

BG Medical Clinic

Inspection report

48 North Street
Romford
RM1 1BH
Tel:

Date of inspection visit: 02 May 2023
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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

Not inspected

Are services safe?

Inspected but not rated



Overall summary

This was an un-rated inspection at this service.

We carried out an announced inspection at BG Medical Clinic under Section 60 of the Health and Social Care Act 2008 to follow-up on concerns we found during our previous inspection on 06 March 2023. Following our previous inspection, we undertook urgent civil enforcement action to suspend the service for a 9-weeks duration, by issuing a Section 31 notice under the Health and Social Care Act 2008.

We previously inspected the service on 19 January 2023 and imposed an urgent suspension of 6-weeks duration. In addition, after that inspection we issued warning notices regarding Regulations 12 and 17 and the service was placed in 'special measures'.

At this inspection we took a primary medical services (PMS) team to check whether the service had made sufficient improvements since we imposed the nine-weeks suspension under Section 31 of the Health and Social Care Act 2008.

We reviewed improvements made by the provider. Following this inspection on 02 May 2023, we decided to allow the urgent suspension to lapse when the suspension period had ended and to allow the provider to reopen the service.

Dr Andrean Damyanov is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Our key findings were:

- The provider had made improvements to their clinical IT system, to enable safe prescribing and patient reviews.
- The provider had made improvements to their system to safely manage patient safety alerts and follow-up patients who may be affected by them.
- The provider had a system in place to safely manage patients who had been prescribed medicines.
- The provider had a safe system in place to manage laboratory test results for patients who attended the service.
- The provider had previously made some improvements to enable them to safely manage recruitment, although this had not been entirely completed.
- The provider could demonstrate they had some oversight of their patient list.
- The provider had made improvements regarding their emergency equipment. We found they had an appropriate system in place to safely manage emergency medicines, in line with Resuscitation Council UK national guidelines.

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist adviser and a member of the CQC medicines team.

Background to BG Medical Clinic

BG Medical Clinic is located at 48 North Street, Romford, London, RM1 1BH, in the London borough of Havering. It is an independent provider of medical services and offers a full range of private general practice services predominantly to the Bulgarian community.

The provider is registered with the Care Quality Commission (CQC) to deliver the regulated activities: treatment of disease, disorder or injury, diagnostic and screening procedures and family planning

Services provided include: general practitioner services; cardiology; orthopaedic; ENT (ear, nose and throat); paediatric; endocrinology; general surgery and gynaecology consultation services; ultrasound scans; dressings; blood and other laboratory tests. Patients can be referred to other services for diagnostic imaging and specialist care.

At the time of inspection the service was suspended. However, normally the service is open Monday to Friday from 9am to 6pm; Saturday 9am to 4pm and Sunday 10am to 2pm. They do not offer out of hours care. The provider's website can be accessed at www.bgmedicalclinic.com

How we inspected this service

To get to the heart of patients' experiences of care and treatment, we always ask the following five questions:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

These questions therefore formed the framework for the areas we looked at during the inspection.

Are services safe?

Safety systems and processes

The service had some systems to keep people safe and safeguarded from abuse.

At our previous inspection on 06 March 2023 we found:

It was not possible to undertake searches and recall of patients due to the severe limitation of the provider's clinical system.

We saw the provider had made some improvements to their recruitment system since the inspection in January 2023, including:

We reviewed 8 staff records and found that all staff had completed recent DBS checks at the appropriate level.

We saw that all staff records contained photo ID and an employment contract.

We found that 1 out of 8 staff records contained appropriate professional references, to demonstrate satisfactory conduct in previous employment. The references in this staff records were dated 2007.

All staff records contained an application form or CV.

At this inspection on 02 May 2023 we found:

- The provider could demonstrate they had made sufficient improvements to their clinical IT system. It was now possible to undertake searches and recall patients in the provider's clinical system.
- At our previous inspection on 06 March 2023, the provider had previously made some improvements to enable them to safely manage recruitment, although this had not been entirely completed by the May inspection. For example, we saw the provider had created a new proforma reference request. We found two professional references remained outstanding for staff, the provider told us they were planning to follow this up.

