

Lister Medical Group LTD

# Edgbaston Private Medical Practice

## Inspection report

44 George Road  
Edgbaston  
Birmingham  
B15 1PL  
Tel: 0121 4549535  
Website: [www.epmpractice.co.uk](http://www.epmpractice.co.uk)

Date of inspection visit: 2 October 2018  
Date of publication: 29/10/2018

## Overall summary

We carried out an announced focussed inspection at Edgbaston Private Medical Practice on 2 October 2018. This was to follow up on progress made by the practice since our previous inspection on 22 November 2017 and ensure legal requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 were being met.

### **Our findings were:**

#### **Are services safe?**

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

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 practice was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

CQC inspected the practice on 22 November 2017 and asked the provider to make improvements regarding the systems and processes to assess, monitor and mitigate

the risks relating to the health, safety and welfare of service users and others who may be at risk. We checked these areas as part of this focussed inspection and found the provider had made the necessary improvements.

The practice provides a private general medical service to adults and children. Services include private GP consultations, child immunisations, travel vaccinations, contraceptive and sexual health services, health screening and lifestyle management.

This service is registered with CQC under the Health and Social Care Act 2008 in respect of some but not all, of the services it provides. There are some exemptions from regulation by CQC which relate to particular types of service and these are set out in Schedule 2 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Non-invasive cosmetic procedures provided to patients are exempt by law from CQC regulation. Therefore, at Edgbaston Private Medical Practice, we were only able to inspect the services which are not part of their aesthetics service.

The principal GP is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like

# Summary of findings

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 was able to demonstrate clearly the action they had taken to improve the provision of safe care.
- Systems to help keep patients safe and safeguarded from abuse had been strengthened.
- The provider had improved the management of risks. Comprehensive risk assessments had been undertaken in relation to fire safety and legionella.
- Effective monitoring arrangements for infection prevention and control, the management of vaccines and staff training had been put in place.
- The provider had strengthened recruitment arrangements. Timely checks were made of a person's suitability to work for the service.
- Emergency medicines had been reviewed and were in line with recommended guidance.
- The practice had reviewed accessible information for patients and had produced easy read information for patients who may benefit from it.
- Record keeping in relation to staff meetings had been improved to ensure key issues were discussed as standing agenda items and for the follow up of matters arising.

# Edgbaston Private Medical Practice

## Detailed findings

### Background to this inspection

Edgbaston Private Medical Practice registered with CQC under the provider organisation Lister Medical Group Ltd in June 2016.

The practice is located in a converted house that has been adapted to provide primary medical services in the Edgbaston area of Birmingham. There is also a branch surgery located in the Birmingham City Centre at Imperial & Whitehall Chambers, First Floor, 23 Colmore Row, Birmingham B3 2BS. We did not visit the branch surgery at this inspection.

The practice is open for appointments six days a week between 9am and 6pm on Mondays, Tuesdays, Wednesdays and Fridays. On Thursdays between 9am and 7pm and on a Saturday between 9am and 1pm. Appointments can be booked in person, by telephone or by email.

The practice is not required to offer an out of hours service. Patients who need medical assistance out of corporate operating hours are requested to seek assistance from alternative services such as the NHS 111 telephone service or accident and emergency services.

The practice team consists of a principal GP, two associate GPs, a practice manager and a team of administrative staff.

The inspection was led by a CQC inspector who had access to advice from a specialist advisor.

We reviewed information we held about the service to support the planning of the inspection. We carried out a site visit and spoke with the principal GP and registered manager about action taken since our previous inspection. We made observations and reviewed documents made available to us.

# Are services safe?

## Our findings

**At our previous inspection on 22 November 2017, we found the practice was not providing safe care in accordance with the relevant regulations. Risks relating to fire safety, infection control, the control of substances hazardous to health (COSHH) and legionella were not adequately assessed and mitigated against. We also found areas where the provider should make improvements including systems for providing assurance that persons accompanying a child had parental responsibility and for ensuring Disclosure and Barring Services (DBS) checks were appropriately completed.**

**At this inspection we found the practice had made the necessary improvements and was providing safe care in accordance with the relevant regulations.**

### Safety systems and processes

The provider had strengthened their systems for keeping patients safe and safeguarded from abuse.

- The provider had introduced a system to alert staff if a patient was at risk of abuse or vulnerable. They had sought advice and identified a process for assuring themselves that an adult accompanying a child had parental authority.
- We saw that recruitment processes for new clinical staff included DBS checks prior to them commencing work at the practice. The provider had also retrospectively carried out DBS checks on clinical staff where their DBS had been from previous employment.
- Systems for managing infection prevention and control had significantly been improved. Cleaning specifications had been updated to include clinical equipment which

were signed once completed. There was a designated member of staff who undertook cleaning of clinical equipment. They confirmed they had been given training and guidance. The practice had introduced a comprehensive infection control audit and had identified that this would take place on an annual basis. The provider discussed with us action taken as a result of the most current infection control audit.

- We saw that risk assessments in relation to fire safety and legionella had been updated. (Legionella is a bacterium which can contaminate water systems in buildings). These were more comprehensive, included expert guidance and clearly showed how risks had been assessed. There was a schedule in place for when the risk assessments required review. Safety sheets were now in place and accessible to staff in relation to COSHH for products used in the premises. The provider had also introduced a three monthly health and safety audit to identify any areas requiring immediate action.

### Risks to patients

The provider had reviewed the availability of emergency medicines in line with recommended guidance to ensure these were available when needed.

### Safe and appropriate use of medicines

The provider had reviewed and improved the systems for managing the cold chain. The cold chain is a system for storing certain medicines such as vaccines at the required temperature to maintain their effectiveness. The practice had implemented a system for the daily recording of the medicines fridge temperatures in line with guidance. This helped to ensure the cold chain was maintained and to allow for prompt action to be taken should the temperatures fall outside the manufacturers' recommended range. We saw records had been maintained which showed that this was being done.