

Dr Mohammed Ehsan

Quality Report

69 Oval Road North
Dagenham
RM10 9ET
Tel: 02085920606

Date of inspection visit: 14 September 2017
Date of publication: 06/10/2017

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 service

Good



Are services safe?

Good



Summary of findings

Contents

Summary of this inspection

Overall summary	2
The five questions we ask and what we found	4

Detailed findings from this inspection

Our inspection team	5
Background to Dr Mohammed Ehsan	5
Why we carried out this inspection	5
How we carried out this inspection	5
Detailed findings	7

Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Dr Mohammed Ehsan's Practice on 5 December 2016. The overall rating for the practice was good. The full comprehensive report on the December 2016 inspection can be found by selecting the 'all reports' link for Dr Mohammed Ehsan on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 14 September 2017 to confirm the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 5 December 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice remains rated as good. At the previous inspection we rated the practice as requires improvement for providing safe care and treatment as the registered person did not do all that was reasonably practicable to assess, monitor, manage and mitigate risks to the health and safety of services users. The practice had not ensured they held sufficient stocks of emergency medicines and some Patient Group Directions (PGDs) which allowed nurses to administer medicines were not

signed by the GP. We also found that not all staff could access practice policies and staff who carried out cleaning of the premises did not receive specific training for this role.

At this inspection we found significant improvements had been made and the practice is now rated good for providing safe care and treatment.

Our key findings were as follows:

- The practice now held sufficient stocks of emergency medicines to treat patients in the event of a medical emergency.
- All patient group directions (PGDs) in place were now signed by both the practice nurse and GP.
- Practice policies including significant event forms were available in hard copy formats as well as electronically and staff knew how to access these.
- The practice's business continuity plan had been updated and was now fit for purpose.
- At our previous inspection, the practice identified 18 patients as carers. At this inspection, 259 patients were identified as carers; this represented 8% of the practice list size.

Summary of findings

- The practice kept a log which demonstrated the defibrillator was checked monthly to ensure it is in good working condition.
- There was a notice in the reception area which informed patients of the translation and interpreting service.
- Following the last inspection, a new first aid kit was purchased which was fit for use and contained all necessary items.
- The staff responsible for cleaning the practice had completed Control of Substances Hazardous to Health (COSHH) training.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

The practice is now rated as good for providing safe services.

- Risks to patients were now better assessed and managed.
- All Patient Group Directions (PGDs) were now signed appropriately by the GP.
- The arrangements for dealing with emergencies and major incidents had improved and were now satisfactory.

Good



Dr Mohammed Ehsan

Detailed findings

Our inspection team

Our inspection team was led by:

This inspection was undertaken by a CQC lead inspector.

Background to Dr Mohammed Ehsan

Dr Mohammed Ehsan is a GP practice in the London Borough of Barking and Dagenham, to the east of London. The practice is part of the London Borough of Barking and Dagenham Clinical Commissioning Group (CCG) and provides primary medical services through a General Medical Services (GMS) contract with NHS England to around 3000 patients.

The practice is housed within a small building, situated at one end of a row of residential properties. The practice is easily accessible by local buses. It does not have a car park; however there is permit free parking on surrounding streets. The practice consists of two consulting rooms, a small reception area and a toilet. The manager's office and reception desk are sectioned off from the main reception area. The building is single storey.

The practice's age distribution data shows an average number of patients aged zero to 59 years and a lower than average number of patients aged 60 to 85 and above. At 75 years for men and 80 years for females the average life expectancy is below the national average of 79 years for males and 83 for females. The practice locality is in the 3rd more deprived decile out of 10 on the deprivation scale.

Clinical services are provided by one principal GP (male) who works seven clinical sessions, one sessional GP (male) who worked two clinical sessions and one full time female practice nurse. They are supported by a full time practice manager and two reception/administrative staff.

