

Healthcare 2000 (NI) Ltd RQIA ID: 11165 62a Bloomfield Avenue Belfast BT5 5AD

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Inspector: Winnie Maguire Inspection ID: IN21420

Announced Inspection of Healthcare 2000 (NI) Ltd

15 June 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced inspection took place on 15 June 2015 from 09.50 to 12.25. Overall on the day of inspection the standards inspected were found to be generally safe, effective and compassionate. One area for improvement was identified and is set out in the Quality Improvement Plan (QIP) within this report. This inspection was underpinned by The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, 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 Department of Health, Social Services and Public Safety's (DHSPPS) Minimum Care Standards for Healthcare Establishments.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

1.2 Actions/Enforcement Resulting from this Inspection

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

1.3 Inspection Outcome

This inspection resulted in one recommendation being made. Findings of the inspection were discussed with Paul Swift, registered provider, and Karen Armstrong, registered manager and can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person:	Registered Manager:
Paul Harold Swift	Karen Armstrong
Person in Charge of the Establishment at the	Date Registered:
Time of Inspection: Karen Armstrong	10/12/2013
Categories of Care:	
Independent Clinic – Private Doctor	

3. Inspection Focus

The inspection sought to determine if the following standards have been met:

Standard 1 — Informed Decision Making
Standard 4 — Dignity, Respect and Rights
Standard 5 — Patient and Client Partnerships
Standard 7 — Complaints

Standard 8 – Records

Standard 10 - Qualifications Practitioners, Staff and Indemnity

Standard 11 - Practising Privileges

Other areas inspected: Incidents, insurance arrangements and RQIA registration.

4. Methods/Process

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

- Discussion with Registered Provider
- Discussion with Registered Manager
- Examination of records
- Tour of the registered premises
- Evaluation and feedback

Prior to inspection the following records were analysed:

- Notification of incidents
- Pre-Inspection information completed by the establishment
- Complaints return

During the inspection the inspector met with one private medical practitioner.

The following records were examined during the inspection:

- 11 patient care records
- Patient satisfaction survey
- Summary report of patient satisfaction survey
- One complaints record
- Policies and procedures
- RQIA certificate of registration
- Insurance documentation

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of Healthcare 2000 was an announced care inspection dated 20 August 2014.

Review of Requirements and Recommendations from the Last Care Inspection

No requirements or recommendations were made as a result of the previous inspection.

5.2 Standard 1 - Informed Decision Making

Is Care Safe?

Information about services provided by the clinic was reviewed and found to accurately reflect the types of private doctor service provided and were in line with General Medical Council (GMC) Good Medical Practice. The costs of treatments were found to be up to date and include all aspects of the treatment.

The clinic chooses to have very limited advertising campaigns and marketing strategies but they comply with guidance issued by the GMC.

Is Care Effective?

The clinic provides an information leaflet to all patients that outlines the services and treatments provided. The clinic also has a website which provides contact details for the service. The registered provider confirmed arrangements are underway to further develop the website in the near future. Prospective patients and other interested parties can contact the clinic for information via the telephone. The Statement of Purpose and Patient Guide were reviewed and found to contain all of the information required by legislation. The Patient Guide is made available in the reception area of the establishment.

Information provided to patients and/or their representatives is written in plain English and when required is available in an alternative language or format.

Is Care Compassionate?

Following the initial consultation/treatment patients are provided with written information that they can take home with them which explains the treatment provided and associated risks and complications.

Areas for Improvement

No areas for improvement were identified during inspection.

Number of Requirements	0	Number Recommendations:	0
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5.3 Standard 4 - Dignity, Respect and Rights

Is Care Safe?

Discussion with the registered manager regarding the consultation and treatment process confirmed that patient's modesty and dignity is respected at all times. Consultations are provided in private rooms.

Patient care records were observed to be stored securely within a locked filing cabinet.

Is Care Effective?

Discussion with Karen Armstrong and the private medical practitioner confirmed that patients are treated in accordance with the DHSSPS standards for patient & client experience.

The private medical practitioner confirmed that patients meet with the medical practitioner undertaking the treatment and are fully involved in decisions regarding their treatment. Patient wishes are respected and acknowledged by the establishment.

Is Care Compassionate?

