

Review of compliance

Harmony (Your Gentle way to slim) Limited
Harmony Medical Diet Clinic in Bedford

Region:	East
Location address:	66 St Loyes Street Bedford MK40 1EZ
Type of service:	Services in slimming clinics
Date the review was completed:	29 March 2011
Overview of the service:	<p>Dr. Hirsch is the only doctor working across three locations based in Coventry, Bedford and London. He is sole provider for this service, providing services in slimming clinics to adults. Dr. Hirsch divides his time across the three locations with only one day a week in Bedford. He stated in his transition application that when he is at one location, the other two are closed. This service was judged as fully compliant at transition in August 2010.</p>

Summary of our findings for the essential standards of quality and safety

What we found overall

We found that Harmony Medical Diet Clinic in Bedford was meeting all the essential standards of quality and safety we reviewed.

The summary below describes why we carried out the review, what we found and any action required.

Why we carried out this review

We carried out this review because concerns were identified in relation to:

- Respecting and involving people who use services
- Management of medicines
- Assessing and monitoring the quality of service provision

How we carried out this review

We reviewed all the information we hold about this provider, which included Provider Compliance Assessments which were submitted when we requested them.

What people told us

As part of this review we looked at 59 responses to satisfaction surveys for this service. These were very positive and indicated that people felt that they were given all the necessary information and support to achieve their personal weight loss goals. Comments included. "I am very satisfied and will be recommending people to visit", and "I'm really happy to keep my diet going with the help of the clinic".

People confirmed that Dr Hirsch gave a full explanation of the medication given out by this clinic, how it should be taken and how the diet worked. They said he was very approachable and encouraged people to ask lots of questions, which he responds to

with appropriate explanations and advice about the steps people had to take to achieve an appropriate and healthy weight loss,”

What we found about the standards we reviewed and how well Harmony Medical Diet Clinic in Bedford was meeting them

Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

CQC are satisfied from the information we have received, that the provider makes suitable arrangements to ensure that the respect and dignity of people who use this service is considered throughout the consultation processes.

People are involved in the planning of, and ultimately in control of their individual treatment programmes and the provider takes appropriate action to ensure people receive and understand all the required information to make informed choices about their treatment.

- Overall, we found that Harmony Medical Diet Clinic in Bedford was meeting this essential standard.

Outcome 9: People should be given the medicines they need when they need them, and in a safe way

CQC is confident that people using this service are appropriately assessed, and given the necessary information to make an informed choice about any medication they may receive from this provider.

CQC considers that the provider takes appropriate measures for the safe dispensing, storing, disposal and recording of medications from this service.

- Overall, we found that Harmony Medical Diet Clinic in Bedford was meeting this essential standard.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

CQC consider that the provider has demonstrated, through his PCA, that he takes appropriate steps to ensure that his practice knowledge is kept up to date, and that through his consultation processes he reinforces important information to ensure that the risks to people are minimised. CQC accept the provider statement ‘two thirds of new patients come through word of mouth’ as support of effective service quality monitoring and satisfaction of people who use this service.

- Overall, we found that Harmony Medical Diet Clinic in Bedford was meeting this essential standard.

Please see previous review reports for more information.

What we found
for each essential standard of quality
and safety we reviewed

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*.

Outcome 1: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- Understand the care, treatment and support choices available to them.
- Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- Have their privacy, dignity and independence respected.
- Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant
with outcome 1: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us
As part of this review the provider submitted 59 completed satisfaction surveys from people who have used the service in the past two years. With the exception of one response where the person had ticked a box to say they were 'not listened to', comments were very positive. One person wrote, "Dr Hirsch gave a full explanation of the medication and how the diet worked, very approachable". And another wrote, "I was able to ask lots of questions and the doctor explained what steps I had to take to achieve an appropriate weight loss,"

Other evidence
As part of this responsive review we asked the Provider to submit a Provider Compliance Assessment (PCA) in relation to this outcome area.
This was submitted within the specified timeframe and gave us sufficient information to form a judgement.

