

Expert Health (trading as Dr Thom)
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Inspector: Winifred Maguire Inspection ID: IN021611

# Announced Inspection of Expert Health (trading as Dr Thom)

19 August 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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# 1. Summary of Inspection

An announced care inspection took place on 19 August 2015 from 10.00 to 14.00. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. The outcome of the inspection found no areas for concern.

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 (DHSPPS) Minimum Care Standards for Healthcare Establishments 2014.

# 1.1 Actions/Enforcement Taken Following the Last Inspection

There were no requirements or recommendations made as a result of the last inspection and 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

	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 Dr Thomas Brett registered person/manager and Zoe Holland quality and compliance manager and can be found in the main body of the report.

#### 2. Service Details

Registered Organisation/Registered Person:	Registered Manager:
Expert Health Ltd (trading as Dr Thom)	Dr Thomas Brett
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Person in Charge of the Agency at the Time of	Date Registered:
Inspection:	1 May 2013
Dr Thomas Brett	
Categories of Care:	
IMA –(PD) Independent Medical Agency – Private D	octor

# 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:

The pre-assessment information, complaints return and request for supporting documentation was forwarded to the provider prior to the inspection. The registered person was requested to be available for contact via the telephone on the date of inspection, at an agreed time. Having reviewed the records the registered person was contacted at the conclusion of the inspection to discuss any issues and provide feedback on the findings.

During the inspection the inspector spoke with Dr Thomas Brett registered person/manager and Ms Zoe Holland, quality and compliance manager Expert Health Ltd.

The following records were examined during the inspection:

- three patient care records
- patient satisfaction survey
- summary report of patient satisfaction survey
- complaints records
- policies and procedures
- insurance documentation
- information provided to patients
- 13 medical practitioner details
- practising privileges agreements
- certificate of RQIA registration

# 5. The Inspection

#### **Review of Requirements and Recommendations from Previous Inspection**

The previous inspection of the agency was an announced care inspection dated 17 February 2015. There were no previous requirements or recommendations made as a result of this inspection.

# 5.1 Review of Requirements and Recommendations from the Last Care Inspection Dated 17 February 2015

As above

# 5.2 Standard 1 - Informed Decision Making

#### Is Care Safe?

Information about services provided by the agency was reviewed, 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 agency has a website which contains comprehensive information regarding the types of treatment provided. Prospective patients and other interested parties can contact the agency for information via the website and by 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 on the website.

Information provided to patients and/or their representatives is written in plain English.

# **Is Care Compassionate?**

Discussion with registered person/manager 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.

# 5.2 Standard 4 – Dignity, Respect and Rights

# Is Care Safe?

Discussion with registered person/manager confirmed that the patient's dignity is respected at all times during the consultation and treatment process. Consultations are predominately provided online through the website although patients can also book telephone and video consultations.

The registered person/manager confirmed that patient care records were stored securely and are accessible online via secure online patient records.

#### 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 consult via their secure online patient records accessible via the website regarding their treatment and are fully involved in decisions regarding their treatment. Patients' wishes are respected and acknowledged by the agency.

# Is Care Compassionate?

Discussion with registered person /manager and review of three 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.

Number of Requirements	0	Number Recommendations:	0
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# 5.3 Standard 5 - Patient and Client Partnerships

#### Is Care Safe?

All 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 agency to make improvements to services.

#### Is Care Effective?

Expert Health Ltd obtains the views of patients as an integral part of the service they deliver.

The agency issued feedback questionnaires to patients, and141 full responses were related to patients from Northern Ireland of which the agency provided a random sample of ten completed questionnaires. Review of the completed questionnaires found that patients were highly satisfied with the quality of treatment, information and care received. Comments from patients included:

- "In my limited experience service seems very good"
- "It seems fine"
- "Happy with the service"
- "Confidentiality and promptness high on my priorities"
- "Think the service running smoothly"
- "Very satisfied with the service"

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 online on the agency's website.

Discussion with the registered person/manager and the quality and compliance manager confirmed that comments received from patients and/or their representatives are reviewed by senior management via a monthly feedback report and significant comments /trends are input into a monthly quality and risk management committee meeting.

An action plan is developed and implemented to address any issues identified. The action plan was reviewed as part of the inspection process.

# **Is Care Compassionate?**

Review of patient care records and discussion with the registered person/manager and quality and compliance manager 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**

No areas for improvement were identified during the inspection.