Discussion with the private medical practitioner and the registered manager and review of 11 patient care records confirmed that patients are treated and cared for in accordance with legislative requirements for equality and rights.

Areas for Improvement

No areas for improvement were identified during inspection.

Number of Requirements	0	Number Recommendations:	0
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5.4 Standard 5 – Patient and Client Partnerships

Is Care Safe?

All patients and/or their representatives are asked for their comments in relation to the quality of treatment provided, information and care received.

The information from the patient comments is collected in an anonymised format, summarised and used by the establishment to make improvements to services.

Is Care Effective?

Healthcare 2000 obtains the views of patients and/or their representatives on a formal and informal basis as an integral part of the service they deliver.

The establishment issued feedback questionnaires to patients and 52 were returned and completed. Review of the completed questionnaires found that patients were highly satisfied with the quality of treatment, information and care received. Comments from patients included:

- "I think the doctors and staff are doing a brill job"
- "Dry mouth, mild headache, all mild and worth it"

The information received from the patient feedback questionnaires is collated into an annual summary report which is made available to patients and other interested parties to read in the reception of the establishment.

It was confirmed that comments received from patients and/or their representatives are reviewed by registered manager. An action plan is developed and implemented to address any issues identified.

Is Care Compassionate?

Review of care records and discussion with staff confirmed that treatment and care services are planned and developed with meaningful patient involvement; facilitated and provided in a flexible manner to meet the assessed needs of each individual patient.

Areas for Improvement

No areas for improvement were identified during inspection.

Number of Requirements 0 Number Recommendations: 0
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5.5 Standard 7 - Complaints

Is Care Safe?

Review of one complaint record found that complaints are investigated and responded to within 28 working days (in line with regulations) and when this is not possible, complainants are kept informed of any delays and the reason for this.

Discussion with the registered provider, the registered manager and review of governance arrangements confirmed that complaints are discussed at senior management level and the Information from complaints is used to improve the quality of services provided.

Is Care Effective?

The establishment operates a complaints policy and procedure in accordance with the DHSSPS guidance on complaints handling in regulated establishments and agencies and the legislation.

The registered provider and the registered manager demonstrated a good understanding of complaints management. Staff know how to receive and deal with complaints.

The complaints register and complaints records were reviewed. All complaints were well documented, fully investigated and had outcomes recorded in line with the complaints procedure and legislation. Complaints records were observed to be stored securely in line with data protection legislation.

Is Care Compassionate?

A copy of the complaints procedure is provided to patients and to any person acting on their behalf. The registered manager confirmed that information can be provided in an alternative language or format if required and outlined the arrangements for the provision of an interpreter service.

The complainant will be notified of the outcome and action taken by the clinic to address any concerns raised.

Areas for Improvement

No areas for improvement were identified during inspection

Number of Requirements	0	Number Recommendations:	0
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5.6 Standard 8 - Records

Is Care Safe?

Discussion with the registered manager, the private medical practitioner and review of training records confirmed that appropriate staff have received training in records management. All staff were aware of the importance of effective records management and records were found to

be held in line with best practice guidance and legislative requirements. Patient care records are held in secure locked filing cabinets. The establishment is registered with the Information Commissioner's Office.

Is Care Effective?

Review of documentation confirmed that the establishment has a range of policies and procedures in place for the management of records which includes the arrangements for the creation, use, retention, storage, transfer, disposal of and access to records.

The establishment also has a policy and procedure in place for clinical record keeping in relation to patient treatment and care which complies with General Medical Council (GMC) guidance and Good Medical Practice.

Review of 11 patient care records, relating to the private doctor services, found that all entries were dated and signed by the medical practitioner and outlined a contemporaneous record of the treatment provided. The records were found to be maintained in line with best practice guidance.

There are systems in place to audit the completion of clinical patient records monthly and an action plan is developed to address any identified issues. The outcome of the audit is reviewed through the establishment's clinical governance structures.

Records required by legislation were retained and made available for inspection at all times.

Is Care Compassionate?

Discussion with the registered manager, the private medical practitioner and review of the management of records policy confirmed that patients have the right to apply for access to their clinical records in accordance with the Data Protection Act 1988 and where appropriate Information Commissioner's Office regulations and Freedom of Information legislation.

Areas for Improvement

No areas for improvement were identified during the inspection.

