

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

The Lawrence Clinic

4-6 Greenside, Pudsey, Leeds, LS28 8PU

Tel: 01132900310

Date of Inspections: 08 October 2013
27 September 2013

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November 2013

We inspected the following standards as part of a routine inspection. This is what we found:

Consent to care and treatment	✓ Met this standard
Care and welfare of people who use services	✓ Met this standard
Safety and suitability of premises	✓ Met this standard
Requirements relating to workers	✓ Met this standard
Assessing and monitoring the quality of service provision	✓ Met this standard

Details about this location

Registered Provider	TLC Medical Centre LLP
Registered Managers	Dr. Suprio Ganguly Mr. Robert Jackson
Overview of the service	The Lawrence Clinic provides podiatry care in Pudsey near Leeds. The Lawrence Clinic provides podiatric foot surgery procedures under local anaesthetic. It is accessible by public transport.
Type of service	Acute services without overnight beds / listed acute services with or without overnight beds
Regulated activities	Diagnostic and screening procedures Surgical procedures Treatment of disease, disorder or injury

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Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 27 September 2013 and 8 October 2013, talked with people who use the service and talked with staff.

What people told us and what we found

People who used the service told us they had experienced appropriate treatment and care. One person said, "I'm more than happy with the care and couldn't be happier with the result." Another person said, "It was a good experience and they put the patient first. They did the right things at the right time."

People told us they had opportunities to ask questions and these had always been answered. One person said they had requested some additional information and were provided with this promptly. Two people said although they were satisfied with their care and treatment they would have liked to have received more information about their recovery.

The provider had taken steps to provide care and treatment in an environment that was suitably designed and adequately maintained. People we spoke with said they had been comfortable when they received care and treatment. Consultations were always held in private so their confidentiality was maintained.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

The provider had an effective system to monitor the quality of the service people received. One member of staff said, "We always make sure we follow procedure and I have every confidence we are doing everything properly." Another member of staff said, "Patients get good continuity. We have a specialist team who are longstanding." Staff confirmed regular discussions took place where they talked about care and safety.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Consent to care and treatment

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

Before people received any care or treatment they were asked for their consent and the provider acted in accordance with their wishes.

Reasons for our judgement

When we visited the service a range of information about foot care was available. A patient leaflet contained information about the services provided by the clinic and a 'fee payers' price list. We spoke with the registered manager, surgeon, scrub nurse and receptionist. They all said people who used the service were given information to help inform their decisions.

The surgeon discussed the systems in place to ensure people were involved in the planning of their treatment. Everyone had at least one consultation which was always a face to face meeting. During the consultation people were given information about the aims of surgery, details of the operation, alternative treatments, general risks and post operation care. The surgeon discussed these procedures as part of the consent process.

People received care and support they agreed to. We spoke with six people who used the service. They told us they had been asked to sign consent prior to the procedure taking place and received written information about the surgery. One person said, "They checked I understood everything before I was asked to sign the consent form."

Everyone said they had opportunities to ask questions and these had been answered. One person said they had requested some additional information and were provided with this promptly. Two people said although they were satisfied with their care and treatment they would have liked to have received more information about their recovery.

We looked at four people's care files. These contained consent forms which were fully completed. Before people received any care or treatment they were asked for their consent and the provider acted in accordance with their wishes.

The service had policies and procedures in place that were up to date. The provider had best practice guidelines for respect and dignity which covered consent and confidentiality.

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

Our judgement

The provider was meeting this standard.

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

Reasons for our judgement

We spoke with six people who used the service and they told us they had experienced appropriate treatment and care. One person said, "I'm more than happy with the care and couldn't be happier with the result." Another person said, "It was a good experience and they put the patient first. They did the right things at the right time."

Staff told us people received very good care and treatment. They said people who used the service received support which was planned to make sure it met their individual circumstances. They said people had clear treatment plans.

Staff we spoke with had a clear understanding of their roles and responsibilities within the team. They said prior to surgery treatment was discussed so everyone understood the procedure.