Number of Requirements	0	Number Recommendations:	0	Ì
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# 5.4 Standard 7 - Complaints

#### Is Care Safe?

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

Discussion with the registered person/manager and quality and compliance manager 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 RQIA to the agency for completion. Review of documentation and discussion with the registered person/manager indicated that complaints have been managed in accordance with best practice.

The registered person/manager demonstrated a good understanding of complaints management.

A complaints audit is undertaken regularly often as part of the clinical and customer service audits. Formal complaints are input into a monthly quality and risk management committee meeting. The audit information is used to identify trends and enhance services provided as part of the agency's quality assurance arrangements.

The complaints procedure is contained within the Patient Guide; copies of which are available on the agency's website for patients to read.

# **Is Care Compassionate?**

The complaints procedure is provided to patients and to any person acting on their behalf via the website.

The registered person/manager confirmed that the complainant would be notified of any outcome or action taken by the agency to address concerns raised.

Discussion with the registered person/manager and quality and compliance manager demonstrated that the core values of privacy, dignity, respect and patient choice are understood. Complaints were found to be handled in a sensitive manner.

#### **Areas for Improvement**

No areas for improvement were identified during the inspection.

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

#### Is Care Safe?

Discussion with the registered person/manager, the quality and compliance manager and review of training records confirmed that appropriate staff have received training in records management. The registered person/manager also confirmed that all staff are aware of the importance of effective records management and records are held in line with best practice guidance and legislative requirements. Patient electronic records are accessed using individual usernames and passwords and securely stored.

The agency is registered with the Information Commissioner's Office in England.

#### Is Care Effective?

Review of documentation confirmed that the agency 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 agency also has a policy statement 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 three patient care records relating to the services provided by the agency found that all entries were completed in line with best practice and had a contemporaneous record of consultation and 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 and an action plan is developed to address any identified issues. The outcome of the audit is reviewed through the agency's clinical governance structures.

The registered person/manager confirmed that records required by legislation were retained and can be made available for inspection at all times.

# **Is Care Compassionate?**

Discussion with the registered person/manager, quality and compliance manager 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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# 5.6 Standard 10 – Qualified Practitioners, Staff and Indemnity

#### Is Care Safe?

Review of the details of 13 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 CRB 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
- 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 an annual appraisal in line with the GMC's appraisal and assessment framework, for medical practitioners employed directly by the agency; or
- providing sufficient information to the responsible officer to support their revalidation, for medical practitioners who are not an employee.

Discussion with the registered person/manager 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 Department of Health and professional regulatory bodies.

#### Is Care Effective?

Discussion with the registered person/manager 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 the registered person/manager and the quality and compliance manager demonstrated that the core values of privacy, dignity, respect and patient choice are understood by the medical practitioners providing services within the agency.

# **Areas for Improvement**

No areas for improvement were identified during the inspection.

Number of Requirements	0	Number Recommendations:	0	Ì
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# 5.7 Standard 11 - Practising Privileges

#### Is Care Safe?

Discussion with the registered person/manager and review of the medical practitioner's details as outlined in Standard 10 confirmed that all information required by legislation is retained by the agency prior to practising privileges being granted.

#### Is Care Effective?

Expert Health Ltd 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 medical director.

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	l
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#### 5.10 Additional Areas Examined

# **Management of Incidents**

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

Discussion with the registered person/manager, quality and compliance manager and review of incident management found that incidents were well documented, fully investigated and had outcomes recorded.

Audits of incidents are undertaken and learning outcomes are identified and disseminated throughout the organisation.

# **RQIA** registration and Insurance Arrangements

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

# Change of name

The registered person/manager and the quality and compliance manager outlined their intention to change the trading name of the IMA for registration purposes. The legal entity remains the same and they will add an additional trading name to read "Expert Health Ltd (trading as Lloyds Pharmacy Online Doctors & Dr Thom)." Advice was given on the matter and they agreed to liaise with the RQIA registration team.

#### **Areas for Improvement**

No areas for improvement were identified during the inspection.

Number of Requirements	0	Number Recommendations:	0
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# No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Dr Thomas Brett	Date Completed	23/9/2015
Registered Person	Dr Thomas Brett	Date Approved	23/9/2015
RQIA Inspector Assessing Response	Winnie Maguire	Date Approved	15/10/2015

Please provide any additional comments or observations you may wish to make below:
r lease provide any additional comments of observations you may wish to make below.

\*Please complete in full and returned to independent.healthcare@rqia.org.uk\_from the authorised email address\*

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 agency. 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(s) from their responsibility for maintaining compliance with minimum standards and regulations.