

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

Woodford Medical Limited

8 Upper Wimpole Street, London, W1G 6LH

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

Respecting and involving people who use services	✓ Met this standard
Care and welfare of people who use services	✓ Met this standard
Safeguarding people who use services from abuse	✓ Met this standard
Supporting workers	✓ Met this standard
Assessing and monitoring the quality of service provision	✓ Met this standard

Details about this location

Registered Provider	Woodford Medical Limited
Registered Manager	Dr. Mervyn Patterson
Overview of the service	Woodford Medical Limited is a private clinic, providing non-invasive cosmetic skin treatments to adults. Treatments include hair and blemish removal using intense pulsed light therapy, sclerotherapy and mole removal. The clinic is located in Central London and appointments are booked via the provider's head office in Essex.
Type of services	Doctors consultation service Doctors treatment service
Regulated activity	Treatment of disease, disorder or injury

Contents

When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

	Page
Summary of this inspection:	
Why we carried out this inspection	4
How we carried out this inspection	4
What people told us and what we found	4
More information about the provider	4
Our judgements for each standard inspected:	
Respecting and involving people who use services	6
Care and welfare of people who use services	7
Safeguarding people who use services from abuse	8
Supporting workers	9
Assessing and monitoring the quality of service provision	10
About CQC Inspections	11
How we define our judgements	12
Glossary of terms we use in this report	14
Contact us	16

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 reviewed all the information we have gathered about Woodford Medical Limited, looked at the personal care or treatment records of people who use the service, carried out a visit on 27 November 2012 and talked with staff.

What people told us and what we found

It was not possible to speak to people who use the service as no one had an appointment booked at the time of the inspection. However, we looked at recent testimonials from people who use the service on the provider's website and the 2012 feedback summary report. These indicated that people were satisfied with the quality of the care provided. One person had written "I can't rate this clinic highly enough for standard of care and professionalism".

Information leaflets on the different procedures provided at the clinic were sent to people before their appointment. Every person had a consultation with a therapist or doctor before the procedure was carried to assess their suitability for the treatment. A medical history was taken for each person and staff told us that they would advise a person when a treatment might not be appropriate.

There were systems in place to deal with foreseeable emergencies and any adverse incidents were logged and investigated. Managers undertook annual audits on patient records, complaints, incidents and staff appraisals and ensured policies and procedures were regularly reviewed. The results of these audits were used to produce a summary report on the clinic. Staff received appropriate professional development and the doctors who worked at the service were appraised by another doctor independent who was external to the clinic.

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

Respecting and involving people who use services ✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People's privacy, dignity and independence were respected.

Reasons for our judgement

People expressed their views and were involved in making decisions about their care and treatment. Appointments were arranged by the provider's clinic in Essex and people could choose which location was the most convenient for them. People who use the service had an initial consultation with either a doctor or therapist to discuss their options and suitability for treatment.

People who use the service were given appropriate information and support regarding their care or treatment. There were information leaflets available on the different procedures provided. Staff told us that these were sent to a person before they attended their appointment. The provider's website also provided information on the treatments available and what people could expect at their consultation. It was not possible to speak to people who use the service as no one had an appointment booked at the time of the inspection. However, we looked at recent testimonials on the provider's website and the 2012 feedback summary report. People felt that their treatment had been fully explained to them and were complimentary about the service. One person had said, "everything was thoroughly explained and I am extremely happy".

People's diversity, values and human rights were respected. All consultations took place in private and there were chaperone arrangements in place.

There was no step-free access available at the clinic, which was explained to people when they booked their appointment so they could attend one of the provider's other locations.

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, treatment and support that met their needs and protected their rights.

Reasons for our judgement

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. People who use the service had an initial consultation with a doctor or therapist to assess the person's suitability for treatment. Staff told us that the doctor would see any person where there were concerns or they required more complex treatment. Staff ensured that any skin blemishes were benign before treatment was carried out. If there were concerns the provider had arrangements in place with a laboratory and would request a histology report. If required, the person was referred back to their GP.

It was not possible to speak to people who use the service as no one had an appointment booked at the time of the inspection. However, we looked at recent testimonials on the provider's website and the 2012 feedback summary report. 50 feedback questionnaires had been received and all of them indicated that people were satisfied with the service and had been reassured by staff. One person said that they "couldn't recommend the clinic highly enough".

A medical and treatment history was taken for each person, which included any known allergies. We looked at two people's records and saw that this information had been recorded. Any adverse reactions to treatment were recorded, but none had occurred to date.

There were arrangements in place to deal with foreseeable emergencies. All staff had received basic life support training and were required to call the emergency services. There was a first aid kit available and all items were in date. We saw evidence that staff carried out monthly checks.

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

Our judgement

The provider was meeting this standard.

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.

Reasons for 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. The clinic did not provide treatment to children. Staff who had contact with people who use the service had received safeguarding training. The provider might find it useful to note that some staff had not received training since 2006.

There were child protection and safeguarding vulnerable adults policies in place, which included the procedure for staff to follow should they have a concern. The provider might find it useful to note that the policy for safeguarding vulnerable adults did not include the contact details for the local safeguarding adults team.

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

Our judgement

The provider was meeting this standard.

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

Reasons for our judgement

Staff received appropriate professional development. Therapists received annual refresher training on the intense pulsed light equipment and their competencies were tested. The therapists also received updates from the manufacturers on skin treatments provided at the clinic.

All staff were appraised annually. The doctors who worked at the clinic peer reviewed each other, but were also appraised each year by a doctor who was independent to the clinic. We looked at one doctor's appraisal from February 2012 and saw that the doctor's clinical practice had been discussed. All doctors kept up to date with their continuing professional development (CPD).

Staff we spoke with told us that they enjoyed working for Woodford Medical Limited. All staff were given a staff handbook, which included the provider's whistleblowing policy. It was not possible to speak to people who use the service as no one had an appointment booked at the time of the inspection. However, we looked at recent testimonials on the provider's website and the 2012 feedback summary report. People were complimentary about the staff, describing them as "friendly" and "professional".

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 service that people receive.

Reasons for our judgement

People who use the service were asked for their views about their care and treatment and they were acted on. Feedback questionnaires were sent out to people and the provider produced an annual feedback summary report. The provider took account of complaints and comments to improve the service. At the time of the inspection, there were no on-going complaints. However, staff told us that feedback was discussed at staff meetings. These meetings took place monthly and were attended by a representative from each staff group. The minutes from these meetings were shared with all staff.

Decisions about care and treatment were made by the appropriate staff at the appropriate level. People who use the service were either seen by a qualified therapist or doctor to assess their suitability for a treatment. There were internal monitoring systems in place. Managers conducted annual audits on patient records, complaints, incidents and staff appraisals and ensured policies and procedures were up to date. The results of these audits were used to produce a summary report on the clinic. The provider might find it useful to note that the last infection control audit was carried out in 2006.

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 dentists and other services at least once every two years. 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 but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

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. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. 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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