

# Dr P Arumugaraasah's & Partners

## Inspection report

Lister Primary Care Centre  
101 Peckham Road  
London  
SE15 5LJ  
Tel: 020 3049 8390  
<https://www.draruandpartners.co.uk/>

Date of inspection visit: 9 July 2019  
Date of publication: 29/08/2019

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?

Good 

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 P Arumugaraasah's & Partners on 10 May 2018 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated requires improvement overall.

This inspection was an announced comprehensive inspection, which we undertook on 9 July 2019 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This report covers our findings in relation to those requirements.

The practice was rated good for all key questions and all population groups.

The reports of all the previous inspections can be found by selecting the 'all reports' link for Dr P Arumugaraasah's & Partners on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

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 and the public.

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

- All necessary recruitment checks including references had been undertaken for staff.
- Staff who carried out chaperoning had received training and were aware of their responsibilities.
- There was evidence of lessons learned and improvements made when things went wrong.

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

- At the last inspection we rated the practice requires improvement for providing effective care because we found that outcomes for patients with diabetes at the practice were lower than the CCG and national average. The practice is now rated good for providing effective care due to improvements made.
- Quality improvement activity demonstrated improved for patients.
- Improved performance in diabetes and cervical cancer indicators.
- Staff were appropriately trained to carry out their duties effectively.

We rated the practice as **good** for providing caring services because:

- The practice was previously rated requires improvement for caring due their results in the 2017 GP Patient survey. At this inspection they were rated good due to improvements made.
- Thirty-two CQC comment cards received, 26 were wholly positive about the care and treatment received at the practice.
- We observed staff treating patients with respect and dignity.

We rated the practice as **good** for providing responsive services because:

- The practice had reviewed the needs of the population and responded accordingly.
- Feedback from patients led to a new telephone system, and complaints were responded to appropriately and within the practice's timeframe.
- Shared care agreements were in place to ensure patient treatment was coordinated.

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

The practice was rated requires improvement at their 2018 inspection due to feedback from patients and because the management of patients with diabetes had not been adequately addressed since their inspection in 2017. The practice is now rated good for providing a well-led service due to improvements made in both areas. In addition:

- Governance of the practice assured the delivery of high-quality and person-centred care, supported learning and innovation, and promoted an open and fair culture.
- Staff understood the practice's vision, values and strategy, and their role in achieving them.
- Arrangements with partners and third-party providers were governed and managed effectively to encourage appropriate interaction and promote coordinated, person-centred care.

There were areas where the practice **should** make improvements:

- Continue to take steps to improve childhood immunisation uptake.
- Review ways to engage patients diagnosed with long-term conditions with treatment offer.

# Overall summary

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

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

## Our inspection team

Our inspection team was led by a CQC lead inspector accompanied by a GP specialist adviser.

## Background to Dr P Arumugaraasah's & Partners

Dr P Arumugaraasah's and Partners is based in Peckham, London Borough of Southwark. The practice has two partners (one working three sessions, the other working eight sessions per week), although they are in the process of adding a third partner who works full time at the practice. The partners manage the practice which is based at Lister Primary Care Centre, 101 Peckham Road, London, SE15 5LJ.

The practice is based in purpose-built building which is shared with two other GP practices plus several other healthcare providers. The practice has approximately 5,687 registered patients.

The surgery is based in an area with a deprivation score of 2 out of 10 (10 being the least deprived). The practice population's age demographic shows a higher than the national average numbers of patients between 0 and 54 years and a lower proportion of patients aged over the

age of 60. In addition to the partners there is a full-time equivalent locum GP and a full-time practice nurse. The practice is managed by a practice manager and there are five further administrative staff.

The practice is contracted to provide Personal Medical Services (PMS) and is registered with the CQC for the following regulated activities: diagnostic and screening procedures, treatment of disease, disorder or injury and maternity and midwifery services. The practice is open from 8am until 6:30pm Monday to Friday. There is extended opening on Mondays from 7am until 8am and on Wednesdays and Thursdays from 6:30pm until 7:30pm. Outside of normal opening hours the practice uses a locally based out of hours provider.

The practice was previously inspected by the CQC on 10 May 2018. At that inspection the rating for the practice was Requires Improvement overall. At this inspection the practice was rated Good overall and for all population groups.