

Appendix B - CQC Inspections in Barking and Dagenham, 2016/17 Q1

Provider Name	Provider Type	Location	Link to report	Report Date	Inspection Date	Rating	Comments / Summary
Outlook Care	Care Home	Outlook Care - Maplestead Road	http://www.cqc.org.uk/location/1-124583683	08/04/2016	18/02/2016	Good	
Bupa Care Homes	Care Home	Chaseview	http://www.cqc.org.uk/location/1-127503453	05/05/2016	09/02/2016	Good	
Abbeyfield East London Extra Care Society Ltd	Care Home	The Abbeyfield East London Extra Care Society Limited	http://www.cqc.org.uk/location/1-112951275	19/06/2016	30/06/2016	Good	
Chinite Resourcing Ltd	Care Home	Chinite Resourcing Ltd	http://www.cqc.org.uk/location/1-326243330	23/06/2016	20/04/2016	Good	
LB Barking and Dagenham	Care Home	Millicent Preston House	http://www.cqc.org.uk/location/1-454801572	24/06/2016	04/05/2016	Good	
Sahara Parkside Ltd	Care Home	Sahara Parkside	http://www.cqc.org.uk/location/1-164893164	05/04/2016	16-19/02/2016	Requires Improvement	CQC rated requirements after an inspection in February 2016 as: Safe: Requires Improvement - Risk assessments and measures to reduce the risk of behaviour that challenged the service lacked detail Effective: Requires Improvement - Staff had not received the specialist training Responsive: Requires Improvement - Records of care delivered lacked detail Well Led: Requires improvement - Quality assurance systems had lapsed Action: LBBB Quality Assurance increased monitoring, undertook intensive work with the provider and also carried out unannounced visits on the scheme. A suspension on placements has now been lifted following significant improvements. Monitoring will only be deescalated upon evidence of prolonged improvement.

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Delrose House	Care Home	Cloud House	http://www.cqc.org.uk/location/1-320058309	07/06/2016	12&15/04/2016	Requires Improvement	CQC rated requirements after an inspection in April 2016 as: Safe: Requires Improvement - Ineffective audits of medicine Effective: Requires Improvement Responsive: Requires Improvement Well Led: Requires Improvement - The service did not record the lessons learnt from incidents that occurred. Action: Review is scheduled and an update can be provided at the next meeting.
Lifestyle Care Management Ltd	Care Home	Alexander Court Care Centre	http://www.cqc.org.uk/location/1-2258796361	09/06/2016	10/03/2016	Requires Improvement	CQC rated requirements after an inspection in April 2016 as: Safety: Requires Improvement - The kitchen was not clean and medicines were not always administered safely. Effective: Requires Improvement - People did not always have access to nutritious food and drinks Responsive: Requires Improvement Well Led: Requires Improvement - Effective systems were not in place to monitor the quality of the service. Action: LBBB Quality Assurance increased monitoring, undertook intensive work with the provider and also carried out unannounced visits on the scheme. A suspension on placements has now been lifted following significant improvements. Monitoring will only be deescalated upon evidence of prolonged improvement.
Heathway Medical Centre	GP Surgery	Broad Street Resource Centre	http://www.cqc.org.uk/sites/default/files/new_reports/AAAF5830.pdf	01/09/2016	26/05/2016	Inadequate	The practice has been placed in special measures and will be inspected again within six months of its original inspection. If sufficient improvements have not been demonstrated by Heathway Medical Centre, then CQC can take enforcement actions that could ultimately lead to the cancellation or variation of the terms of their registration. The CCG are supporting the practice to put into action a plan to improve all aspects of the service provided to residents. The action plan and report on changes made will be taken to the Primary Care Commissioning Board. Matthew Cole, Director of Public Health, is a member of this board.
Five Elms Medical Practice	GP Surgery	Five Elms Road	http://www.cqc.org.uk/sites/default/files/new_reports/AAAF1574.pdf	25/08/2016	05/04/2015	Inadequate	The practice has been placed in special measures and will be inspected again within six months of its original inspection. If sufficient improvements have not been demonstrated by Five Elms, then CQC can take enforcement actions that could ultimately lead to the cancellation or variation of the terms of their registration. The CCG are supporting the practice to put into action a plan to improve all aspects of the service provided to residents. The action plan and report on changes made will be taken to the Primary Care Commissioning Board. Matthew Cole, Director of Public Health, is a member of this board. The inspection reports are also presented to the Barking and Dagenham Primary Care Commissioning Committee - in some cases the practices are already being monitored by the CCG for contractual reasons. The committee will then review the report and where applicable take further action; for example issue a contract remedial/breach notice and the practice would be required to put a remedial plan in place.

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Dr BK Jaiswal's Practice	GP Surgery	Julia Engwell Health Centre	http://www.cqc.org.uk/location/1-582326413	19/04/2016	28/01/2016	Good	
Dr Asma Moghal	GP Surgery	Becontree Medical Centre	http://www.cqc.org.uk/location/1-487154104	26/05/2016	11/03/2016	Requires improvement	<p>Inspection key findings: Staff understood and fulfilled their responsibilities to raise concerns, and to inform practice management about incidents and near misses. However, the records of these events were brief and learning outcomes were minimal. There was no evidence to show patients received an apology. Risks to patients were assessed and managed, with the exception of those relating to recruitment checks and infection control. Data showed patient outcomes were comparable to the national average. We saw no evidence of completed audits having been carried out and we saw no evidence that audits were driving improvements to patient outcomes.</p> <p>Improvement areas include: Ensuring; patients affected by significant events receive reasonable support, patient group directions (PGDs) are completed and up to date, a programme of quality improvement is in place, recruitment checks, Infection prevention and control audits are carried out and that there is a system in place to allow patients to feedback.</p>
Dr DP Shah's Practice	GP Surgery	Parkview Medical Centre	http://www.cqc.org.uk/location/1-559775380	22/06/2016	18/04/2016	Good	
Dr Kalkat's Surgery	GP Surgery	Bastable Avenue	http://www.cqc.org.uk/location/1-551125553	18/07/2016	17/05/2016	Good	

