

AMC Health care Ltd

Albany Medical Centre

Inspection report

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Overall summary

We carried out an unannounced inspection at Albany Medical Centre on 28 July 2015. This inspection was in response to information we had received and 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.

The centre provides slimming advice and prescribed medicines to support weight reduction. It is open Tuesdays and Friday 10:30am to 7pm and Saturdays 10am to 1pm.

Mrs Linda Brookes 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 practice/service is run.

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

We identified regulations that were not being met and the provider must ensure:

- Medicines must only be available to the doctor and must not be handed to patients when the doctor is not present or transported by members of staff.
- Medicines labels must include the person's name and the date they were dispensed.

We found that this practice was not providing safe care in accordance with the relevant regulations.

You can see full details of the regulations not being met at the end of this report.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We found that this practice was not providing safe care in accordance with the relevant regulations. We have told the provider to take action (see full details of this action in the Requirement Notices at the end of this report).

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. However medicines were not always in the personal control of the doctor and centre staff were able to hand over prescribed medicines which are classified as controlled drugs without the doctor present. We were also told that the labels for these medicines did not include important information. The patient's name and the date of dispensing were not added to the labels.

This was a focussed inspection where we looked at a specific area of this key question. We did not review the other four key questions, which are always asked at comprehensive inspections.

Albany Medical Centre

Detailed findings

Background to this inspection

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 20 patient records.

This inspection was 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?'.

Is the service safe?

Our findings

Medicines management

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. The British National Formulary states that these medicines are central stimulants that are not recommended for the treatment of obesity.

Prior to treatment a person's identification was checked and the form of identification recorded on the medical record card. The sample of 20 records we reviewed showed there were no patients under the age of 18 was prescribed appetite suppressants.

We checked 20 patient 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 patients normally took breaks from the prescribed medicines at three or four month intervals which is in line with recommendations.

We saw patients were only treated if their BMI was above 27 and records showed people were refused treatment if their BMI was less than 27 or they had other health issues which would contraindicate the use of these medicines.

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

form which told them that the medicines that were prescribed, phentermine and diethylpropion, were not recommended for the treatment of obesity in published professional guidance.

We checked how medicines were stored, packaged and supplied to people. We saw medicines were stored securely but the registered manager, who was not a healthcare professional, had access to them when a doctor was not on the premises. Evidence from the medicines stock check showed staff were transferring stock to other locations. On the day of the inspection we saw a member of staff had removed a quantity of schedule 3 controlled drugs. The registered manager told us they were being taken to another clinic. The doctor must be in personal control of these medicines. The registered manager told us medicines were normally only supplied to patients at the doctor's clinics on Tuesday, Friday and Saturday each week. Evidence from appointment records and the doctor's medicine log from each clinic confirmed this, however we were told one patient was coming to collect their medicines on the day of the inspection because they did not have the funds to pay for their medicines when they saw the doctor at the previous week's clinic. The doctor was on annual leave on the day of inspection, therefore would not be present to supervise the medicines collection.

We were told by the registered manager that medicines were being supplied to patients without their name or the date of dispensing on the label. Medicines were supplied to patients labelled with medicine name, batch number, expiry date and instructions for use. There was no space to include the patient's name or dispensing date and the registered manager confirmed these details were never added to the label. The provider's medicines policy stated both a patient's name and the dispensing date must be added before a supply of medicine dispensed. Dispensed medicines must be labelled with these details.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where legal requirements were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

Regulated activity	Regulation
Services in slimming clinics	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>People who use services were not protected against the risks associated with unsafe management of medicines because the provider did not comply with the labelling requirements for dispensed medicines as required under the Human Medicines Regulations 2012 (schedule 23) and staff had access to schedule 3 controlled drugs that were not legally authorised to do so. Regulation 12 (2) (g).</p>