

Lilyville @ Parsons Green






Inspection report

5-7 Parsons Green
London
SW6 4UL
Tel: 02077364344
www.lilyvillesurgery.co.uk

Date of inspection visit: 19 December 2019
Date of publication: 28/02/2020

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.

Ratings

Overall rating for this location	Requires improvement 
Are services safe?	Good 
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 Lillyville at Parsons Green on 19 December 2019 as part of our inspection programme.

We inspected this practice on one previous occasion, on 19 April 2016, as The Lilyville Surgery, and the practice was rated as good overall, in all domains and in all patient population groups.

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 **good** for providing safe services because:

- The practice had systems and processes to keep patients safe.
- Receptionists had been given guidance on identifying deteriorating or acutely unwell patients. They were aware of actions to take in respect of such patients.
- The practice learnt and make improvements when things went wrong.

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

- There were some gaps in regular training for clinical and non-clinical staff.
- Some performance data was significantly below local and national averages.

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

- While the practice had a clear vision and that vision was supported by a credible strategy.
- Some governance arrangements were ineffective.
- 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.

These areas affected all population groups so we rated all population groups as **requires improvement**.

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 are:

- 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:

- The provider should consider reviewing its complaints system to ensure all relevant information is documented.
- The provider should consider implementing a system to ensure practice policies are regularly reviewed to ensure all relevant information is documented.
- The provider should consider additional strategies to enable them to identify carers within their patient community.
- The provider should continue to work towards improving achievement rates regarding childhood immunisations.
- The provider should continue to work towards improving achievement rates regarding cervical screening.

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	Good 
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

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

Background to Lilyville @ Parsons Green

Lilyville at Parsons Green is located at 5-7 Parsons Green, London, SW6 4UL. The surgery has tube and bus services and a pharmacy nearby.

The practice provides NHS services through a General Medical Services (GMS) contract to patients. The practice is part of the Hammersmith and Fulham Clinical Commissioning Group (CCG) and is part of the South Fulham Primary Care Network and Hammersmith and Fulham GP Federation.

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

The previous provider of this service was registered as The Lilyville Surgery. The full comprehensive report of this previous inspection can be found by selecting the 'all reports' link for on our website at .

We inspected this practice on one previous occasion, on 19 April 2016 as The Lilyville Surgery, and the practice was rated as good overall. We rated all domains and all patient population groups as good.

There are three GP partners in place who run the service at the practice. The practice, which is a training practice for GPs and nursing students, employs a clinical team

which includes five salaried GPs, a GP Registrar, a practice nurse, a healthcare assistant and a phlebotomist who work a combination of full and part time hours. The administration team is led by a practice manager and includes a reception manager, five receptionists and one administrator.

The practice was registered with the CQC in January 2019 to carry out the following regulated activities - diagnostic and screening procedures, treatment of disease, disorder or injury, maternity and midwifery services family planning.

The practice population is in the eighth decile, on the deprivation scale, in England. Public Health England rates the level of deprivation within the practice population group as eight, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the least.

The practice is open Monday to Friday between the core hours of 8am-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.

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

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 Family planning services Maternity and midwifery services Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <p>There was a lack of systems and processes established and operated effectively to ensure compliance with requirements to demonstrate good governance.</p> <p>In particular we found:</p> <ul style="list-style-type: none">• 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 a fail-safe system in place to safely manage and monitor cervical screening.• The provider could not demonstrate they have an effective system in place to monitor and manage patients' test results.• The provider could not demonstrate they have an effective system in place to safely monitor and manage infection prevention and control practices in particular staff immunisations and certified immunity.• The provider could not demonstrate they had an effective system in place to monitor and manage staff training. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>