

Inspection Report 2008/2009

Medecins Du Monde UK

Praxis, Bethnal Green United Reformed Church, Pott Street, London, E2 0EF.

Introduction

Certain independent healthcare providers in England must be registered with the Healthcare Commission. Those that need to be registered are defined in the Care Standards Act (2000) and include Acute and Mental Health Hospitals, some private doctors and some smaller medical services that provide specialist medical services such as endoscopy. To register, they need to demonstrate compliance with the Act and associated regulations. The Healthcare Commission tests providers' compliance by assessing each registered establishment against a set of National Minimum Standards, which were published by the Government and set out the minimum standards for different types of independent health services.

In addition to this report, the establishment has been given further details about how we have arrived at their assessment. If you wish to see or discuss this additional information, you may ask the provider for this, at their discretion. The establishment's action plan, which sets out the steps it is taking in response to this assessment, may also be requested from the provider. You should contact the Registered Person at the establishment address at the top of this page regarding both the additional information and the action plan.

Background

Medecins du Monde is an international medical humanitarian non-governmental organisation that aims to provide healthcare for vulnerable people around the world. Medecins du Monde UK Project London was set up to improve access to affordable healthcare by providing advocacy and support services for people who are not registered with an NHS GP. Project London works in partnership with Praxis, an organisation that works with new migrants and refugees in East London. Medecins du Monde UK Project London is registered with the Healthcare Commission to offer services from a medical practitioner in a 'walk-in' medical centre. Patients are seen on a 'one off' basis by a doctor or nurse as well a support worker. Clients of the service are offered help with registering with an NHS GP, or maybe referred directly to NHS hospital based clinics. Patients may also be prescribed medication in conjunction with a partner pharmacy.

Medecins du Monde UK Project London operates on Mondays, Wednesdays and Fridays between 1pm and 5pm from a consulting room and two treatment rooms on the ground floor of the building. The service is accessible to disabled people and the facility is well served by public transport including buses on Bethnal Green Road and Bethnal Green underground station which is a five-minute walk away.

This inspection took place on 12 February 2009, and was announced.

Main findings

The establishment was clean and all information requested was readily available. This risk based inspection focussed on the decontamination of medical devices, consent, policies and the complaints process.

The majority of medical devices are single use and disposed in yellow clinical waste bags. Separate waste bins are used for non-clinical waste. The appropriate contracts are in place for the collection and disposal of this clinical waste. Decontamination processes and procedures for the glucose meter and peak flow meter are documented within the Volunteer Handbook in the 'Medical Devices' section (p37), however currently there is no system in place to record the date decontamination of medical devices takes place.

The Volunteer Handbook includes all the policies and procedures of the establishment. All staff sign the volunteer charter, and by doing so agree that they have read and understood all relevant policies. This is recorded on the volunteer charter database. This data base was observed.

Three types of consent are obtained from patients – verbal consent for any medical procedure and written consent is requested for personal data collection and to allow discuss in staff debriefing sessions to identify improvements in working practices. Consent is recorded in each patients file. The duty manager quality assures each patient file and highlights any issues (including if consent is not recorded), however at present there is no system in place to demonstrate assurance without reviewing each file.

The establishment has access to language line, interpreters and produces it's literature in a range of languages. These services are used provide patients with information, including the complaints procedure, relating to the establishment.

The establishment is currently operating without a registered manager, the duty manager and responsible individual stated that the required information for the application has now been collected and will be submitted. Although this establishment has been observed to be well managed submission of the application for a new registered manager is a priority and has been made a requirement within this report..

Registration Categories

This registration is granted within the following categories only

Description	Service Category
Independent Clinic	IC
Private doctors: walk-in medical centres	PD-M

Conditions of registration

This registration is subject to the following conditions. Each condition is inspected for compliance. The judgement is described as Met, Almost Met, Not Met or Not Inspected

Condition	Assessment
The clinic shall not undertake surgical treatments or procedures.	Met

Assessments

Prior to assessment, each establishment or agency is required to complete an assessment of their own performance against the National Minimum Standards. This is used along with other performance information held by the Commission to make a decision on the need for further assessment. Where overall assessment shows compliance with the standards, organisations may not be inspected each year.

The Healthcare Commission only carries out on site inspections to make assessments of standards where we do not have sufficient evidence that the required level of performance is

being achieved. In some instances, we do not assess a standard. This is either because the standard was not applicable or because, following an assessment of the risks, no risks were identified and therefore it was decided that there was no need for the standard to be further checked through an inspection.

Our inspections are targeted to areas of potential risk. They focus on areas where previous inspections, the establishment's own data and inspectors' observations suggest potential risks. Further areas are also added as spot checks. In general, a smaller number of standards assessed at inspection reflects a strong ability in the establishment to demonstrate satisfactory performance. The Healthcare Commission is required to inspect establishments at least once every five years and this report reflects the assessment of the establishment or agency at a given point in time.