In the PCA the provider identifies that the consultation room is set at a distance from the waiting area and that consultations take place in private behind a closed door. There are no other staff working in this location except the Registered Provider Dr Isaac Hirsch. He told us that all personal files are confidential and are held electronically and are password protected. No one other than him has the password. The PCA informed us that the first consultation involves an explanation and discussion of treatments available. After listening to the patient, and having measured the patient's height and weight, the Dr will make a recommendation for treatment. The person then makes a decision about whether or not they wish to pursue the treatment. If they decide not to, then no fees are required. If they decide to proceed, further discussions take place, taking into account the individuals' social and cultural diversity, values and beliefs. People are then given contact details, which they can call any time for support and/or guidance from the Dr. People are also issued with a Patient Information Pack which includes information relating to their rights.

No one under 18 years of age is accepted on the treatment programmes at this clinic, and only adults who can fully understand and comprehend explanations are accepted. If their level of English is not adequate, they are required to come with a translator to ensure the consultation is fully understood.

The PCA indicates that people wishing to use this service are fully supported to make informed choices. The eventual consequences of obesity on their health over the long term are clearly explained, as well as the positive outcomes that can be expected from a change in certain lifestyle behaviours.

People are asked to plan and write down their own menus which are then discussed at subsequent appointments. Ultimately they care for themselves and are responsible for managing their own treatment supported and guided by the provider.

People who come to the diet clinic are by definition aware of the aims, objectives and purpose of the service. They are encouraged to attend regularly to be weighed, and to review the efficacy of the treatment and of their own compliance with the guidance provided regarding their nutrition and lifestyle changes

The facilities available are the clinic premises for consultations and follow up visits, as well as the free mobile phone access.

The cost of the services is clearly displayed at the clinic and the Patient Information Pack each person receives also contains a copy of the Price List, as well as clear procedures on how to raise a concern or a complaint and on how it will be dealt with.

The provider told us that no outside diagnostic tests or assessments are undertaken in or by the clinic. If one is deemed necessary, a letter is given to the person to give to their GP.

The clinic welcomes any outside Forum or Local Involvement Networks to come and view the service and would happily cooperate with them.

Our judgement

CQC are satisfied that from the information we have received, that the provider makes suitable arrangements to ensure that the respect and dignity of people who use this service is considered throughout the consultation processes.

People are involved in the planning of, and ultimately in control of their individual treatment programmes, and the provider takes appropriate action to ensure people receive and understand all the required information to make informed choices about

their treatment.

Outcome 9: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- Will have their medicines at the times they need them, and in a safe way.
- Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement
The provider is compliant with outcome 9: Management of medicines

Our findings
<p>What people who use the service experienced and told us</p> <p>Comments from people who have used this service indicated that they were given full explanations of the medicine they would receive and how it should be taken. One person wrote on their survey response. “Tried everything else, only this medication worked for me”. Another wrote. “I was surprised at the depth into which the doctor went to explain and the information given”.</p> <p>Other evidence</p> <p>As part of this responsive review we asked the Provider to submit a Provider Compliance Assessment (PCA) in relation to this outcome area.</p> <p>This was submitted within the specified timeframe and gave us sufficient information to form a judgement.</p> <p>We wanted further information relating to concerns that had been raise with us. These concerns alleged;</p> <ul style="list-style-type: none">• The possible prescribing of drugs that were not recommended in the management of obesity by this provider.• The GPs of people using this service were not informed when the drugs Phentermine and Diethylpropion were prescribed.

- That people using this service did not have an appropriate assessment prior to being prescribed the above drugs.

The information received from the provider advised us that all patients are asked at their initial consultation about any allergies/intolerances they may have. They are asked about any adverse drug reactions they may have experienced in the past, and are asked to bring all the medicines they take, including packaging, with them to their first consultation, so that the doctor can determine the safety and advisability of weight loss treatment.

The PCA states “medicines are not prescribed, but given out to the patient as part of the treatment course. The utmost care is taken to ensure that medicines given are appropriate for the patient's:

- Age: The clinic does not accept patients under 18 years of age.
- Choices: Treatment choices are first discussed with and explained to the patient.
- Lifestyle: The patient's lifestyle is fully taken into account. For example, the patient is warned not to take his appetite suppressant medication on the morning of a day when he or she may have some alcoholic beverage later that day or evening.
- Cultural or religious beliefs: They also are fully taken into account. For example, recommended choices of food are given as lists with a wide variety of different food items so that it can fit the dietary customs or restrictions adhered to by patients of all creeds, religions, or ethnic backgrounds.”

