

Dr Joseph Arayomi

Inspection report

West Wing, Dipple Medical Centre
Wickford Avenue, Pitsea
Basildon
Essex
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Date of inspection visit: 15 January 2019
Date of publication: 20/02/2019

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

Good 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection at Dr Joseph Arayomi on 15 January 2019 as part of our inspection programme.

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 good overall and good for all population groups.

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

- Recruitment processes were not consistent and did not always follow national guidance.
- Although there was a procedure for the security of prescription paper this was not always followed.
- The practice had significant events as a standing item on meeting agendas however minutes did not demonstrate that discussion and learning had occurred.

We rated the practice as **good** for providing effective, caring, responsive and well-led services because:

- The practice was aware of its performance and had identified where improvement was required. The practice had plans in place to effect these changes.
- There was evidence of improvements to the level of care and treatment experienced by patients. The practice was aware further progress was needed to sustain this.
- Feedback from patients about the care provided and the attitude of staff was positive.
- Patients found it easy to make appointment.
- The practice were aware of their patient population and worked to ensure that services provided reflected their needs.

- Leaders were visible and staff felt supported by them.
- There was evidence of good teamwork and a culture that made staff feel able to raise concerns and suggestions for improvement. Staff had confidence that these would be considered.

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

- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed.

(Please see the specific details on action required at the end of this report).

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

- Review the business continuity plan, where copies are stored and make sure all staff are aware of it.
- Review the implementation of procedures around prescription paper security and ensure that all policies are personalised to the practice.
- Review the audit trail demonstrating learning and dissemination of complaints and significant events.
- Review processes for engaging patients and carers to improve uptake of childhood immunisations and screening rates for all types of cancer screening.
- Continue to improve outcomes for patients with Chronic Obstructive Airways Disease (COPD) and overall patient experience whilst in consultations.
- Ensure that staff are aware of and involved in the practice's vision and strategy.

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

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

Population group ratings

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

Our inspection team

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

Background to Dr Joseph Arayomi

Dr Joseph Arayomi is located at the Dipple Medical Centre in Basildon. There is a large car park for use by the practice and the other three practices located within the medical centre.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, maternity and midwifery services, treatment of disease, disorder or injury, family planning and surgical procedures.

Dr Joseph Arayomi is situated within Basildon and Brentwood Clinical Commissioning Group (CCG) and provides services to approximately 2,285 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The provider is a single handed male GP who registered with the CQC in October 2013. The practice employed a part-time salaried female GP, a locum nurse in addition to their own practice nurse, a health care assistant and several administration staff.

There are higher than average number of patients under the age of 18, and fewer patients aged over 65 than the national average. The National General Practice Profile states that 91% of the practice population is from a white background, and 5% from a Black background. A further 4% of the population originates from Asian, mixed or other non-white ethnic groups. 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. Male life expectancy is 77 years compared to the national average of 79 years. Female life expectancy is 80 years compared to the national average of 83 years.

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 19 HSCA (RA) Regulations 2014 Fit and proper persons employed</p> <p>The registered person's recruitment procedures did not ensure that only persons of good character were employed or that potential employees had the necessary qualifications, competence, skills and experience before starting work. The registered person's recruitment procedures also did not establish whether staff were able, by reasons of their health and after reasonable adjustments, to properly perform tasks intrinsic to the work for which they would be employed. In particular: Documentation relating to identity checks, professional registration and references, were not found in all staff files viewed. There was a lack of understanding of expected immunisation checks for different staffing groups and no evidence this had been considered.</p> <p>This was in breach of Regulation 19(1) & (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>