

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

London Eye Diagnostic Centre

23 Harley Street, London, W1G 9QN

Tel: 02073235967

Date of Inspection: 23 July 2013

Date of Publication: August
2013

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
Cleanliness and infection control	✓ Met this standard
Safety, availability and suitability of equipment	✓ 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	Darmalingum Poinosawmy
Registered Manager	Mr. Darmalingum Poinosawmy
Overview of the service	The centre offers advanced eye diagnostic tests and consultant appointments with ophthalmic specialists. There is a laser suite for minor treatments. The suite of rooms is on the second and third floors of a house and there is a lift.
Type of service	Doctors treatment service
Regulated activities	Diagnostic and screening 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 23 July 2013, talked with people who use the service and talked with staff. We reviewed information given to us by the provider.

What people told us and what we found

We spoke to three people who had all used the service for a number of years. They said "it is an efficient service", "the staff are friendly and know me well" and it is "easy to get an appointment" and all they said that they were given enough information about their tests and proposed treatment.

We looked at people's treatment plans and saw that documentation was clear and comprehensive.

On the day of our visit the centre was clean and tidy and we saw evidence that equipment was regularly serviced and maintained in line with the manufacturer's recommendations.

Staff were suitably qualified for their roles at the centre and appropriate checks had been made before they started work.

We saw that the centre sought feedback from people using the service and took account of their views.

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.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

Reasons for our judgement

We were told that people were referred for diagnostic eye tests by their eye doctors or GP. Many came for assessments at the centre annually.

People who use the service were given appropriate information and support regarding their care or treatment. The centre had a website that gave information about the various tests available at the centre and there was also information in the waiting room.

One person said in written feedback "the technician was very helpful and explained what she was going to do, and what we would see." People confirmed that they had enough information to make an informed decision about further treatment. Information about the cost of each test was set out in the patient guide.

People told us that they were given "detailed information by the doctor both verbally and, after the consultation, in writing". They said that the centre responded quickly if they had questions or concerns about their treatment.

People felt their privacy and dignity were respected. Tests and consultations took place in private. Where the centre was reporting results to the referring doctor, a copy was also given to the person if they wished.

There was a ramp for the steps to the front door and a lift so the centre was accessible to people using wheelchairs. People were able to bring an interpreter with them to a consultation, if needed.

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

Peoples' needs were assessed and care and treatment was planned and delivered in line with their individual care plan. The records we reviewed made it clear that people's medical history had been discussed at their first and subsequent appointments and that treatment was planned in the light of this. We also saw that people had signed consent forms indicating that they understood and agreed to their proposed treatment. One person who needed surgery said that "the consultant discussed the risks and benefits with me."

Staff told us that diagnostic test results were usually available on the same day and people we spoke with confirmed this. People were able to discuss the results and the possible treatments with a specialist at the centre shortly after their tests and one person said "I appreciate the same day service."

There were 13 doctors on the centre's register of authorised users of the lasers. These specialists had been trained in safe laser use and signed the centre's local rules. .

There were arrangements in place to deal with foreseeable medical emergencies. Staff confirmed that they had basic life support and first aid training, and said that a doctor was usually on the premises. There was emergency equipment on site although in the event of a medical emergency staff would call an ambulance.

People should be cared for in a clean environment and protected from the risk of infection

Our judgement

The provider was meeting this standard.

People were protected from the risk of infection because appropriate guidance had been followed.

People were cared for in a clean, hygienic environment.

Reasons for our judgement

There were effective systems in place to reduce the risk and spread of infection. There was a contract for cleaning the suite of rooms and technicians were responsible for cleaning patient contact surfaces in the test and treatment rooms. The rooms were clean and well maintained on the day of our visit.

The centre's infection control policy covered hand washing and the use of hand sanitisers, as well as the cleaning of patient contact surfaces.

All eye drops were in single use vials so there was no possibility of cross contamination.

There was a contract in place for removal of clinical waste and sharp items.

A legionella test had been carried out in June 2013 and the water samples were all satisfactory.

People should be safe from harm from unsafe or unsuitable equipment

Our judgement

The provider was meeting this standard.

People were protected from unsafe or unsuitable equipment.

Reasons for our judgement

People were protected from unsafe or unsuitable equipment because the provider ensured that the diagnostic equipment was maintained in line with the manufacturer's instructions and serviced regularly.

We saw up to date service and maintenance records for the lasers. One of the technicians was the designated on-site Laser Protection Supervisor. He told us that the centre drew on the expertise of an external specialist Laser Protection Advisor who visited annually and inspected the laser room and gave safety advice. We were told that the lasers performed calibration routines before use so staff were able to check that they were working properly. We saw that the centre's laser register was completed for each treatment so there was an audit trail in case of need.

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 four technicians and two consultant doctors as permanent clinical staff. A number of other doctors had also been granted practicing privileges by the centre. These doctors undertook consultations and carried out laser treatment at the centre on a sessional basis. The centre kept a record of Criminal Record Bureau (CRB), now Disclosure and Barring Service checks undertaken as well as records that they had maintained their registrations with the General Medical Council.

There were effective recruitment and selection processes in place as well as induction procedures. A new member of staff confirmed that these were followed.

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

We saw feedback forms from the patient survey and an audit of patient's views that had been carried out in June 2013. This showed a high degree of satisfaction with the service. Suggestions for improvements were minor but we saw that the provider took account of points people made in order to improve the service.

People were made aware of the complaints system. The centre would respond to a written complaint within five days. There had been no formal complaints in the past year. We were told that if people had a concern they would usually raise it in person with the doctor and it would be resolved in discussion.

The centre had book to record accidents and incidents but there had been no accidents or incidents during the past year.

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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