



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No: 20631
Establishment ID No: 10637
Name of Establishment: Fitzwilliam Clinic, Belfast
Date of Inspection: 27 August 2014
Inspector's Names: K. Monaghan

1.0 GENERAL INFORMATION

Name of Hospital:	Fitzwilliam Clinic
Address:	70-72 Lisburn Road Belfast BT9 6AF
Telephone Number:	028 90 323 888
Registered Responsible Person:	Mr. James Small, Responsible Person 1, Mr. John Sinclair, Responsible Person 2 and Mr. James Kennedy, Responsible Person 3, Fitzwilliam Partnership
Registered Manager:	Mrs. Sheila Jordan
Person in Charge of the Clinic at the time of Inspection:	Mrs. Sheila Jordan, Registered Manager
Other person(s) present during inspection:	N/A
Type of establishment:	Independent Hospital
Categories of Care:	PD, PT(IL) & AH(DS)
Number of Registered Places:	N/A
Conditions of Registration:	N/A
Date of previous inspection:	28 June 2012
Date and time of inspection:	27 August 2014 (10:10am. – 11:10am.)
Inspector:	Kieran Monaghan, Estates Officer, Regulation and Quality Improvement Authority (RQIA)

2.0 INTRODUCTION

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect independent health care establishments.

This is a report of an announced inspection to assess the quality of the premises and grounds in which the service is being provided including the upkeep of the building and engineering services and equipment. The report details the extent to which the standards measured during inspection were met.

3.0 INSPECTION BACKGROUND

Fitzwilliam Clinic no longer offers laser services. The Registered Persons made a variation application to RQIA (Ref. VA000004) in March 2014 to convert the existing laser procedure room on the first floor into a general purpose treatment room to be used for minor clinical procedures.

The conversion works which included upgrading the finishes and the installation of a new filtered mechanical ventilation system were subsequently completed and the new treatment room was ready for use. This Estates inspection was carried out to review this new treatment room before it is to be used for the purposes of the clinic.

4.0 INSPECTION PURPOSE

The purpose of this inspection was to establish the level of compliance with current legislative requirements and the Minimum Care Standards for Independent Healthcare Establishments issued by the Department of Health, Social Services and Public Safety (DHSSPS) in July 2014. This was achieved through a process of evaluation of the available evidence.

The Regulation and Quality Improvement Authority aims to use inspection to support providers in improving the quality of services, rather than only seeking compliance with regulations and standard.

5.0 INSPECTION METHOD/PROCESS

Specific methods/processes used in this inspection include the following:

1. Discussions with Mrs. Sheila Jordan, Registered Manager.
2. A review of the new treatment room on the first floor of the premises.
3. Evaluation and feedback

Any other information received by RQIA about this regulated establishment has also been considered by the Inspectors in preparing for this inspection.

6.0 INSPECTION CONSULTATION PROCESS

During the course of the inspection, the Inspector spoke to Mrs. Sheila Jordan, Registered Manager.

7.0 INSPECTION FOCUS

This inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Minimum Care Standards for Independent Healthcare Establishments, July 2014. This inspection focused specifically on the new treatment room on the first floor (previously the laser procedure room).

Standards inspected:

- Standard 22 The premises and grounds are safe, well-maintained and suitable for their stated purpose.
- Standard 24 Fire safety precautions are in place that reduce the risk of fire and protect patients and clients, staff and visitors in the event of fire.

8.0 INSPECTION SUMMARY

The new treatment room had been completed to a high standard. The walls had been lined with impervious sheeting, a new ceiling had been installed and other works such as the installation of a new ceiling light had also been completed. Following this Inspection of the Fitzwilliam Clinic in Belfast on 27 August 2014 no improvements are required to comply with The DHSSPS Minimum Care Standards for Independent Healthcare Establishments, July 2014 and the criteria outlined in the following minimum standards:

- Standard 22 Premises And Grounds
- Standard 24 Fire safety

The overall outcome of this Estates inspection was that the variation application could be granted from a premises point of view.