People's needs were assessed and care and support was planned and delivered in line with their treatment plan. Treatment and support was planned and delivered in a way that ensured people's safety and welfare. The clinic used a paper record keeping system. We looked at four patient records. Records contained information about each person's medical history, consultations, treatment and after care. Copies of correspondence with other healthcare professionals were also available.

There were arrangements in place to deal with possible emergencies. Appropriate equipment was available, stored securely and accessible to staff. Staff had received medical emergencies training and told us that they knew what to do in an emergency.

The service had policies and procedures in place that were up to date. This included a resuscitation policy.

Safety and suitability of premises

✓ Met this standard

People should be cared for in safe and accessible surroundings that support their health and welfare

Our judgement

The provider was meeting this standard.

People who used the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

Reasons for our judgement

People we spoke with said they had been comfortable in the environment when they received care and treatment. Consultations were always held in private so their confidentiality was maintained.

The provider had taken steps to provide care and treatment in an environment that is suitably designed and adequately maintained. The clinic had a reception, operating theatre, bathroom facilities, and two consultation rooms that were also used for pre and post operation care. We looked around the clinic, which was clean, organised and well decorated. The registered manager discussed the systems they had in place to ensure the premises were well maintained.

We looked at service records and certificates which showed the premises had been checked. Equipment had been serviced. The fire records showed tests were carried out to make sure it was in working order. The clinic had relevant documentation to show environmental risks were assessed. For example, they had a fire safety plan and risk assessment.

Requirements relating to workers

✓ Met this standard

People should be cared for by staff who are properly qualified and able to do their job

Our judgement

The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

Reasons for our judgement

There were effective recruitment and selection processes in place. The provider had a human resources policy which identified the procedures for employing new members of staff. These identified what criteria must be met before staff were employed for the purposes of carrying out care and treatment at the service.

We spoke with three members of staff and the registered manager. They said people who used the service were supported by suitably skilled and experienced staff. Everyone said they received good support from the team. All staff who were involved in the regulated activity had worked at the clinic for at least three years.

Appropriate checks were undertaken before staff began work. Staff we spoke with said their suitability to work was assessed and the necessary recruitment and selection checks were carried out. They told us they had received all the information they needed to perform their job well and had been well supported.

We spoke with the registered manager who told us effective recruitment processes were in place and the necessary checks were carried out before staff were employed for the purposes of carrying on the regulated activity. This included obtaining satisfactory evidence of relevant qualifications, immunisation status, conduct in previous employment and a criminal record check.

We looked at three staff files which showed relevant checks had been carried out and the provider's human resources policy had been implemented.

Assessing and monitoring the quality of service provision

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

The provider had an effective system to regularly assess and monitor the quality of the service that people received. The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people using the service and others.

Reasons for our judgement

The provider had an effective system to monitor the quality of the service people received. Staff said everyone carried out appropriate checks to make sure everything was in place. They said the registered manager monitored staff training to ensure they were equipped with the right skills to do their job well. One member of staff said, "We always make sure we follow procedure and I have every confidence we are doing everything properly." Another member of staff said, "Patients get good continuity. We have a specialist team who are longstanding." Staff confirmed regular discussions took place where they talked about care and safety.

People who used the service and others were asked for their views about the service and they were acted upon. People's care records showed during follow up appointments, treatment was assessed. We looked at the provider's customer satisfaction survey; audit of results which showed people had been satisfied with their treatment. When asked if their original expectations were met, 100% replied yes. When asked if the risks and complications of surgery were explained, 100% replied yes. When asked to describe their foot condition since treatment, 100% replied much better or better.

The provider identified, monitored and managed risks to people who used or worked in the service. We looked at a number of assessments and audits which showed regular checks were carried out to help make sure people who used the service benefitted from safe quality care. Records showed the provider had monitored the environment, staff training, risk assessments and patient records. For example, the provider had carried out a patient record audit in August and found information was being appropriately recorded. The provider's policies and procedures identified the arrangements in place to provide safe and effective care.

On arrival at the clinic we noted the provider's statement of purpose was available in reception. This provided people with information about the services offered and arrangements in place, which included dealing with complaints. The registered manager

told us there were no open complaints at the time of our inspection.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact - 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.

Moderate impact - 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.

Major impact - 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

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

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