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Five Elms Medical Practice	GP Surgery	Five Elms Health Centre	http://www.cqc.org.uk/location/1-569174460	24/08/2016	05/04/2016	Inadequate	<p>Inspection key findings: Patients were at risk of harm because systems and processes were not in place to keep them safe. When there were unintended or unexpected safety incidents, reviews and investigations were not thorough enough and lessons learned were not communicated widely. The practice had no clear leadership structure, insufficient leadership capacity.</p> <p>Improvement areas include: Take action to assess the risk of, prevent, detect and control the spread of infections. Take action to assess the risks associated with fire. Carry, risk assessments to be carried out regarding DBS checks. Ensure there is an effective system in place for the receipt and distribution of safety alerts to all staff. Ensure there are processes for identifying Improvements for clinical care. Ensure sustainable action in response to patient feedback relating to lack access to the service and appointment availability. Involvement in decisions and explanations of tests and/or treatments. Ensure that all staff receive training around confidentiality and information governance, providing chaperone duties, infection control, as well as access to professional development opportunities. Ensure pre-employment checks are in place.</p>
Heathway Medical Centre	GP Surgery	Broad Street Resource Centre	http://www.cqc.org.uk/location/1-2687718289	31/08/2016	26/05/2016	Inadequate	<p>Inspection key findings: recruitment checks on staff had not been undertaken, there were no records of infection control audits and patient notes were not stored securely. Patient outcomes were hard to identify as little or no reference was made to audits or quality improvement. There was no evidence that the practice was comparing its performance to others; either locally or nationally.</p> <p>Improvement areas include: Establish systems for managing service risks, for example infection control. Ensure documents and processes used to govern activity are up to date. This includes safeguarding arrangements, and the use of patient specific directions when authorising clinical staff to administer vaccines. Ensure there is a programme to meet the learning and development needs of staff. Ensure recruitment arrangements include pre-employment checks for. Ensure quality improvement activity, including clinical audits. Ensure systems are in place to seek and act on feedback.</p>

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Dr Hamilton-Smith And Partners	GP Surgery	Chadwell Heath Health Centre, Ashton Gardens	http://www.cqc.org.uk/location/1-609934909	04/09/2016	05/05/2016 & 16/06/2016	Requires improvement	<p>Inspection key findings: There was an open and transparent approach to safety and a system in place for reporting significant events. However, when things went wrong reviews and investigations were not always recorded. Risks to patients were not adequately assessed and managed. Areas of concern included recruitment and staff training. Staff assessed patients' needs and delivered care in line with current evidence based guidance. Clinical staff had been trained to provide them with the skills, knowledge and experience to deliver effective care and treatment. There were gaps in mandatory training and staff appraisals. The practice scored poorly on access to appointments. Improvements were made to the quality of care as a result of feedback.</p> <p>The practice had a number of policies and procedures to govern activity, that were outdated. The practice had good facilities and was well equipped to treat patients and meet their needs.</p> <p>Improvement areas include: The areas where the provider must make improvements are: Review the mandatory training requirements for staff. Ensure recruitment arrangements include all necessary pre-employment checks. Implement a programme of continuous quality improvement including audits to show</p>
Dr KM Al-Kaisy Practice	GP Surgery	Urswick Medical Centre	http://www.cqc.org.uk/location/1-529661202	05/09/2016	17/05/2016	Requires improvement	<p>Inspection key findings: Non-clinical staff had not received training on safeguarding children or vulnerable adults relevant to their role. Risks to patients were assessed and well managed, with the exception of those relating to recruitment checks and fire safety.</p> <p>Verbal complaints were not always recorded. Although some audits had been carried out, there was no evidence that audits were driving improvements. The practice had a number of policies and procedures to govern activity, however not all policies were being followed. Data showed patient outcomes were comparable to the national average.</p> <p>Patients said they were treated with compassion, dignity and respect.</p> <p>Improvement areas include:</p> <p>Ensure recruitment arrangements include all necessary employment checks for all staff. Ensure there are systems in place to monitor and manage risk to patient and staff safety, including fire safety. Ensure that there are systems in place to manage staff training for their roles so that staff have the skills and knowledge to deliver effective care.</p>

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Abbey Dental Practice	Dentist	2 Arboretum Place	http://www.cqc.org.uk/location/1-362363499	19/05/2016	30/06/2015	No action required	
Barking Dental Practice	Dentist	25-27 London Road	http://www.cqc.org.uk/location/1-1460180397	19/05/2016	21/01/2016	No action required	
Rose Lane Dental Surgery	Dentist	129 Rose Lane	http://www.cqc.org.uk/location/1-1413667912	02/08/2016	15/02/2016	No action required	
Prompt Healthcare Staffing Limited	Community Services	Barking Enterprise Centre	http://www.cqc.org.uk/location/1-1002254715	12/04/2016	04/03/2016	Inspected but not rated	