

Swiss Cottage Diet Clinic

Quality Report

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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.

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Overall summary

Letter from the Chief Inspector of General Practice

We carried out an unannounced inspection at Swiss Cottage Diet Clinic on 30 July 2015 to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008 in relation to the safe handling of medicines in the service.

'CQC inspected the clinic on 15 July 2014 and asked the provider to make improvements regarding the management of medicines. We checked these areas as part of this focused inspection and found this had been resolved.

The centre provides individualised weight loss programmes, under medical supervision. It is open Monday to Saturday 11:30am to 6pm, and closed on Wednesdays.

Our key findings in the areas we inspected were as follows:

- People were given health checks, including calculating their BMI when they first attended the clinic. People were only treated if their BMI was in the acceptable higher range.
- Medicines were stored securely and handled safely

Summary of findings

- Bendrofluazide was no longer prescribed or stocked by the clinic.

Professor Steve Field CBE FRCP FFPH FRCGP
Chief Inspector of General Practice

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services safe?

We found that this practice was providing safe care in accordance with the relevant regulations.

Patients were assessed for their suitability for treatment and their BMI (body mass index) calculated. The provider had a policy for the management of medicines in the service and medicines were stored safely. Bendrofluazide, a medicine used to control water retention which should not be prescribed for weight loss, was no longer prescribed or stocked by the clinic.

Are services effective?

This was a responsive inspection where we looked at a specific area of safety only.

Are services caring?

This was a responsive inspection where we looked at a specific area of safety only.

Are services responsive to people's needs?

This was a responsive inspection where we looked at a specific area of safety only.

Are services well-led?

This was a responsive inspection where we looked at a specific area of safety only.

Summary of findings

Swiss Cottage Diet Clinic

Detailed findings

Background to Swiss Cottage Diet Clinic

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the service was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

A CQC Pharmacist Inspector carried out an unannounced inspection on 28 July 2015 .

We talked to people using the service, interviewed staff, observed practice, and reviewed documents including the medicines policy and 17 patient records.

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?

However this inspection was a carried out in response to concerns that had been raised with us, therefore we only looked at the management of medicines within the question 'Is it safe?'.

Are services safe?

Our findings

Medicines

The registered manager told us, and records showed us, that appetite suppressants were prescribed to patients at the clinic. These medicines are not currently recommended for the treatment and management of obesity by the National Institute for Health and Clinical Excellence (NICE) or the Royal College of Physicians and the British National Formulary states that these medicines are central stimulants that are not recommended for the treatment of obesity. During our inspection on 15 July 2015 we saw that bendroflumethazide (a diuretic medicine used to control water retention) was stocked at the clinic. The Royal College of Physicians states that diuretics are not treatments for obesity and should not be used to achieve weight loss. During this inspection we saw that bendrofluazide was no longer stocked or prescribed.

Prior to treatment a person's identification was checked and the form of identification recorded on the medical record card. The sample of 17 records we reviewed showed nobody under the age of 18 was prescribed appetite suppressants. We checked 17 people's records and saw that they had health checks on their first visit and information was recorded about relevant concerns. People's medical history, weight and blood pressure were

taken at their initial visit. Their body mass index (BMI) was calculated and target weights set and recorded. We saw that people normally took breaks from the prescribed medicines at three or four month intervals.

The registered manager told us that the majority of people did not want their GP to be informed and we saw this recorded in their notes. We saw that each person who was receiving treatment had signed a consent form.

We checked how medicines were stored, packaged and supplied to people. We saw medicines were stored securely in a lockable cupboard secured to the wall, with access limited to only the doctor.

Medicines were ordered, received and packaged by the service. We were told that medicines were delivered directly from the pharmaceutical company to the possession of the registered doctor. Receipts of stock were recorded together with batch numbers and expiry dates and orders were signed and dated by the registered doctor.

Medicines were supplied to people in labelled bottles, on which the doctor added the name of the person and date of dispensing when a supply was made. The doctor made a corresponding record on the patients' medical card which enabled an audit of the medicines supplied to be completed.

Are services effective?

(for example, treatment is effective)

Our findings

This was a responsive inspection where we looked at a specific area of safety only.

Are services caring?

Our findings

This was a responsive inspection where we looked at a specific area of safety only.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

This was a responsive inspection where we looked at a specific area of safety only.

Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

Our findings

This was a responsive inspection where we looked at a specific area of safety only.