

# Cassidy Medical Centre

**Inspection report** 

651A Fulham Road London SW6 5PX Tel: 02073844850

Date of inspection visit: 5 July 2022 Date of publication: 13/09/2022

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?	Requires Improvement	
Are services well-led?	Good	

# Overall summary

We carried out an announced inspection at Cassidy Medical Centre on 6 July 2022. Overall, the practice is rated as Good.

Safe - Good

Effective - Requires improvement

Well-led - Good

Following our previous inspection on 20 February 2017 the practice was rated Good overall and for all key questions.

The full reports for previous inspections can be found by selecting the 'all reports' link for Cassidy Medical Centre on our website at www.cqc.org.uk

### Why we carried out this inspection

This inspection was a focused inspection due to specific concerns relating to the parent provider. There were no specific concerns relating directly to Cassidy Medical Centre. We inspected and rated three key questions:

- Safe
- Effective
- Well-Led.

We inspected the Responsive key question and this was not rated.

### How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- · Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit

#### **Our findings**

We based our judgement of the quality of care at this service on a combination of:

- What we found when we inspected
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# Overall summary

- 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

#### We found that:

- Patients with long term conditions and/or taking high risk medicines were not always monitored appropriately or in a timely manner. We saw evidence that overdue reviews had been completed only following the announcement of the inspection.
- Rates of cervical and cancer screening, and childhood immunisations were below the expected level although these rates are comparable with other practices in the local area. We saw proof that the practice had been engaging in two-cycle audits that were ongoing in order to improve figures. The impact of this has not yet been seen however rates of bowel and breast cancer screening and childhood immunisations had been steadily increasing since 2018.
- There were clear and effective systems in place to keep people safe and manage risk.
- The practice was proactive in undertaking quality improvement measures across the service including audit, engagement and patient education.
- There was adequate quality assurance and improvement measures in place.
- We saw evidence of open and inclusive culture where staff were valued and demonstrated good levels of teamwork for the benefit of the patients.
- There were appropriate policies and procedures in place to ensure staff and patients were safe and well cared for.
- There were regular practice meetings to discuss learning, significant events, improvements and communicate any changes.

Whilst we found no breaches of regulations, the provider **should**:

- Monitor systems' efficacy to ensure timely and adequate monitoring and reviews of patients on high risk medicine and/or with long term conditions.
- Provide adequate support, supervision and lines of communication for junior staff and new/trainee clinicians.

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

### Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

### Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to Cassidy Medical Centre

Cassidy Medical Centre is located in Fulham, London at:

651a Fulham Road

London

SW6 5PX

Cassidy Medical Centre is a part of AT Medics and run by Operose Health. The inspection was only of Cassidy Medical Centre and no other sites were visited as part of the inspection.

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

The practice offers services from a purpose built GP practice and shares resources with partner practices within AT Medics and other practices in the local Primary Care Network (PCN).

The practice is situated within the Hammersmith and Fulham area of North West London Clinical Commissioning Group (CCG) and delivers an Alternative Provider Medical Services (APMS) to a patient population of about 11,900. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices under AT Medics and Operose Health, and within South Fulham PCN.

Information published by Public Health England shows that deprivation within the practice population group is in the sixth decile (six of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 73% White with the remaining practice population made up of smaller ethnic groups.

The practice has less than average amounts of older and young people in its practice population and a higher number of working age people. There are more female patients than male.

There is a team of 4 GPs, and patients have the choice of a male or female GP. The practice has two practice nurses who provide nurse led clinics for long-term conditions and smear testing. The practice employs a healthcare assistant, pharmacists and physician associates. The GPs are supported at the practice by a large team of reception/administration staff. The assistant practice manager is based at the location with support from the regional manager and deputy regional manager who oversee multiple locations.

The practice is open between 8am to 8pm Sunday to Friday, and 9am to 1pm Saturday. The practice offers a range of appointment types including book on the day, urgent, telephone, online, in-app, and advance appointments.

Extended access is provided locally in house during evening and weekend hours. Further out of hours services are provided by 111.