

Parkview Practice

Inspection report

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Parkview Centre for Health & Wellbeing Parkview Practice Cranston Court 56 Bloemfontein Road London W12 7FG Tel: 020 3704 6055

Date of inspection visits: 11 and 19 March 2019 Date of publication: 11/06/2019

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	Requires improvement	
Are services safe?	Requires improvement	
Are services effective?	Requires improvement	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Requires improvement	

Overall summary

We carried out an announced comprehensive inspection at Parkview Practice on 11 and 19 March 2019 as part of our inspection programme.

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 **requires improvement** overall.

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

- •The practice did not have clear systems and processes to keep patients safe.
- •Receptionists had not been given guidance on identifying deteriorating or acutely unwell patients.
- •The practice did not learn and make improvements when things went wrong.

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

- •The practice was unable to show that staff had the skills, knowledge and experience to carry out their roles.
- •Some performance data was significantly below local and national averages.

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

•The practice did not have clear and effective processes for managing risks, issues and performance.

•We saw limited evidence of systems and processes for learning, continuous improvement and innovation.

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

- •Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- •The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

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

- •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.

(Please see the specific details on action required at the end of this report).

The areas where the provider should make improvements are:

- •Implement a systematic programme of clinical audit to measure and improve patient outcomes.
- •Improve the identification of carers to enable this group of patients to access the care and support they need.

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

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

Our inspection team

We completed our inspection over two visits. On the first occasion, the team was led by a CQC lead inspector, and

included a GP specialist advisor, and a practice nurse specialist advisor. On the second visit, the team was led by a lead CQC inspector, a second CQC inspector and a GP specialist advisor.

Background to Parkview Practice

Parkview Practice is situated at Parkview Centre for Health and Wellbeing, Cranston Court, 56 Bloemfontein Road, Shepherds Bush, London, W12 7FG. This is a purpose-built health and social care facility which is shared with three other GP practices. There are also a wide range of community services on site including district nursing, health visiting, community dental services and wellbeing and support services. The whole site building is managed by Community Partnerships Management Services which is part of NHS Property Services. The surgery has good transport links and there is a pharmacy located nearby.

We previously inspected this practice on two occasions. In February 2016, the practice was rated as requires improvement overall. We rated the five domains as safe, well led, and effective as requires improvement; responsive and caring as good and requires improvement across all patient population groups. This was specifically in relation to some aspects of risk management, quality monitoring and governance arrangements. We carried out a follow-up inspection in October 2017, the practice was rated as good across all domains and patient population groups.

The full comprehensive reports of the previous inspections can be found by selecting the 'all reports' link for Parkview Practice on our website at

The practice provides NHS primary care services to approximately 7367 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 current provider was registered with CQC in October 2017 to deliver the following Regulated Activities: diagnostic and screening procedures, maternity and midwifery services and treatment of disease, disorder or injury.

The provider is a single-handed female GP who registered with the CQC in October 2017. The practice employed two salaried male and one female GP, a locum practice nurse, a locum clinical pharmacist, two health care assistant and several administration staff. The practice is currently part of three wider networks of GP practices.

The practice population is in the second most deprived decile in England. There are higher than average numbers of patients in the 25 to 44 age range, with the number of people over the age of 65, 75 and 85 years lower than the national average. Information published by 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.

The practice reception is open Monday to Friday between 8.00am-8.00pm and offers an extended hours Weekend Plus service for all patients in Hammersmith and Fulham borough. Patients can book appointments in advance using online services, in person or by telephone.

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.

Pre-bookable practice nurse appointments are available, on Saturdays, which can be booked through the practice. Information regarding the Weekend Plus GP extended hours services is available on the practice website, which is open to all patients in the borough running 7 days a week in Hammersmith and Fulham.

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 Maternity and midwifery services Treatment of disease, disorder or injury	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment Care and treatment must be provided in a safe way for service users How the regulation was not being met: In particular we found: •There was limited evidence of safeguarding systems and processes. •The provider did not have effective arrangements in relation to staff immunisations and infection prevention and control, to ensure they were safe and in line with national guidance. •The provider did not ensure that persons providing care or treatment to service users have the qualifications, competence, skills and experience to do so safely. This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Treatment of disease, disorder or injury	Regulation 17 HSCA (RA) Regulations 2014 Good governance 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:

This section is primarily information for the provider

Requirement notices

- •Governance arrangements lacked clarity. The arrangements regarding practice policies, staff training, and risk assessments were not operated effectively, for example, policies were not always viewed on a regular basis.
- •The provider's process for learning from significant events and complaints did not lead to timely and effective improvement.
- •The follow up system to improve quality outcomes for patients was ineffective, for cervical cancer screening and childhood immunisations.

This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities