

# North Fulham Surgery

## Inspection report

The Surgery  
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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.

# Overall summary

We carried out an announced focused inspection at North Fulham Surgery on 30 January 2020 as part of our inspection programme.

At this inspection we followed up on breaches of regulations identified at the previous inspection on 17 September 2019. Following the September 2019 inspection, the practice was rated as Inadequate overall, in safe, effective and well led domains and in all patient populations and placed in special measures. The practice was rated as good in the caring domain and requires improvement in responsive. We issued warning notices for breaches of Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance). The practice was required to address these concerns by 27 December 2019 and submitted an appropriate action plan prior to this date.

## **We did not review the ratings awarded to this practice at this inspection.**

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.

## **At this inspection we found:**

### **We found the provider had made some improvements in providing safe services regarding:**

- Safeguarding processes and DBS checks for clinical staff.
- The practice had appropriate systems in place for the safe management of medicines.
- A fail-safe system to monitor and manage patient safety alerts.
- The safe management of its prescriptions system.
- Cold chain in relation to the safe refrigeration of vaccines.
- The implementation and oversight of a safe effective system to monitor and manage emergency medicines and equipment.
- The instigation and oversight of a safe effective system to monitor and manage recruitment.
- 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 made improvements when things went wrong.

### **We found the provider had not made sufficient improvements in providing safe services regarding:**

- A fail-safe system to monitor and manage patients who had been referred via the urgent two week-wait referral system.
- A fail-safe system in place to safely manage and monitor cervical smear screening.
- Infection prevention and control practices.

### **We found the provider had made improvements for providing effective services regarding:**

- All staff had completed regular training regarding infection control, basic life support, fire safety and information governance.
- Clinical supervision for the practice nurse, clinical pharmacist and healthcare assistant.

### **We found the provider had not made sufficient improvements for providing effective services regarding:**

- Core specific training for the practice nurse and healthcare assistant.

### **We found the provider had made some improvements to concerns we found in the well led domain.**

- We will comprehensively review the effectiveness of the practice's action plans at the next inspection.

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

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- 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.

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

- Ensure its register of staff immunisations is completed in line with national guidance.

The service will remain in special measures until we have undertaken the next inspection and this will be reviewed at that time. This will be kept under review and if needed

# Overall summary

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 judgements are set out in the evidence table.

**Dr Rosie Benneyworth BM BS BMedSci MRCGP**

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

## Population group ratings

## 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 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 two previous occasions. At our inspection in September 2019 we rated the provider as being inadequate overall, inadequate in safe, well led and effective domains and in all patient population groups. Responsive and caring domains were rated as good.

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 .

There are three GP partners. The practice employs four salaried GP's, one retained 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

## 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	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Family planning services	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Maternity and midwifery services	Regulation 17 HSCA (RA) Regulations 2014 Good governance
Surgical procedures	<b>How the regulation was not being met:</b> 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: <ul style="list-style-type: none"><li>• 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.</li><li>• The provider could not demonstrate they have a fail-safe system in place to safely manage and monitor cervical smear screening.</li><li>• The provider could not demonstrate they have an effective system in place to safely manage infection prevention and control practices.</li><li>• The provider could not demonstrate they have an effective system in place regarding core specific training for the practice nurse.</li></ul>
Treatment of disease, disorder or injury	<b>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</b>