

Dr Kelly & Associates - London Wall

Inspection report

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London
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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

Good



Are services safe?

Good



Overall summary

This service is rated as Good overall.

The service was previously inspected in May 2019 and was rated Good overall. They were rated as Good in Effective, Caring, Responsive and Well-led. However, it was rated as Requires Improvement in Safe.

The key question reviewed in this inspection is now rated as follows:

Are services Safe? – Good

We carried out this announced focused inspection on 14 October 2020 to follow up on breaches we had identified at the last inspection. We had asked the provider to make improvements regarding:

- The provider could not confirm that staff who carried out chaperone duties had enhanced DBS checks completed.
- Full recruitment information was not available to demonstrate that safe recruitment practices had been carried out.
- Prescriptions for controlled drugs were not securely monitored.

We checked these areas as part of this focused inspection and found they had been resolved.

We found that:

- The provider had reviewed their procedure to ensure that all staff who have patient facing roles, which includes chaperones, were now required to have an Enhanced DBS check.
- We saw evidence to confirm all the appropriate recruitment information for all their current staff was now kept on site
- The practice manager drafted a new policy and set up a log for monitoring the use of controlled drugs prescriptions

There were a number of other issues from the previous report that we had said the provider should address. These were:

- Review the service quality improvement programme with a view to establishing an effective clinical audit process to review and improve patient outcomes.
- Review the process for recording and maintaining information related to Disclosure and Barring (DBS) checks carried out to confirm that appropriate DBS checks have been completed.
- Consider reviewing the performance of clinical staff to include a review of consultations, prescribing and referral decisions.

The provider reported that these had been addressed and provided evidence to support this. However, in the absence of an on-site inspection CQC were unable to review all actions. These matters do not affect the rating.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

The inspection was carried remotely by a CQC lead inspector.

Background to Dr Kelly & Associates - London Wall

Dr Kelly & Associates – London Wall became part of Doctorcall Ltd (the provider) in July 2017, upon the retirement of the previous registered provider. It has operated from premises at 65 London Wall, London, EC2M 5TU since 1989. The service is registered with the Care Quality Commission to provide the regulated activities: Diagnostic and screening procedures and Treatment of disease, disorder or injury. It provides healthcare to adults over 18 years of age. Services are offered to individual patients who pay for their healthcare, but most of the service (approximately 80%) is provided under corporate healthcare and employment arrangements or medical insurance. There is a focus on providing screening services and treatment for acute

issues, rather than long-term conditions such as diabetes.

The provider offers consultations, travel vaccinations, sexual health services and health screening services. There are arrangements in place for patients to be referred by the provider to other services for diagnostic imaging and specialist care. The provider also operates from another location in London and one in Manchester. It offers a 24-hour doctor private consultation service to patients.

The premises at London Wall are leased. The provider's offices and four consultation rooms are on the third floor, accessible by lifts. There are good transport links nearby. The clinic is open from Monday to Friday with consultations normally available between 8.00 am and 6.00 pm. Consultations are 15 minutes long and are usually by appointment, although walk-in patients can often be accommodated.

The clinic currently operates with two doctors, one female and one male, who work three and five days a week respectively. The doctors have the appropriate General Medical Council registration. The doctors are supported by an administrative team of three staff, a practice manager, and two

administrators who have combined roles as a receptionist and a secretary.

Are services safe?

We rated safe as Good because:

We had previously carried out an announced comprehensive inspection on 16 May 2019. At the time of that inspection the service was not providing Safe services. We found the following:

- The provider could not confirm that staff who carried out chaperone duties had enhanced DBS checks completed.
- Full recruitment information was not available to demonstrate that safe recruitment practices had been carried out.
- Prescriptions for controlled drugs were not securely monitored.

At the time of the inspection on 14 October 2020, these issues had been addressed.

Safety systems and processes

The service had systems to keep people safe.

- The provider carried out staff checks at the time of recruitment and on an ongoing basis where appropriate. Disclosure and Barring Service (DBS) checks were undertaken where required. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable). The provider sent evidence to confirm that all of their staff who have patient facing roles, which includes chaperones, were now required to have an Enhanced DBS check. They said they had also changed their process and updated their procedures to include retaining a copy of all DBS certificates.
- The provider told us following our last inspection they had reviewed and updated their Recruitment Policy. They sent us a copy of their policy and evidence that they had all the appropriate information on site for all their current staff. This included checking references, work history, identity and DBS documents for all staff.
- At our previous inspection in May 2019 we found the service kept prescription stationery securely but did not have systems in place to monitor controlled drugs prescription stationery received and issued at the service. The practice manager set up a log for monitoring the use of controlled drugs prescriptions. A copy of the log was forwarded to us following the inspection. The provider has now sent us a copy of their new policy and informed us that all staff had been made aware of the new procedure. We saw completed copies of the log to evidence that it was now being used.