

Hilly Fields Medical Centre

Quality Report

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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 effective?

Good 

Are services caring?

Good 

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection at Hilly Fields Medical Centre on 25 August 2016. The overall rating for the practice was good, although the effective domain was rated as requires improvement. The report found the practice must undertake the following:

- The practice must ensure that they set up review procedures for patients with diabetes and mental health.

The report also found that the practice should do the following:

- The practice should consider adding further detail to its business continuity plan.
- The practice should consider reviewing whether or not clinicians are coding entries on the medical database correctly.
- The practice should consider reviewing systems used to identify carers as the number on the register was lower than the national average.

The full comprehensive report of the 25 August 2016 inspection can be found by selecting the 'all reports' link for Hilly Fields Medical Centre on our website at www.cqc.org.uk.

This inspection was an announced focused inspection carried out on 20 April 2017 to confirm that 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 25 August 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

Overall the practice is rated as good.

Our key findings were as follows:

- Quality and Outcomes framework results were improved in all areas compared to the inspection visit of 25 August 2016. This included results for diabetes and mental health indicators.

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 effective?

The practice is rated as good for providing effective services.

- The practice's provisional Quality and Outcomes Framework scores for 2016/17 were 97% of the total number of points available, in line with national averages.
- Diabetes and mental health indicators were in line with the national average. For example, the practice had provisionally scored 91% for diabetes related indicators in the year 2016/17, the national average for 2015/16 was of 89%. The exception reporting rate for diabetes related indicators was 2.3%, lower than the national average of 11%.

Good



Are services caring?

The practice is rated as good for providing caring services. The practice had increased the number of patients identified as carers on the patient database.

Good



Hilly Fields Medical Centre

Detailed findings

Our inspection team

Our inspection team was led by:

This focussed inspection was carried out by a CQC inspector.

Background to Hilly Fields Medical Centre

The practice operates from 172 Adelaide Avenue, Brockley, London, SE4 1JN. The practice is based in a converted premises, based across three floors, all of which are accessible to patients. Patients can access all floors using a lift. The practice is based in the Lewisham Clinical Commissioning Group (CCG) area.

The practice has approximately 12,500 registered patients. The surgery is based in an area with a deprivation score of 6 out of 10 (10 being the least deprived). The practice population's age demographic is similar to the national average, although there are a higher than average number of patients between the ages of 30 and 54, and fewer patients over the age of 60.

The GP team includes six partners (all male), plus five salaried GPs (one male and four female). In total there are 9.25 whole time equivalent GPs at the practice, although this number is shared with a smaller satellite site which is registered as a separate entity with the CQC. The nursing team includes four female nurses and one male healthcare assistant. The clinical team is supported by a practice manager, a senior receptionist and 6 reception staff, an IT lead, two administrators and two secretarial staff.

The practice is open from 8.00am to 8.00pm Monday to Friday. Further extended hours are available between

9:00am and 12:00pm on Saturdays. The practice offers appointments throughout the day when it is open. The practice also has an on duty doctor who is available whenever the practice is open.

The practice is registered with the Care Quality Commission (CQC) to provide the regulated activities of diagnostic and screening procedures, family planning services, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.

The practice was inspected under CQC's current methodology on 25 August 2016.

Why we carried out this inspection

We undertook a comprehensive inspection of Hilly Fields Medical Centre on 25 August 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement in the effective domain. The full comprehensive report following the inspection of 25 August can be found by selecting the 'all reports' link for Hilly Fields Medical Centre on our website at www.cqc.org.uk.

We undertook a follow up inspection of Hilly Fields Medical Centre on 20 April 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:

Detailed findings

- Spoke with a range of staff (specifically a GP, a nurse and the practice manager).
- Visited all practice locations.
- Reviewed information the practice used to monitor the delivery of care.

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 effective?

(for example, treatment is effective)

Our findings

At our previous inspection on 25 August, we rated the practice as requires improvement for providing effective services as the practice's scores in the Quality and Outcomes Framework (QOF) were lower than the national average, and were notably so for patients with diabetes and poor mental health.

These arrangements had improved when we undertook a follow up inspection on 20 April 2017. The practice is now rated as good for providing effective services.

Management, monitoring and improving outcomes for people

The practice used the information collected for the QOF and performance against national screening programmes to monitor outcomes for patients. (QOF is a system intended to improve the quality of general practice and reward good practice). The most recent published results were 91% of the total number of points available compared with the clinical commissioning group (CCG) average of 94% and national average of 95%. The overall level of exception reporting in the practice was 3.1%, which was lower than the national average. (Exception reporting is the removal of patients from QOF calculations where, for example, the patients are unable to attend a review

meeting or certain medicines cannot be prescribed because of side effects). These QOF results relate to April 2015 to March 2016, a period prior to the first inspection of the practice in August 2016.

The practice were able to provide as yet unverified data for the 2016/17 QOF year which showed significant improvement, with a projected total score of 97%:

- Performance for diabetes related indicators was now similar to the than the national average. The practice had provisionally scored 91% for diabetes related indicators in the year 2016/17, the national average for 2015/16 was of 89%. The exception reporting rate for diabetes related indicators was 2.3%, lower than the national average of 11%.
- Performance for mental health related indicators was now similar to the national average. The practice had provisionally scored 99% for mental health related indicators in the year 2016/17, the national average for 2015/16 was 93%. The exception reporting rate for mental health related indicators was 12%, similar to the national average of 11%.

The practice had reviewed how staff were using templates to ensure that performance of the practice was accurately reflected in QOF. One of the registrars at the practice had undertaken a Quality Review Project to follow up patients with poor mental health and to remind colleagues where further recall was required. The practice had also implemented more structured QOF reviews.

Are services caring?

Our findings

The report of 5 July 2016 rated the practice as good for caring. Notwithstanding this, the CQC suggested that the practice should review how carers were identified, as only 0.5% of patients had been identified as carers, lower than

the national average. The practice had reviewed records of patients known to be carers to ensure that they were noted as such and had proactively reviewed carer status when patients attended the surgery. Two hundred and ninety two patients were now shown as carers, equivalent to 2.4% of the practice list.