The Inspector would like to acknowledge the assistance of Mrs. Sheila Jordan, Registered Manager during the inspection process.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from previous inspection 28 June 2012

9.1.1 This Estates inspection focused on the new treatment room on the first floor. The recommendations and requirements from previous Estates inspection to this establishment that was completed on 28 June 2012 were not therefore reviewed during this inspection.

9.2 Standard 22: Premises and Grounds

The premises and grounds are safe, well-maintained and suitable for their stated purpose

9.2.1 It is good to report that the new treatment room had been completed to a high standard. The Registered Persons had referenced the guidance contained in the 'Journal of Hospital Infection' in relation to guidelines on the facilities required for minor surgical procedures and minimal access interventions in the development of the new treatment room. In particular new ventilation arrangements had been put in place to ensure that the minimum air change rate per hour achieves and exceeds 15. This is to be commended.

9.2 Standard 22: Premises and Grounds Continued

9.2.2 An inspection of the new treatment room was completed by an Independent Infection Control Consultant on 08 April 2014. The report for this inspection was available for review during this Estates inspection. This report indicated that overall the new treatment room was satisfactory from an infection control point of view. This report also included a small number of recommendations in line with best infection control practice. It is good to report that subsequent to this Estates inspection, RQIA received confirmation from the Registered Manager that these issues had been addressed.

9.2.3 The documentation for the alterations to the fixed electrical wiring installation and the new ventilation installation were available for review during this Estates inspection.

9.2.4 Although not connected with the new treatment room it was noted during this Estates inspection that one of the connection units for the external lighting in the front car park required a new cover. Subsequent to this Estates inspection RQIA received confirmation from the clinic that this issue had been addressed.

9.2.5 No issues were identified for attention in relation to this standard during this Estates inspection. This is to be commended.

9.0 INSPECTION FINDINGS CONTINUED

9.3 Standard 24: Fire safety

Fire safety precautions are in place that reduce the risk of fire and protect patients and clients, staff and visitors in the event of fire

- 9.3.1 It is good to report that the Fire Safety Advisor for the clinic was consulted in relation to the fire safety protection measures for the new treatment room. A letter of confirmation from the Fire Safety Advisor was available for review during this Estates inspection. The documentation for the alterations to the emergency lights and the fire detection and alarm system were also available for review during this Estates inspection. This is to be commended.
- 9.3.2 No issues were identified for attention in relation to this standard during this Estates inspection. This is to be commended.

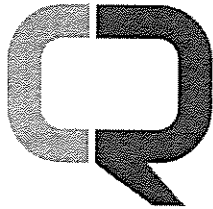
10.0 INSPECTION QUALITY IMPROVEMENT PLAN

As no issues were identified for attention during this Estates inspection, a Quality Improvement Plan was not required.

11.0 INSPECTION ENQUIRIES

Enquiries relating to this report should be addressed to:

**Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT**



The Regulation and
Quality Improvement
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REGULATION AND QUALITY
08 DEC 2014
IMPROVEMENT AUTHORITY

No requirements or recommendations resulted from the announced inspection of Fitzwilliam Clinic which was undertaken on 27 August 2014 and I agree with the content of the report. Return this QIP to estates@rgia.org.uk.

Please provide any additional comments or observations you may wish to make below:

NAME OF REGISTERED MANAGER COMPLETING	SHEILA JORDAN
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING	JAMES SMALL

Approved by:	Date



Quality Improvement Plan Sign Off Sheet for Estates Inspectors

Name of Home	Fitzwilliam Clinic, Belfast RQIA ID 10637
Date of Inspection	27 August 2014
Estates Inspector	Kieran Monaghan

QIP Position Based on Comments from Registered Persons			QIP Closed		Estates Officer	Date
			Yes	No		
A.	No requirements or recommendations arising from this Estates inspection.	√	√	–	K. Monaghan	15 December 2014
B.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.	–	–	–	–	–
C.	Clarification or follow up required on some items.	–	–	–	–	–

Announced Estates Inspection IN020631 - 27 August 2014 – QIP sign off sheet

Informing and Improving Health and Social Care