. Patients who call the surgery between the core hours of 8am and 9am are advised to call NHS 111 or hold to be transferred to the GP out-of-hours service. The practice opted in for providing their own out-of-hours for the patient population from 6.30pm to midnight 365 days a year.

Information published by Public Health England rates the level of deprivation within the practice population group as two on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Data shows that 50% of patients at the practice area were from Black and Minority Ethnic (BME) groups, particularly from the Middle East and South-East Asia.

This section is primarily information for the provider

Requirement notices

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 requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met.</p> <p>The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:</p> <ul style="list-style-type: none">• The provider did not ensure staff completed safeguarding training relevant to their role.• The provider did not ensure recruitment records were maintained in accordance with regulations.• The provider did not ensure the arrangements in relation to infection control mitigated the risk of spread of infection.• The provider did not maintain the Immunisation status of all staff in line with current guidance.• The provider did not ensure that all staff had the appropriate authorisations to administer medicines through signed Patient Group Directions. <p>This was in breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met.</p> <p>The provider had not ensured that effective systems and processes are in place to ensure good governance in accordance to fundamental standards of care. In particular:</p>

This section is primarily information for the provider

Requirement notices

- The provider's governance oversight failed to identify gaps in their systems and processes. For example, safe recruitment and staff training.
- The provider did not have a system in place to undertake any formal appraisal or review of their long-term locum GPs or locum practice nurse.

This was in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.