

# North Fulham Surgery

## Inspection report

The Surgery  
82 Lillie Road  
Fulham  
London  
SW6 1TN  
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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 location

Inadequate 

Are services safe?

Inadequate 

Are services effective?

Inadequate 

Are services caring?

Good 

Are services responsive?

Requires improvement 

Are services well-led?

Inadequate 

# Overall summary

We carried out an announced comprehensive inspection at North Fulham Surgery on 17 September 2019 as part of our inspection programme.

We inspected this practice on one previous occasion, on 3 October 2014, and the practice was rated as good overall. We rated four domains: safe, well led, effective and caring and all patient population groups as good. Responsive domain was rated as outstanding.

We decided to undertake an inspection of this service following our annual review of the information available to us. This inspection looked at the following key questions: safe, effective, well led, caring and responsive.

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 have rated this practice as **inadequate**, including all population groups, overall.

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

- The practice did not have clear systems and processes to keep patients safe.
- The practice did not have reliable systems and processes to keep patients safeguarded from abuse.
- The provider did not have safe practices regarding emergency medicines and equipment.
- The practice did not have reliable infection prevention and control practices in place.
- The practice did not maintain adequate records to monitor and manage the cold chain effectively.
- The practice did not have complete fire safety systems in place.
- The practice did not have reliable systems in place to manage the practice premises safely.
- The practice did not have appropriate systems in place for the safe management of medicines.
- The practice did not always learn and make improvements when things went wrong.

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

- There was limited monitoring of the outcomes of care and treatment.
- The practice was unable to show that staff had the skills, knowledge and experience to carry out their roles.
- The practice was unable to show that it always obtained consent to care and treatment.
- Some performance data was significantly below local and national averages.

This area affected all population groups; so, we rated all population groups in the effective domain as **inadequate**.

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

- Leaders could not show that they had the capacity and skills to deliver high quality, sustainable care.
- The practice did not have safe systems regarding the management of patients on high-risk medicines.
- The practice did not have a fail-safe system regarding patient safety alerts.
- The practice did not have clear and effective processes for managing risks, issues and performance.
- The practice did not have an appropriate fail-safe system in place for the safe management of patients who had been referred via the two-week wait urgent referral system.
- The practice did not have an appropriate fail-safe system in place to monitor and manage cervical screening for female patients.
- The practice did not have an appropriate fail-safe system in place to monitor and manage prescriptions safety.
- The provider did not have a safe or effective recruitment system in place.
- While the practice had a clear vision, that vision was not supported by a credible strategy.
- The practice culture did not effectively support high quality sustainable care.
- The overall governance arrangements were ineffective.
- The practice did not always act on appropriate and accurate information.
- We saw limited evidence of systems and processes for learning, continuous improvement and innovation.

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

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.

# Overall summary

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

- Patients could access care and treatment in a timely way.
- The provider could not demonstrate their system for dealing with complaints was sufficient. Complaints were not responded to promptly and appropriate information including responsive timescales and a patient's right to review was promoted and available in the practice premises.

This area affected all population groups; so, we rated all population groups in the responsive domain as **requires improvement**.

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

- Ensure that care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

I am placing this service in special measures. Services placed in special measures will be inspected again within

six months. If insufficient improvements have been made such that there remains a rating of inadequate for any population group, key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating the service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve.

The service 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 and the evidence supporting our ratings are set out in the evidence tables.

**Dr Rosie Benneyworth BM BS BMedSci MRCGP**

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

## Population group ratings

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

## Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor, a practice nurse specialist advisor, a practice nurse specialist advisor who was shadowing the team and a practice manager specialist advisor.

## Background to North Fulham Surgery

North Fulham Surgery is located at 82 Lillie Road Fulham London SW6 1TN. The surgery has good transport links and there is a pharmacy located nearby.

The practice provides NHS services through a General Medical Services (GMS) contract to patients and is part of a local network of GP practices called the Southern Network.

We have inspected the provider on one previous occasion. At our inspection in October 2014 we rated the provider as being good overall, outstanding in responsive domain and good in all other domains.