Risks to patients

There were limited systems to assess, monitor and manage risks to patient safety.

At our previous inspection on 06 March 2023 we found:

- We found there was appropriate medical indemnity insurance in place for all clinical staff.
- The provider could not demonstrate they operated a safe system regarding the management of patients test results.
- The provider could not demonstrate they operated a safe system regarding the management of patient safety alerts.

At this inspection on 02 May 2023 we found:

Are services safe?

- The provider had made sufficient improvements regarding laboratory test results and results were integrated into the clinical records system. They could demonstrate they operated a spreadsheet where all future pathology requests would be logged, and a checklist was in place to follow up patients when test results have been reviewed. The provider had set up 'test patients' in their system to enable us to review the safety and efficacy of this.
- The provider told us they had scanned all patients' paper records onto their clinical IT system. We saw that a paper system remained in place when a patient registers and attends for an appointment. We found there were 1600 patient records held on the provider's clinical IT system.
- The provider had implemented a new system for receiving and logging patient safety alerts. They could identify patients who may be affected by a particular alert via their clinical system and had created a proforma to capture relevant alerts and evidence any learning from them.

Information to deliver safe care and treatment

Staff had made some improvements regarding the information they needed to deliver safe care and treatment to patients.

At our previous inspection on 06 March 2023 we found:

- The provider could not demonstrate that care records for patients who did not have access to NHS care, were managed in a safe and effective way.
- The updates the provider had told us would be made to the clinical system had not been completed.

At this inspection on 02 May 2023 we found:

- The provider could demonstrate they had made sufficient improvements to their clinical IT system to enable free text searches to be completed for patients, long term conditions and medicines.
- Following our inspection on 19 January 2023, the provider submitted written information to evidence their patient list size was approximately 8,500 patients.
- At this inspection on 02 May 2023, the provider told us they had scanned all patients' paper records onto their clinical IT system. However, we were aware there were paper records which did not appear to have been put on the system and we were not assured all patients were on the electronic system.

Safe and appropriate use of medicines

The service had made improvements to their systems for appropriate and safe handling of medicines.

At our previous inspection on 06 March 2023 we found:

- The provider could not demonstrate they had oversight of and managed prescribing of medicines in a safe way. This included maintaining an appropriate formulary of medicines.
- The provider could not demonstrate they had completed prescribing searches and audits for patients, due to the limited capability of the clinical IT system.
- We saw that some improvements had been made regarding emergency training and equipment.

At this inspection on 02 May 2023 we found:

Are services safe?

- Since our previous inspection on 06 March 2023, we found the provider had implemented a formulary/checklist of different groups of medicines relative to the medical speciality of each prescribing clinician. For example, we saw the dermatologist had permissions to prescribe medicines for dermatological conditions.
- The registered manager told us that they would not prescribe unlicensed medicines. For example, a medicine used to treat poly-cystic ovarian syndrome. We saw this was reflected in their prescribing policy.
- The provider could demonstrate they had made sufficient improvements to their clinical IT system to enable free text searches to be completed regarding medicines that are prescribed at the service.
- The provider had made improvements to their system to manage emergency medicines and held medicines that were in line with UK Resuscitation Council guidance. An appropriate system was in place to safely manage this.

Safe care and treatment

Management of long term conditions

At our previous inspection on 06 March 2023 we found:

- Although the provider had made a small improvement to their clinical system regarding the management of patients who may have a long term condition, they were unable to undertake effective searches and audits.
- The provider could demonstrate limited knowledge regarding the management of patients who may have a long-term condition, which was inconsistent with national guidance.

At this inspection on 02 May 2023 we found:

- To test the patient record system, we undertook a series of searches for particular conditions and medicines. We were satisfied with the result of these searches.

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning 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> <ul style="list-style-type: none">The provider did not have an effective system in place to manage electronic patient records to ensure they were complete, accurate and up to date. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>