



The **Regulation** and
Quality Improvement
Authority

Northern MRI Ltd, Malone Private Clinic
RQIA ID: 11169
93 Malone Road
Belfast
BT9 6SP

Inspectors: Winnie Maguire &
Emily Campbell
Inspection ID: IN023846

Tel: 028 9066 0050

**Announced Inspection
of
Northern MRI Ltd, Malone Private Clinic**

1 February 2016

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

Summary of Inspection

An announced care inspection took place on 1 February 2016 from 10.00 to 12.00. On the day of inspection the standards inspected were found to be largely safe, effective and compassionate. One area for improvement relating to the frequency of the patient survey was identified and is set out in the Quality Improvement Plan (QIP) within this report.

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 Department of Health, Social Services and Public Safety's (DHSPSS) Minimum Care Standards for Independent Healthcare Establishments 2014.

1.1 Actions/Enforcement Taken Following the Last Inspection

No actions were required to be taken following the last care inspection on 11 February 2015.

1.2 Actions/Enforcement Resulting from this Inspection

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

1.3 Inspection Outcome

| | Requirements | Recommendations |
|---|--------------|-----------------|
| Total number of requirements and recommendations made at this inspection | 0 | 1 |

The details of the QIP within this report were discussed with Dr Mark Hampton as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

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|--|---|
| Registered Organisation/Registered Person: Northern MRI Ltd Dr Mark Hampton | Registered Manager: Mr Michael Ennis (registration pending) |
| Person in Charge of the Establishment at the Time of Inspection: Dr Mark Hampton | Date Registered: 20 December 2011 |
| 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:

Prior to the inspection the following records were analysed: pre-inspection information and complaints return.

During the inspection the inspectors met with Dr Mark Hampton, Registered Person, and Private Doctor and briefly with Mr Michael Ennis newly appointed Clinic Manager who is in the process of applying to become the registered manager.

The following records were examined during the inspection:

- Seven patient care records
- Patient satisfaction survey
- Summary report of patient satisfaction survey
- Policies and procedures
- Insurance documentation
- Information provided to patients
- One medical practitioner personnel file
- Practising privileges agreement
- Certificate of RQIA registration

5. The Inspection

Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the establishment was an announced care inspection dated 11 February 2015. No requirements or recommendations were made following the previous inspection.

5.1 Review of Requirements and Recommendations from the Last Care Inspection

As above

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.

Advertising campaigns and marketing strategies comply with guidance issued by the GMC.

Is Care Effective?

The establishment provides an information leaflet to all patients that outline the services and treatments provided. The establishment also has a website which contains comprehensive information regarding the types of treatment provided. Dr Hampton confirmed he provides individual written instructions if necessary.

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 waiting area.

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?

Discussion with Dr Hampton and review of documentation confirmed that information provided to patients affords a transparent explanation of their condition and any treatment, investigation or procedure proposed. The information also includes any risks, complications, options and the expected outcome of the treatment or procedure. Patients are fully involved in planning their care and treatment.

Areas for Improvement

No areas for improvement were identified during the inspection.

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| Number of Requirements | 0 | Number Recommendations: | 0 |
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5.2 Standard 4 – Dignity, Respect and Rights

Is Care Safe?

Discussion with Dr Hampton confirmed that the patient's modesty and dignity is respected at all times during the consultation and treatment process. Consultations are provided in private rooms and modesty screens are provided.

Patient care records were observed to be stored securely in locked filing cabinets within a secure room.

Is Care Effective?

It was confirmed through the above discussion that patients are treated in accordance with the DHSSPS standards for Improving the Patient & Client Experience.

Patients meet with the medical practitioner undertaking the treatment and are fully involved in decisions regarding their treatment. Patients' wishes are respected and acknowledged by the establishment.

Is Care Compassionate?

Discussion with Dr Hampton and review of seven 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 the inspection.

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| Number of Requirements | 0 | Number Recommendations: | 0 |
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5.3 Standard 5 – Patient and Client Partnerships**Is Care Safe?**

Patients 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?

Northern MRI Ltd, Malone Private Clinic 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 in September 2014. Review of the completed questionnaires found that patients were highly satisfied with the quality of treatment, information and care received.

Dr Hampton confirmed a patient survey is planned for February 2016. The inspectors reminded Dr Hampton that patients should be surveyed at least annually. A recommendation was made on this matter.

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 waiting area of the establishment.

Discussion with Dr Hampton confirmed that comments received from patients and/or their representatives are reviewed by the management team as part of the governance arrangements.

An action plan is developed and implemented to address any issues identified. No issues were identified as requiring to be addressed.

Is Care Compassionate?

Review of patient care records and discussion with Dr Hampton confirmed that treatment and care 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

A recommendation was made to ensure a patient survey is conducted at least annually.

