

Review of compliance

Marie Stopes International
Marie Stopes International West London Centre

Region:	London
Location address:	87 Mattock Lane Ealing London W5 5BJ
Type of service:	Acute services without overnight beds / listed acute services with or without overnight beds
Date of Publication:	January 2012
Overview of the service:	Marie Stopes International West London Centre is registered to provide the regulated activities treatment of disease, disorder or injury, diagnostic and screening procedures, surgical procedures, family planning and termination of pregnancy.

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

Our current overall judgement

Marie Stopes International West London Centre was meeting all the essential standards of quality and safety.

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

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 1 December 2011, checked the provider's records, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

Patients using the service did not wish to speak to us when we carried out the inspection. We have therefore used our observations and patient feedback and responses in the Provider satisfaction survey to give their views of the service.

The majority of patients were satisfied they were treated with dignity and respect; one person commented "I was treated with the utmost respect from all members of staff". Patients did feedback that they experienced long waits for their appointments and treatment which caused them additional anxiety.

Patient feedback on the service included statements on how safe and supported patients felt during their care and treatment at the centre. They made comments such as "they made me feel very at ease, explained everything and were very compassionate" and "all staff are very professional and friendly".

What we found about the standards we reviewed and how well Marie Stopes International West London Centre was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

Patients using the service were provided with information and supported to make decisions about their treatment choices.

Overall we found that Marie Stopes International West London Centre was meeting this

essential standard.

Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

Patients using the service experienced effective, safe and appropriate care which met their needs and protected their rights.

Overall we found that Marie Stopes International West London Centre was meeting this essential standard.

Outcome 07: People should be protected from abuse and staff should respect their human rights

Patients were protected from abuse or the risk of abuse as staff working in the service were trained to recognise the signs of abuse and to report their concerns.

Overall we found that Marie Stopes International West London Centre was meeting this essential standard.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Patients received care and treatment from competent staff that were supported to develop and maintain their knowledge and skills.

Overall we found that Marie Stopes International West London Centre 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

Patients benefit from safe, quality care as the service had formal systems in place to manage the risks and monitor the quality of the service provided.

Overall we found that Marie Stopes International West London Centre was meeting this essential standard.

Other information

Please see previous reports for more information about previous reviews.

**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 01: 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 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

Patients using the service did not wish to speak to us. We have therefore used patient feedback and responses in the Provider satisfaction survey to give their views of the service.

Staff told us that patient feedback was collated monthly and results fed back to the Centre. The results for September 2011 show that 773 patients responded and 91% of them were satisfied with the information provided to them.

The majority of patients were satisfied they were treated with respect and dignity one person commented "I was treated with the utmost respect from all members of staff". We saw patients consultations took place in private, the recovery area was open plan with reclining chairs and staff told us patients could be moved to another area should additional privacy be needed.

The survey report contained several comments about the amount of time patients had to wait for their appointments and /or treatment and one person commented that they were unprepared that male partners were allowed in the waiting room. The centre managers told us they responded to 'red alerts' arising from patient feedback and were looking at ways to keep patients informed of delays.

Other evidence

Staff explained patients booked appointments centrally through the Bristol call centre. They said patients were provided with information about the service and treatment options. They were also directed to the provider's website which contained details of every service, treatment options, sexual health information and a dedicated younger person's site with online chat facilities.

The centre had accreditation from the 'You're Welcome' Department of Health (DH) initiative which comprised quality assurance standards for treating younger patients (aged 13-18) to access health services. The clinic had a nominated 'champion' who was responsible for ensuring patients within this age group were supported and understood their treatment and care whilst in the centre.

Our judgement

Patients using the service were provided with information and supported to make decisions about their treatment choices.

Overall we found that Marie Stopes International West London Centre was meeting this essential standard.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

Patient's feedback on the care and treatment they received was mainly good. We noted there were some comments that the long waiting times increased the anxiety patients experienced.

Staff told us a 'red alert' was generated when care was rated poorly in a feedback response. The clinical manager was responsible for following up the identified care issues and taking remedial action to prevent a reoccurrence.

Staff confirmed patients see a counsellor before booking in and vulnerable clients were supported by appropriately qualified counsellors.

We saw staff completing patient care plans. They explained the electronic system had mandatory fields at each stage and staff undertaking the next stage could not access their fields until all information was fully recorded.

Patients were provided with a credit card size information booklet which gave details of the advice line and aftercare instructions. The clinical manager told us all patients were provided with pregnancy testing kits to check that the termination had been effective as part of the aftercare.