Number of Requirements	0	Number Recommendations:	0
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5.7 Standard 10 - Qualified Practitioners, Staff and Indemnity

Is Care Safe?

Review of the personnel files of two medical practitioners confirmed:

- evidence of confirmation of identity;
- evidence of current registration with the General Medical Council (GMC);
- the medical practitioners are covered by the appropriate professional indemnity insurance:
- the medical practitioners have provided evidence of experience relevant to their scope of practice;

- evidence of enhanced AccessNI disclosure check;
- there was evidence of ongoing professional development and continuing medical; education that meets the requirements of the Royal Colleges and GMC to ensure the medical practitioners can safely and competently undertake the treatments and services they offer;
- there was evidence of ongoing annual appraisal by a trained medical appraiser; and
- the GMC have approved arrangements for each medical practitioner regarding a responsible officer.

Arrangements are in place to support medical practitioners, with a licence to practice, to fulfil the requirements for revalidation through:

- acting as a designated body where required under The Responsible Officer Regulations (NI) 2010;
- providing an annual appraisal in line with the GMC's appraisal and assessment framework, for medical practitioners employed directly by the establishment; or
- providing sufficient information to the responsible officer to support their revalidation, for medical practitioners who are not an employee.

Discussion with the registered manager and review of the alert files confirmed that arrangements are in place for dealing with professional alert letters, managing identified lack of competence and poor performance for all staff, including those with practising privileges. There are also mechanisms for reporting incompetence in line with guidelines issues by the DHSSPS and professional regulatory bodies.

Is Care Effective?

Discussion with the registered manager and a private medical practitioner confirmed that medical practitioners are aware of their responsibilities under GMC Good Medical Practice.

Medical practitioners abide by published codes of professional practice relevant to their scope of practice and retain evidence that professional registration and revalidation requirements are met.

Is Care Compassionate?

Discussion with a private medical practitioner demonstrated that the core values of privacy, dignity, respect and patient choice are understood by the medical practitioners providing services within the establishment.

Areas for Improvement

No areas for improvement were identified during the inspection.

	Number of Requirements	0	Number Recommendations:	0	
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5.8 Standard 11 – Practising Privileges

Is Care Safe?

Discussion with the registered provider, the registered manager and review of the medical practitioners' personnel files as outlined in Standard 10 confirmed that all information required by legislation is retained by the establishment prior to practising privileges being granted.

Is Care Effective?

Healthcare 2000 has a policy and procedure in place which outlines the arrangements for the application, granting, maintenance, suspension and withdrawal of practising privileges. The practising privileges agreement defines the scope of practice for each individual medical practitioner. All practising privileges are reviewed and approved by the registered manager the prior to privileges being granted.

There are systems in place to review practising privileges agreements every two years.

Is Care Compassionate?

The practising privileges agreement includes arrangements to ensure patients are treated with dignity and respect at all times while respecting their rights.

Areas for Improvement

No areas for improvement were identified during the inspection.

Number of Requirements	0	Number Recommendations:	0

5.9 Additional Areas Examined

Management of Incidents

Review of policies and procedures found that the establishment had made reference to the management of incidents within various policies. It was recommended a specific incident policy and procedure, which includes reporting arrangements to RQIA, is devised.

No incidents have occurred within the establishment since registration; however systems are in place to document and manage incidents appropriately.

RQIA registration and Insurance Arrangements

Discussion with the registered manager regarding the insurance arrangements within the establishment confirmed that current insurance policies were in place. The RQIA certificate of registration was clearly displayed in the reception area of the premises.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the establishment. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the establishment.

Quality Improvement Plan					
Recommendations					
Recommendation 1	It is recommended that a management of incidents policy and procedure should be devised which includes reporting arrangements to RQIA.				
Ref: Standard 9					
Stated: First time	Response by Registered Manager Detailing the Actions Taken: New incidents policy was submitted a few weeks ago with a confirmation				
To be Completed by: 15 September 2015	e-mail received.				
Registered Manager Completing QIP		Karen Armstrong	Date Completed	3/9/15	
Registered Person Approving QIP		Paul H Swift	Date Approved	3/9/15	
RQIA Inspector Assessing Response		Winnie Maguire	Date Approved	6/9/15	

^{*}Please ensure the QIP is completed in full and returned to $\underline{independent.healthcare@rqia.org.uk}$ from the authorised email address*