The full comprehensive report of the previous inspection can be found by selecting the 'all reports' link for North Fulham Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

There are three GP partners in place who run the service at the practice. The practice employs four salaried GPs, one retainer GP and two locum GPs who work a combination of full and part time hours. The practice is a training practice and employs three trainee GP registrars, one practice nurse, two healthcare assistants, practice manager, an assistant practice manager, a phlebotomist and nine receptionists/administrators.

The practice provides NHS primary care services to approximately 8000 patients, and operates under a General Medical Services (GMS) contract. In addition, the practice holds a Directed Enhanced Services Contract. This is a contract between general practices and NHS England for delivering services to the local community. The practice is part of the Hammersmith and Fulham GP Federation and the NHS North West London Clinical Commissioning Group (CCG).

The practice was registered with the Care Quality Commission in April 2013 to carry out the following regulated activities: diagnostic and screening procedures, treatment of disease, disorder or injury, maternity and midwifery service, family planning and surgical procedures.

The practice population is in the fourth most deprived decile in England. Public Health England rates the level of deprivation within the practice population group as three, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

There is a higher than the national average number of patients between 15 and 44 years of age. The practice

reception is open on Monday, Tuesday, Wednesday and Thursday between 7:00am-7:30pm and on Fridays between: 7.00am-6.30pm. Patients may book appointments by telephone, online or in person.

When the practice is closed, patients are directed to contact the local out of hours service and NHS 111. Out of hours services are provided by London Central and West and contact details are communicated in a recorded message accessed by calling the practice when it is closed, or by accessing the information on the practice website.

Patients can book appointments up to three weeks in advance online, in person or by telephone. Extended hours services are available at three practices across the borough in the evening between 6.30pm-8.00pm or at the weekend. During the practice's opening hours, patients may request to book an appointment at one of these sites for an evening or weekend appointment. On Saturdays, at all sites, pre-bookable practice nurse appointments are available which can be booked through the practice. Information is available on the practice website regarding GP extended hours services open to all patients in the borough running 7 days a week in Hammersmith and Fulham.

This section is primarily information for the provider

## Enforcement actions

### 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. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p><b>Warning Notice</b></p> <p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and Treatment</p> <p><b>Care and treatment must be provided in a safe way for service users.</b></p> <p><b>How the regulation was not being met:</b></p> <ul style="list-style-type: none"><li>• The provider could not demonstrate they operated safeguarding systems and practices in a way that kept people safe.</li><li>• The provider did not operate safe practices regarding emergency medicines and equipment.</li><li>• The practice did not have complete fire safety systems in place.</li><li>• The practice did not have reliable systems in place to manage the practice premises safely.</li><li>• The provider could not demonstrate they operated safe recruitment systems within the practice.</li><li>• The provider could not demonstrate they have an effective system in place to safely manage infection prevention and control (IPC) practices.</li><li>• The provider could not demonstrate they operated cold chain practices in accordance with national guidance.</li></ul> <p><b>This was in breach of Regulation 12 (1) of the Health and Social Care Act.</b></p>

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p><b>Warning Notice</b></p>

This section is primarily information for the provider

## Enforcement actions

Treatment of disease, disorder or injury

How the regulation was not being met:

**There was a lack of systems and processes established**

**and operated effectively to ensure compliance with requirements to demonstrate good governance.**

In particular we found:

- The provider could not demonstrate they have an effective system in place for the safe management of medicines.
- The provider could not demonstrate they have an effective system in place to safely manage patients who had been referred via the urgent two week-wait system.
- The provider could not demonstrate they have an effective system in place to safely manage regarding patient safety alerts.
- The provider could not demonstrate they have a fail-safe system in place to safely manage and monitor cervical smear screening.
- The provider could not demonstrate they monitored prescription systems within the practice.
- The provider could not demonstrate that all staff had the skills, knowledge and experience to carry out their roles safely and effectively.
- The provider could not demonstrate that all staff had formal appraisals undertaken on a regular basis.
- The provider could not demonstrate they had oversight regarding multi-disciplinary meetings.
- The provider could not demonstrate they had a fail-safe process in place regarding significant events.

**This was in breach of Regulation 17 (1) of the Health and Social Care Act.**