Other evidence

Managers in the service explained patients followed a pathway of care dependant on the method of termination they had chosen. An electronic care planning system was used with mandatory fields and 'pop up' questions to remind staff to complete additional

pages, for example when a patient was under 18 years of age or had a pre existing medical condition. The managers confirmed the system backed up records to an external server and told us the contingency plans in place if the system failed.

We were told the centre conducts emergency scenario 'skills drills' every 2-3 months. Staff responses were assessed by the trainer who then generated a report with recommendations for action. We saw the reports for the September and November 2011 drills. The clinical manager confirmed an action plan was developed in response to the recommendations. There was a transfer agreement in place with the local NHS trust for patients who required emergency care.

The clinical manager confirmed staff discussed the disposal of foetal tissue with patients and they completed and signed a form documenting their wishes. Arrangements were in place for a local undertaker to collect the foetal tissue if required.

Our judgement

Patients using the service experienced effective, safe and appropriate care which met their needs and protected their rights.

Overall we found that Marie Stopes International West London Centre was meeting this essential standard.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

Patient feedback on the service included statements on how safe and supported patients felt during their care and treatment at the centre.

Other evidence

The clinical manager was the local safeguarding lead supported by two link staff. Safeguarding policies and procedures were available for staff to refer to.

The clinical manager confirmed the corporate safeguarding lead held regular meetings with local leads and these were used to provide supervision, information and learning. Minutes were seen for the meetings held in September and November 2011. These documented the new information available and the shared learning discussed at the meeting.

Staff confirmed they had attended safeguarding training and demonstrated their understanding of abuse and the referral processes to be followed. The managers confirmed they provide levels 1 and 2 safeguarding training and medical staff completed e-learning training.

Staff explained there was a pathway for younger clients. They were given priority through the process and were not left unattended. The clinical manager told us the pathway was developed due to feedback from patients and encompassed 'You're Welcome' quality criteria for young people friendly health services. The 'You're Welcome' accreditation certificate was displayed in the reception area of the centre.

Our judgement

Patients were protected from abuse or the risk of abuse as staff working in the service were trained to recognise the signs of abuse and to report their concerns.

Overall we found that Marie Stopes International West London Centre was meeting this essential standard.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

Patient feedback comments included statements such as "the nurses are brilliant", "they made me feel very at ease, explained everything and were very compassionate" and "all staff are very professional and friendly"

Other evidence

Staff confirmed they had been given a comprehensive induction on commencing employment in the organisation. The period depended on their role but involved working with experienced staff and being supernumerary for a period of time.

Staff told us they were provided with opportunities to attend supervision. They said they had appraisals and learning and development was discussed as part of the process.

The managers told us they held staff meetings and the minutes of the last one were seen. The centre had 'shut down days' to bring together all staff for training and meetings. We were told the agenda for the next shut down day was being planned and would include the results of the staff survey. The meetings were used to update staff on operational matters, performance and patient feedback.

The managers confirmed induction, supervision and appraisal processes were in place. They told us that the organisation had implemented 360 degree appraisal for managers, team members and medical staff working in the centre contribute to the process. The centre was planning to start a staff forum with representatives from every department to meet periodically with managers to improve communication and involve staff in decision making about issues in the centre. The terms of reference had been

drafted and were going out for consultation to staff.

The centre managers maintained a training matrix which demonstrated that staff were up to date with their mandatory training.

Our judgement

Patients received care and treatment from competent staff that were supported to develop and maintain their knowledge and skills.

Overall we found that Marie Stopes International West London Centre was meeting this essential standard.

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

The results of the client satisfaction survey for September 2011 showed 76% of patient's rated their experiences of care at the centre as excellent or very good. Overall 93% of patients were satisfied with the standard of care provided. The centre managers told us they use the feedback to identify potential areas of change to improve the service.

Other evidence

The centre operates in accordance with the corporate governance and risk management policies and procedures. We were shown the schedule of audits and the minutes of Integrated Governance meetings, which showed the results of audits were discussed in that forum.

The electronic risk management system (Sentinel) was used to log incidents, complaints and manage risks. The clinical manager told us that staff were being encouraged to actively report incidents and near misses to ensure they were documented on the system. Minutes of the staff meeting demonstrated the lessons learnt from incident reviews were discussed and actions documented to prevent reoccurrence.

We were told by the managers that the provider conducted an annual assessment of compliance and they were required to draw up an action plan to address identified shortfalls. The centre was due to have a follow up visit to review issues identified in the initial assessment.

Our judgement

Patients benefit from safe, quality care as the service had formal systems in place to manage the risks and monitor the quality of the service provided.

Overall we found that Marie Stopes International West London Centre was meeting this essential standard.

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 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

Document purpose	Review of compliance report
Author	Care Quality Commission
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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