For each standard that we assess, we use a four point scale.

Standard met	Achieving the required levels of performance in all aspects of the standard
Standard almost met	Not achieving the required levels of performance in some aspects of the standard
Standard not met	Significant action is needed to achieve the required levels of performance
Not inspected	This is either because the standard was not applicable or because, following an assessment of the risks, no risks were identified and therefore it was decided that there was no need for the standard to be further checked through an inspection.

The assessments are grouped under the following headings:

- Safety - does the establishment provide treatment and care safely?
- Clinical and cost effectiveness - is the best possible treatment provided?
- Governance - is the establishment well run?
- Patient focus - does the establishment put the patient first?
- Accessible and responsive care - is care organised around patients' needs and wishes?
- Care environment and amenities - is the place where you are treated well designed and maintained?

Types of Standards

Each standard number is prefixed by a letter denoting the type of standard it represents:

- C Core Standards
- A Acute Hospitals
- M Mental Health Establishments
- H Hospices
- MC Maternity Hospitals
- TP Termination of Pregnancy Establishments
- P Prescribed Techniques and Prescribed Technology – includes Lasers, Intense Pulsed Lights, Dialysis, Endoscopy, Hyperbaric Oxygen Treatment and In-Vitro Fertilisation
- PD Private Doctors

Requirements

Following assessment, improvements are required for those standards, which are found to be judged either 'not met' or 'almost met' and do not comply with the Private and Voluntary

Healthcare Regulations 2001. Improvement to comply with the requirements is the responsibility of the 'registered person' who may be either the registered manager or the registered provider. The Healthcare Commission will ask the provider for their plan of action to demonstrate how they are going to comply with the requirement(s) made. The Healthcare Commission will then agree and monitor the action plan but if necessary, will take enforcement action to ensure compliance with the regulations.

Assessments and Requirements

Safety

Number	Standard Topic	Assessment
A11	Decontamination	Almost met

No	Standard	Regulation	Requirement	Time scale
A11	Decontamination	15(3) & (4)	<p>Findings: Policies and procedures relating to the decontamination are in place, however a system to provide assurance that decontamination of medical devices has taken place has not been implemented.</p> <p>Action required: A system to provide assurance that the decontamination of medical devices needs to be implemented. Written confirmation needs to be provided to the Healthcare Commission by the date shown, that a suitable system has been implemented.</p>	9 March 2009

Clinical and cost effectiveness

Number	Standard	Assessment
--------	----------	------------

No	Standard	Regulation	Requirement	Time scale
			Findings n/a	
			Action Required	

Governance

Number	Standard	Assessment
C7	Policies and Procedures	Met
C8	Role and Responsibilities of the Registered Manager	Not met

No	Standard	Regulation	Requirement	Time scale
C8	Role and Responsibilities of the Registered Manager	12	<p>Findings: There is no registered manager in place.</p> <p>Action required: A registered manager application needs to be submitted to the Healthcare Commission by the date shown.</p>	9 March 2009

Patient focus

Number	Standard	Assessment
C2	Patient Centred Care	Almost met
C15	Information for Patients about Complaints	Met

No	Standard	Regulation	Requirement	Time scale
C2	Patient Centred Care	9 (3)	<p>Findings: Consent is obtained and recorded in patient files. The duty manager quality assures each patient file and highlights any issues (including if consent is not recorded), however there is no system in place to demonstrate assurance without reviewing each file.</p> <p>Action required: A system to provide assurance that the consent has been recorded needs to be implemented. Written confirmation needs to be provided to the Healthcare Commission by the date shown, that a suitable system has been implemented.</p>	9 March 2009

Accessible and responsive care

Number	Standard Topic	Assessment
--------	----------------	------------

No	Standard	Regulation	Requirement	Time scale
			Findings n/a Action Required	

Care environment and amenities

Number	Standard Topic	Assessment
--------	----------------	------------

No	Standard	Regulation	Requirement	Time scale
			Findings n/a Action Required	

The Healthcare Commission exists to promote improvement in health and healthcare. We have a statutory duty to assess the performance of healthcare organisations, award annual performance ratings for the NHS and coordinate reviews of healthcare by others. In doing so, we aim to reduce the regulatory burden on healthcare organisations and align assessments of the healthcare provided by the NHS and the independent (private and voluntary) sector. The Healthcare Commission's full name is the Commission for Healthcare Audit and Inspection.

This document may be reproduced free of charge in any format or medium, provided that it is not for commercial resale. This consent is subject to the material being reproduced accurately and provided that it is not used in a derogatory manner or misleading context. The material should be acknowledged as © 2007 Commission for Healthcare Audit and Inspection and the title of the document specified. Applications for reproduction should be made in writing to: The Chief Executive, Commission for Healthcare Audit and Inspection, 103-105 Bunhill Row, London, EC1Y 8TG.