The practice officially opens at 8.30am, however the GP/nurse is usually available from 7am to see patients on an emergency basis. The practice closes at 6.30pm every weekday except Thursday when it closes at 1pm. Surgery times are from 8.30am to 11.30am and 4.30 to 6.30pm except on Thursday when there is no afternoon surgery. Outside of these hours services are provided by the local out of hours provider.

The practice is registered to carry out the following regulated activities: Maternity and midwifery services; Family planning; Treatment of disease, disorder or injury and Diagnostic and screening procedures from 69 Oval Road North, Dagenham, RM10 9ET.

Dr Mohammed Ehsan was inspected in 2013 under our previous inspection regime and was found fully compliant and in December 2016 we inspected the practice under our current inspection regime; overall the practice was rated good.

Why we carried out this inspection

We undertook a comprehensive inspection of Dr Mohammed Ehsan on 5 December 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good. The full comprehensive report following the inspection on 5 December 2017 can be found by selecting the 'all reports' link for Dr Mohammed Ehsan on our website at www.cqc.org.uk.

Detailed findings

We undertook a follow up focused inspection of Dr Mohammed Ehsan on 14 September 2017. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

How we carried out this inspection

During our visit we:

- Spoke with a range of staff including the practice manager, GP, receptionist and practice nurse.

- Reviewed a sample of the personal care or treatment records of patients.
- Looked at information the practice used to deliver care and treatment plans.
- Reviewed policies and procedures.

Please note that when referring to information throughout this report, for example any reference to the Quality and Outcomes Framework data, this relates to the most recent information available to the CQC at that time.

Are services safe?

Our findings

At our previous inspection on 5 December 2016, we rated the practice as requires improvement for providing safe services as some of the arrangements to deal with emergencies were not adequate.

These arrangements had significantly improved when we undertook a follow up inspection on 14 September 2017. The practice is now rated as good for providing safe services.

Safe track record and learning

At the previous inspection we found that staff were not able to access the significant event form or policy on their own computer terminal. At this inspection we found the practice now held hard copies of these forms in each clinical room and at reception. All practice policies including significant event policy were stored in a folder in the practice manager's office.

Overview of safety systems and process

At the previous inspection we noted that not all Patient Group Directions (PGDs) were signed by the GP. According to the legal requirements a PGD must be authorised by an appropriate organisation and signed by a doctor. (PGDS are written instructions for the supply or administration of medicines to groups of patients who may not be individually identified before presentation for treatment). At this inspection we reviewed all PGDS on file and found they were correctly signed and dated by both the practice nurse and GP.

Arrangements to deal with emergencies and major incidents

At the last inspection we found that the arrangements to respond to emergencies and major incidents needed strengthening to mitigate risks to patients and other persons who used the service. We found that although the practice had a defibrillator, they did not have a process to ensure it was checked regularly and in good working condition. At this inspection, the practice we saw monthly logs which confirmed the defibrillator was checked monthly to ensure it remained fit for use in the event of an emergency.

At the previous inspection we found that the practice had not carried out a risk assessment to identify emergency medicines that were not suitable for the practice. In addition, the practice told us emergency medicines were checked monthly, however this was not undertaken or logged consistently based on the monthly stock sheet we reviewed. At this inspection, considerable improvements had been made to the management of emergency medicines. The practice now held an appropriate stock of emergency medicines which included, Benzyl-penicillin which is used for treating suspected bacterial meningitis. All these medicines were stored in a locked cupboard in the practice nurse's room and staff we spoke with on the day knew of their location. All medicines were in date, quantities corroborated with the monthly log and medicines nearing expiration could be easily identified.

At our previous inspection we found the business continuity plan was not fit for purpose as it did not reflect the practice's current arrangements. At this inspection we found the practice had updated their plan to now include emergency contact numbers for all staff as well as details of the local practice with whom they had reciprocal arrangements in case of emergencies. Copies of the plan were now held offsite by the GP and practice manager.