

# The Belgrave Medical Centre

### **Inspection report**

13-13a Pimlico Road London SW1W 8NB Tel: 02077307030

Date of inspection visit: 6 July 2023 Date of publication: 21/09/2023

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 to people's needs?	Good	
Are services well-led?	Inadequate	

## Overall summary

We carried out an announced comprehensive inspection at The Belgrave Medical Centre on 6 July 2023. Overall, the practice is rated as requires improvement.

Safe - requires improvement

Effective - requires improvement

Caring - good

Responsive - good

Well-led - inadequate

During the inspection process, the practice highlighted efforts they are making to improve outcomes and treatment for their population. These had only recently been implemented so we were unable to assess the impact of these improvements. As such, the ratings for this inspection have not been impacted. However, we continue to monitor the data and where we see potential changes, we will follow these up with the practice.

#### Why we carried out this inspection

We carried out this inspection in response to concerns reported to us and because the new provider had yet to be rated since registration in November 2021. We reviewed all key questions as part of this inspection.

#### How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A site visit.

#### **Our findings**

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 found that:

## Overall summary

- The practice did not always provide care in a way that kept patients safe and protected them from avoidable harm as the practice did not have effective systems for the appropriate and safe use of medicines.
- People with some long-term conditions did not receive effective care and treatment that met their needs.
- Patients rated the practice in line with local and national averages for questions relating to the care they received.
- Patients could access care and treatment in a timely way.
- The overall governance arrangements were inadequate as we identified concerns which did not promote the delivery of high-quality, person-centred care.

We found a breach of regulations. The provider **must**:

• 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:

- Take action to ensure the process of monitoring blank prescriptions is sustained.
- Improve the risk assessment process to determine if staff are required to undertake a DBS check.
- Improve managerial oversight of staff mandatory training.
- Improve uptake of cervical screening for the benefit of eligible patients.
- Take action to improve communication between senior leaders.
- Continue to establish an active Patient Participation Group (PPG).

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

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 who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

### Background to The Belgrave Medical Centre

The Belgrave Medical Centre is located in Central London at:

13-13a Pimlico Road

London

SW1W8NB

The provider is registered with CQC to deliver the following Regulated Activities; Diagnostic and screening procedures, Maternity and midwifery services and Treatment of disease, disorder or injury.

The practice is situated within the borough of Westminster and is part of the North West London

Integrated Care System (ICS). The practice delivers General Medical Services (GMS) to a patient population of about 12,000. This is part of a contract held with NHS England.

The practice is part of a wider network of GP practices known as South Westminster Primary Care Network.

Information published by Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the sixth decile (six of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 71% White, 11% Asian, 7% Black, 5% Mixed, and 6% Other.

The practice is led by two female GP partners. The partners are supported at the practice by a practice manager, two salaried GPs (male and female), three long-term GP locums (male and female), a clinical pharmacist, two practice nurses, two health care assistants, an assistant practice manager and a small team of reception/administration staff.

The practice is open between 8.00am and 7.30pm on Monday, 8.00am and 7.00pm Tuesday to Thursday, 8.00am to 6.30pm on Friday, and 9.00am to 2.00pm on Saturday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Extended access is provided locally at a hub location where late evening and weekend appointments are available.

## **Enforcement actions**

## Action we have told the provider to take

The table below shows the legal requirements that were not being met.

Regulated activity	Regulation
Regulated activity  Diagnostic and screening procedures Maternity and midwifery services Treatment of disease, disorder or injury	Regulation  Regulation 17 HSCA (RA) Regulations 2014 Good governance  There were ineffective systems in place to assess, monitor and mitigate the risks to patients and staff and to ensure compliance with requirements to demonstrate good governance. In particular:  The provider failed to have effective systems and processes to monitor and manage patients to ensure compliance with national guidelines. For example:  • The practice did not always have safe or effective processes for monitoring patients' health in relation to the prescribing of the high risk medicines ACE inhibitors and ARB drugs, contrary to national guidelines.  • Patients prescribed a medication for neuropathic pain were overdue medication reviews, contrary to national guidelines.  • There was inconsistent follow-up of patients after an acute exacerbation of asthma, contrary to national guidelines.  • There was inconsistent management and monitoring of patients with hypothyroidism, contrary to national guidelines.  • Patients with chronic kidney disease had not been coded appropriately.  • The practice did not have an effective system in place for acting on safety alerts.  • Clinicians were unable to access DNACPR forms and there was inconsistent documenting of DNACPR decisions within medical records.  • The system for checking that medical supplies were within their expiry date was ineffective as we found out of date test tubes within clinical rooms.  • The practice had not assessed fire safety risks.
	• The practice had not assessed fire safety risks.  This was in breach of Regulation 17 (1) (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.