

# Parkview Medical Centre

### **Inspection report**

56 Bloemfontein Road Shepherds Bush London W12 7FG Tel: 02087494141 www.parkviewdrkukar.nhs.uk

Date of inspection visit: 13 December 2019 Date of publication: 18/02/2020

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.

# **Overall summary**

We carried out an announced focused inspection at Parkview Medical Centre (Dr R Kukar and Partners) on 13 December 2019.

The practice was previously inspected on 25 and 30 September 2019. Following that inspection, the practice was rated inadequate overall (inadequate in safe, effective, responsive and well-led and requires improvement in caring) and placed in special measures. We issued warning notices for breaches of Regulation 17 (Good governance) and Regulation 18 (Staffing). The practice was required to address these concerns by 20 November 2019. This focused inspection was to follow-up on the two warning notices.

We did not review the ratings awarded to this practice at this inspection.

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 found the provider had made improvements in providing safe services. In particular we found that the provider had made improvements to their systems and process in relation to safeguarding, safe recruitment, monitoring cervical screening, prescription stationery and patient safety alerts.

We found that the provider had made improvements for providing effective services. In particular the provider was able to demonstrate that core training had been undertaken by all clinical and non-clinical staff and they had implemented an appraisal and supervision schedule for their clinical staff. However, the practice was unable to demonstrate that role-specific training for their healthcare assistant was appropriate and up-to-date to deliver all their clinical duties and responsibilities. We found the provider had made improvements in providing well-led services in relation to good governance and had implemented systems and process in response to the findings of our previous inspection.

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

• Ensure persons employed in the provision of the regulated activity receive the appropriate support, training, professional development, supervision and appraisal necessary to enable them to carry out their duties

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

- Review the monitoring of immunisation status for non-clinical staff.
- Review best practice guidance in relation to the management and control of prescription stationery.

The service will remain in special measures and this will be reviewed at a follow-up comprehensive inspection in line with our inspection criteria. This will be kept under review and if needed could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement we will move to close the service by adopting our proposal to remove this location or cancel the provider's registration. Special measures will give people who use the service the reassurance that the care they get should improve.

## Details of our findings are set out in the evidence table.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

#### Chief Inspector of Primary Medical Services and Integrated Care

### Our inspection team

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

### Background to Parkview Medical Centre

Parkview Medical Centre (Dr R Kukar and Partners) is situated at Parkview Centre for Health and Wellbeing, Cranston Court, 56 Bloemfontein Road, Shepherds Bush, London, W12 7FG. This is a purpose-built primary health care centre shared with three other GP practices and community services. The practice has access to two consulting rooms and a shared reception on the ground floor, and administrative space on the first floor.

The practice provides NHS primary care services to approximately 1,900 people living in Hammersmith and Fulham through a General Medical Services (GMS) contract (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 the NHS Hammersmith and Fulham Clinical Commissioning Group (CCG). The practice population is in the second most deprived decile in England. People living in more deprived areas tend to have greater need for health services. The practice is registered with the Care Quality Commission (CQC) as a partnership to provide the regulated activities of diagnostic and screening procedures, treatment of disease, disorder or injury and maternity and midwifery services.

The practice staff comprises six long-term locum GPs and a part-time healthcare assistant. The practice had recently recruited a practice nurse who was due to commence at this location in January 2020. The team are supported by a clinical GP lead (who does not undertake any clinical sessions at the practice, a managing partner, a part-time practice manager and three reception staff. Staff work across two separately registered practices managed by the partnership. The practice is open between 8am and 6.30pm Monday to Friday.

# **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	Regulation 18 HSCA (RA) Regulations 2014 Staffing
Maternity and midwifery services	How the regulation was not being met
Treatment of disease, disorder or injury	The registered person had failed to ensure that sufficient numbers of suitably qualified, competent, skilled and experienced persons were deployed in order to meet the requirements of fundamental standards in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. In particular:
	• The provider had not ensured that a healthcare assistant had the appropriate and up-to-date training to enable them to carry out their clinical duties.
	Regulation 18(1)