The information received told us that people are advised to stop weight loss treatment immediately and contact the clinic or their GP if they suffer any adverse reaction.

People are always informed about the medication they are given, including the risks and any side-effects that they may experience and are encouraged to ask questions. Patient information leaflets about the medication are also given to everyone who attends the clinic for consultation.

The provider has told us that each individual's treatment is reviewed at every follow up consultation, and all medicines that are dispensed are recorded in the individuals' file. Any adverse events, adverse drug reactions, incidents and notable events are also recorded within the individuals' file and reported to the appropriate authority as required.

This service is run by Dr Isaac Hirsch who is the sole provider. He advised us “I am the only person who handles and stores those medicines. I keep closely up to date and watch for any change in the safety profile of the medications I give out in my clinic. The appetite suppressants I use are well known for over 50 years and have a pretty safe profile when prescribed properly. All required procedures for handling, storing and dispensing medicines, in particular controlled drugs (Phentermine and Diethylpropion), are carefully followed and fully complies with the requirements of all the relevant Acts and Regulations”.

Medication is never left on the premises, as the clinic at this location only runs one day each week.

Our judgement

CQC is confident that people using this service are appropriately assessed, and given the necessary information to make an informed choice about any medication they may receive from this provider.

CQC considers that the provider takes appropriate measures for the safe

dispensing, storing, disposal and recording of medications from this service

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

- Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant
with outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us
As part of this review we looked at 59 responses to satisfaction surveys for this service. These were very positive and indicated that people felt that they were given all the necessary information and support to achieve their weight loss goals. Comments included. "I am very satisfied and will be recommending people to visit", and "I'm really happy to keep my diet going with the help of the clinic".

Other evidence
As part of this responsive review we asked the Provider to submit a Provider Compliance Assessment (PCA) in relation to this outcome area. This was submitted within the specified timeframe and gave us sufficient information to form a judgement.
The provider told us "Like in the previous years I have not had one single instance of patient claim or complaint this year, nor any adverse event, incident, error or near miss. I continually review my practice in light of any adverse events, incidents, errors and near misses, complaints or claims that may happen. I keep closely up to date and watch for any change in the safety profile of the medications I give out in my clinic"

The PCA indicated that the provider is proactive in reinforcing the pitfalls of the programme which may put people at risk. For example in the case of appetite suppressants, repeated warnings are given to people at each consultation, not to drink any amount of alcoholic and to avoid anything containing caffeine on the days when that medication is taken. It is also emphasised that it is the individuals' personal responsibility to ensure that all necessary precautions are taken, so that nobody apart from the individual can access the medication and misuse it.

The clinic functions in compliance with all published clinical and other audits in relation with the safety of the medicines, and is run in a safe and patient centered fashion with emphasis on the quality of service to each individual patient through free and unlimited visits during, and in-between courses as well as free and unlimited mobile phone access for support and guidance.

The provider believes the level of patient satisfaction is demonstrated every year in the surveys, and the high percentage of new patients coming through older patient referral.

He told us that the degree of satisfaction, is monitored by the service users continuous participation in their individual programme and by introducing the clinic to their friends and family. He advised us that about two thirds of new patients come through word of mouth.

Patients are given a feedback questionnaire at the point of, and asked to return them at their leisure. We looked at 59 of these survey responses, and found that with the exception of one, they were very positive and indicated that the service provided is very supportive and encourages people to achieve and maintain their personal goals related to weight control and healthy living.

The provider told us he is a founding member of the Obesity Management Association and this forum is used to share experiences between members.

The results of the patient satisfaction survey are included in the New Patient Pack and are available to anybody on demand.

Our judgement

CQC consider that the provider has demonstrated, through his PCA, that he takes appropriate steps to ensure that his practice knowledge is kept up to date, and that through his consultation processes he reinforces important information to ensure risks to people are minimised. CQC accept the provider statement 'two thirds of new patients come through word of mouth' as support of effective service quality monitoring and satisfaction of people who use this service.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Adult Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

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Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA