

Review of compliance

<p>The Harley Medical Group THMG Chester Clinic</p>	
<p>Region:</p>	<p>North West</p>
<p>Location address:</p>	<p>6 St John Street Chester Cheshire CH1 1DA</p>
<p>Type of service:</p>	<p>Doctors consultation service</p>
<p>Date of Publication:</p>	<p>May 2012</p>
<p>Overview of the service:</p>	<p>The Harley Medical Group Chester Clinic provides a doctors consultation service for people considering cosmetic surgery. Nurses working at the clinic carry out pre-operative assessment and post-operative follow up. No surgical procedures are carried out at the clinic however other cosmetic treatments which do not require registration are done on the premises.</p>

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

Our current overall judgement

THMG Chester Clinic was meeting all the essential standards of quality and safety inspected.

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 10 May 2012 and talked to staff.

What people told us

We did not interview people visiting the clinic, however we looked at records of surveys that had been returned by patients and they showed a high level of satisfaction with all aspects of the service. One person who had experienced some issues with the surgical procedure had written a letter to the clinic in which they stated:

'Lesley (the registered manager) has been a wonderful help listening and understanding and sorting out appointments and scan information for me. I really do appreciate the help she has given me.'

What we found about the standards we reviewed and how well THMG Chester Clinic 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

People who used the service were given appropriate information and support regarding their care or treatment.

Outcome 02: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

Before people received any care or treatment they were asked for their consent.

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

People experienced care, treatment and support that met their needs and protected their rights.

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

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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

We did not interview people visiting the clinic, however we looked at records of surveys that had been returned by patients and they showed a high level of satisfaction with all aspects of the service. One person who had experienced some issues with the surgical procedure had written a letter to the clinic in which they stated:

'Lesley (the registered manager) has been a wonderful help listening and understanding and sorting out appointments and scan information for me. I really do appreciate the help she has given me.'

Other evidence

People interested in cosmetic surgery can access information by visiting the company's website. This provides comprehensive information about the services available. People can arrange a consultation with a nurse through the website, by telephone, or by calling in at the clinic which is in Chester city centre.

The manager told us that the company does not employ any sales staff and all consultations are with experienced registered nurses. The initial consultation takes about 30 minutes and a consultation form is completed. The form includes personal information, medical history, and a record of the discussion about the treatment options

available. At this point people are given a detailed information booklet about the procedure they are considering. This explains the process, consent requirements, specific information about what will happen before, during and after surgery, the risks and benefits of the treatment.

If the person wishes to continue further, an appointment is arranged with the surgeon and the person is able to discuss the procedure in detail including setting of expectations and risks involved. All consultations are conducted in private rooms. People return to the clinic for post-operative and aftercare services.

Our judgement

People who used the service were given appropriate information and support regarding their care or treatment.

Outcome 02: Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:

- * Where they are able, give valid consent to the examination, care, treatment and support they receive.
- * Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- * Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant with Outcome 02: Consent to care and treatment

Our findings

What people who use the service experienced and told us

We did not have any comments from people about this outcome.

Other evidence

The organisation has clear procedures for gaining patient consent. Records we looked at showed that potential risks, benefits and costs were discussed with patients attending the clinic for consultation with a nurse and they had signed to confirm they understood the information they had received.

The manager told us that if there any concerns about a person's mental health or capacity to make a decision, they are advised to visit their GP and discuss it with them before any treatment can be provided. Treatments are not provided for people under eighteen years of age.

The records we looked at showed that the consultant surgeon had discussed a list of possible risks with the patient and had ticked each one indicating that she had discussed it with the patient. At the end of this record we saw that patients signed to confirm the discussion had taken place.

We looked at records for some people who had completed their treatment and saw that a consent to anaesthetic and surgery had been signed at the hospital before the

surgery took place.

Our judgement

Before people received any care or treatment they were asked for their consent.

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

We did not interview people visiting the clinic, however we looked at records of surveys that had been returned by patients and they showed a high level of satisfaction with all aspects of the service.

Other evidence

There are a series of detailed policies and procedures manuals that cover all aspects of service including specific treatment protocols. Records we looked at showed that all patients were assessed initially by a registered nurse and then by a consultant surgeon. The nurses working at the clinic carried out pre-operative checks of weight and blood pressure, took blood for testing, and swabs to screen for infection and these were recorded in the notes.

We saw post-operative records that were completed at the hospital where the patient had undergone their surgery. These included records of the surgery performed and of the anaesthetic and post-operative care. People were reviewed by the clinic nurse five to seven days after their surgery and by the surgeon one month after surgery.

People using the services can access advice and support when necessary after their operation by using the clinic's emergency telephone number.

Our judgement

People experienced care, treatment and support that met their needs and protected their rights.

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

We did not have any comments from people about this outcome.

Other evidence

The service has policies and procedures dealing with safeguarding and whistle-blowing. The policies included contact numbers that people can call to report abuse or suspected abuse. The Care Quality Commission has not received any concerns about safeguarding relating to this service. All staff are required to have a Criminal Records Bureau disclosure.

The clinic offers a nurse chaperone for all medical consultations and people may bring a relative or friend to attend consultations with them if they wish.

We saw that people were given a detailed costing for the procedure they were going to have and copies of receipts were kept on file.

Our judgement

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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

We did not have any comments from people about this outcome.

Other evidence

There is only one member of staff who works exclusively at this clinic. The nurses, including the registered manager, also work at other clinics in the same group and the manager is also registered as manager of another branch.

We looked at the personnel records for the person working full-time at the Chester clinic. Records were comprehensive and showed the recruitment process, induction training records, Criminal Records Bureau disclosure, one to one support meetings, annual appraisals, and regular training updates.

The manager told us that all staff have annual mandatory training to ensure that their skills and knowledge are up-to-date; all staff have monthly one to one meetings with a senior member of staff; all staff have an annual appraisal. There is a six monthly check of nurses' practice by the company's 'non-surgical training manager'. Records of all of these are kept at the clinic that is the nurse's main place of work.

Our judgement

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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

We did not have any comments from people about this outcome.

Other evidence

The provider has systems in place for monitoring the quality of the service provided. This includes a patient survey to gain the views of patients who have attended the clinic, and a number of audits to monitor practice.

The satisfaction survey asks people about all stages of their treatment from their initial phone call to the aftercare service. We saw records to show that people had also been asked about the quality of the service when they attended for post-operative visits.

The audits we saw included infection control, wound care, medicines management and medical records. We saw evidence of appropriate actions being taken as a result of the audits.

A detailed complaints policy is in place and this was reviewed in February 2012. We saw comprehensive records which showed that complaints were taken seriously, recorded, and responded to appropriately. The manager completed a report about each complaint and this included analysis of whether the complaint could have been prevented, and what preventative measures have been put in place to prevent re-occurrence.

The manager told us that currently any concerns or complaints regarding breast

implants are being dealt with by the company's head office.

Our judgement

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. 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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