

Variation to Registration Inspection Report 30 March 2017



Ulster Independent Clinic

Type of service: Independent Hospital – Surgical Services

Address: 245 Stranmillis Road, Belfast, BT9 5JH

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**Inspectors: Winnie Maguire
Emily Campbell**

1.0 Summary

An announced inspection of Ulster Independent Clinic took place on 30 March 2017 from 9.50 to 11.50.

An application had been made by Ms Diane Graham, registered person, on behalf of the Ulster Independent Clinic on 27 November 2016 for variation to registration in respect of a significant change to the premises consisting of the refurbishment of patient rooms and bathrooms on level 2 of the hospital including the reduction of seven patient rooms to five.

This inspection was underpinned by The Independent Health Care Regulations (Northern Ireland) 2005, The Regulation and Improvement Authority (Independent Health Care) (Fees and Frequency of Inspections) (Amendment) Regulations (Northern Ireland) 2011 and The Minimum Care Standards for Independent Healthcare Establishments (July 2014).

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Ms Diane Graham, registered person, and Mr Sam Dunlop, estates manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

1.2 Actions/enforcement taken following the most recent care inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the most recent inspection on 20-21 September 2016.

2.0 Service details

Registered organisation/registered person: Ulster Independent Clinic Ms Diane Graham	Registered manager: Ms Diane Graham
Person in charge of the hospital at the time of inspection: Ms Diane Graham	Date manager registered: 11 April 2007
Categories of care: Acute hospitals (with overnight beds)AH Acute Hospital (Day Surgery) AH(DS) Prescribed Technologies, Endoscopy PT(E) Prescribed Technologies, Laser PT(L) Private doctor (PD)	Number of registered places: 70

3.0 Methods/processes

During the inspection the inspectors met with Ms Diane Graham, registered person, Mr Sam Dunlop, estates manager, a ward sister and very briefly spoke with a patient and a relative.

A review of the premises was undertaken and a particular focus was given to the refurbished patient rooms and bathrooms.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 20-21 September 2016

The most recent inspection of the hospital was an announced care inspection. The completed QIP was returned and approved by the care inspector. .

4.2 Review of requirements and recommendations from the last care inspection dated 20-21 September 2016

Last care inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 48.12 Stated: First time	Clinical authorised users of the laser should be invited to undertake a core of knowledge update.	Met
	Action taken as confirmed during the inspection: Ms Graham confirmed advice had been sought from the hospital's laser protection advisor (LPA) in relation to the provision of core of knowledge training. The LPA had forwarded details of an on-line course which all clinical authorised users have been asked to complete. Ms Graham confirmed the completion of this course will be monitored.	
Recommendation 2 Ref: Standard 22.2 Stated: First time	A variation of registration application should be submitted for the renovation work on level two.	Met
	Action taken as confirmed during the inspection: A variation of registration application had been submitted to RQIA in November 2016 and the inspection on 30 March 2017 was conducted in relation to that variation of registration application.	

Review of the premises

A brief tour of the hospital was conducted with special attention given to the refurbished patient rooms and bathrooms on level 2. Four of the five refurbished patient rooms were reviewed. A patient was asleep in the fifth room and it was not deemed appropriate to disturb the patient. The refurbished facilities were found to be of a high standard with inbuilt infection prevention and control features in place. A patient and a relative were very complimentary about the environment describing it as bright, peaceful and very comfortable.

It was confirmed there is a suitable nurse-call system in place and staff have been instructed on its use. The refurbished area has been included in the hospital's ongoing infection prevention control (IPC) audits.

The estates manager was requested to forward a range of estates documentation including:-

- fire risk assessment.
- legionella risk assessment
- building control certificate
- fixed wiring electrical installation
- ventilation and air conditioning certificate
- medical gases certificate

The RQIA received the above documentation following inspection and the RQIA estates team are reviewing the information submitted and will liaise with Mr Sam Dunlop if necessary.

4.3 Inspection findings

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
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5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the registered provider from their responsibility for maintaining compliance with the regulations and standards.



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