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| Number of Requirements | 0 | Number Recommendations: | 1 |
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5.4 Standard 7 - Complaints

Is Care Safe?

No complaints have been recorded by the establishment since the last inspection. However, systems are in place to investigate and respond to complaints within 28 working days (in line with regulations) or if this is not possible, Dr Hampton confirmed that complainants will be kept informed of any delays and the reason for this.

Discussion with Dr Hampton confirmed that information from complaints is used to improve the quality of services.

Is Care Effective?

It is not in the remit of RQIA to investigate complaints made by or on the behalf of individuals, as this is the responsibility of the providers. However, if there is considered to be a breach of regulation as stated in The Independent Health Care Regulations (Northern Ireland) 2005, RQIA has a responsibility to review the issues through inspection.

A complaints questionnaire was forwarded by the RQIA to the establishment for completion. The returned questionnaire indicated that no complaints have been received by the establishment between January 2014 and March 2015.

Dr Hampton demonstrated a good understanding of complaints management.

The complaints procedure is contained within the Patient Guide; copies of which are available in waiting area for patients to read.

Is Care Compassionate?

A copy of the complaints procedure is provided to patients and to any person acting on their behalf. The procedure is available in a range of formats suited to the patient's age and level of understanding if required.

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

Discussion with Dr Hampton demonstrated that the core values of privacy, dignity, respect and patient choice are understood. Complaints will be handled in a sensitive manner.

Areas for Improvement

No areas for improvement were identified during the inspection.

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| Number of Requirements | 0 | Number Recommendations: | 0 |
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5.5 Standard 8 - Records

Is Care Safe?

Discussion with Dr Hampton confirmed that appropriate staff have received training in records management. Dr Hampton was 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. Computerised records are accessed using individual usernames and passwords.

The establishment and Dr Hampton are 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 seven 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 annually as part of Dr Hampton's appraisal.

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

Is Care Compassionate?

Discussion with Dr Hampton 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.

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| Number of Requirements | 0 | Number Recommendations: | 0 |
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5.6 Standard 10 – Qualified Practitioners, Staff and Indemnity

Is Care Safe?

Review of the details of one medical practitioner confirmed:

- evidence of confirmation of identity;
- evidence of current registration with the General Medical Council (GMC);
- the medical practitioner is covered by the appropriate professional indemnity insurance;
- the medical practitioner has 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 practitioner can safely and competently undertake the treatments and services they offer;
- there was evidence of ongoing annual appraisal by a trained medical appraiser; and
- a responsible officer had been appointed

Arrangements are in place to support medical practitioners, with a licence to practice, to fulfil the requirements for revalidation through providing sufficient information to the responsible officer to support their revalidation, for medical practitioners who are not an employee.

Discussion with Dr Hampton 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 issued by the DHSSPS and professional regulatory bodies.

Is Care Effective?

Discussion with Dr Hampton 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 Dr Hampton 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.

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| Number of Requirements | 0 | Number Recommendations: | 0 |
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5.7 Standard 11 – Practising Privileges

Is Care Safe?

Discussion with Dr Hampton and review of the medical practitioner's details 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?

Northern MRI Ltd, Malone Private Clinic 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 clinic management team 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.

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| Number of Requirements | 0 | Number Recommendations: | 0 |
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5.8 Additional Areas Examined

Management of Incidents

The establishment has an incident policy and procedure in place which includes reporting arrangements to RQIA.

No adverse incidents have occurred within the establishment since registration with RQIA. However discussion with Dr Hampton confirmed that systems are in place to manage, document, fully investigate incidents and disseminate the outcomes.

RQIA registration and Insurance Arrangements

Discussion with Dr Hampton 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 hallway of the premises.

Areas for Improvement

No areas for improvement were identified during the inspection.

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| Number of Requirements | 0 | Number Recommendations: | 0 |
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6. Quality Improvement Plan

The issue identified during this inspection is detailed in the QIP. Details of this QIP were discussed with Dr Mark Hampton as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on 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.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Department of Health, Social Services and Public Safety's (DHSPPS) Minimum Care Standards for Healthcare Establishments. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP will be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to independent.healthcare@rqia.org.uk and assessed by the inspector.

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 patient survey is conducted at least annually. | | |
| Ref: Standard 5 | Response by Registered Person(s) Detailing the Actions Taken: Dr Mark Hampton | | |
| Stated: First time | | | |
| To be Completed by: 1 March 2016 | | | |
| Registered Manager Completing QIP | Michael Ennis | Date Completed | 03/03/16 |
| Registered Person Approving QIP | Dr Mark Hampton | Date Approved | 03/03/16 |
| RQIA Inspector Assessing Response | Winifred Maguire | Date Approved | 16/03/16 |

Please ensure this document is completed in full and returned to independent.healthcare@rgia.org.uk from the authorised email address