

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

## Guy Barrington Staight - Pelham Street

2 Pelham Street, London, SW7 2NG

Tel: 02075814222

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

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

## Details about this location

Registered Provider	Guy Barrington Staight
Registered Manager	Dr. Guy Staight
Overview of the service	Guy Barrington Staight - Pelham Street is a private doctor's practice situated close to South Kensington tube station. The location offers general medical services to adults and children. There are two general practitioners, a nurse, physiotherapist, clinical psychologist, a nutritionist and podiatrist who also provide care and treatment at the surgery.
Type of services	Doctors consultation service Doctors treatment service
Regulated activities	Diagnostic and screening procedures 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'.*

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## Summary of this inspection

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### Why we carried out this inspection

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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 announced inspection.

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### How we carried out this inspection

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We looked at the personal care or treatment records of people who use the service, carried out a visit on 18 July 2013 and talked with staff.

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### What people told us and what we found

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We were unable to speak to people during the inspection however we have used their feedback and comments from the provider's most recent satisfaction survey. People rated the care and treatment highly and their comments included "First class doctor. The best I have experienced" and "I go out of my way to see this doctor".

We found people's needs were assessed and care and treatment was planned and delivered in line with their individual wishes. Consultations were held in private and the findings were recorded at the time in people's medical records.

There were arrangements in place to deal with foreseeable emergencies and staff were trained to deal with medical emergencies and in basic life support. The provider had an effective system to regularly assess and monitor the quality of service that people received.

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

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### More information about the provider

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Please see our website [www.cqc.org.uk](http://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

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### Our judgement

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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.

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### Reasons for our judgement

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People who use the service understood the care and treatment choices available to them. The registered manager told us people accessed information about the service through its comprehensive website. The website detailed the services offered, the healthcare professionals working in the surgery, the operating hours and how to contact the surgery. The provider may wish to note the details and logo of the previous regulator was still displayed on the webpage.

People expressed their views and were involved in making decisions about their care and treatment. We were unable to speak to people during the inspection however we have used their feedback and comments from the most recent satisfaction survey. People rated the care and treatment highly and comments included "First class doctor. The best I have experienced" and "I go out of my way to see this doctor".

People's diversity, values and human rights were respected. People using the service could choose the gender of the doctor they wanted to see. We saw people's consultations were carried out in designated consulting rooms and examination couches were screened for privacy. We were told patients who required translator services were asked to bring one with them to the appointment. There was a chaperone policy in place and people were informed of their right to request a chaperone. The surgery was not accessible to wheelchair users and the doctor told us they provided home visits for people who were less mobile or elderly if required.

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

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**Our judgement**

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The provider was meeting this standard.

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

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**Reasons for our judgement**

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People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan. People in their feedback about the service commented "I go out of my way to see this doctor". The registered manager told us people rang to make appointments and their individual preferences were taken into account when arranging a time. People were also able to speak to the doctors for advice and emergency requests for appointments were accommodated on the day.

People using the service for the first time completed a registration card which was scanned onto the electronic patient record system. They also completed a medical history form which was reviewed in detail at their appointment. Records seen showed the medical history was reviewed and details of current issues were documented with details of the proposed treatment and follow up evident. The system allowed medical alerts to be set to remind the doctors to follow up on issues.

There were arrangements in place for out of hours medical cover provided either by the registered manager or an out of hours service. We saw the formal signed agreement to provide the cover and records of the providers annual monitoring of the out of hours service.

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. The provider ensured risk assessments were completed and arrangements were in place to ensure staff and people's safety. Accidents and incidents were documented and investigated. Staff meetings were used to discuss issues and provide feedback. Agreements and contracts were in place with local independent hospitals and laboratories to ensure diagnostic tests were conducted in appropriate facilities.

There were arrangements in place to deal with foreseeable emergencies. The registered manager told us they had a business continuity plan and could operate if there was any disruption to the location. The practice had an emergency 'grab bag' with oxygen and rebreathing equipment which was regularly checked and maintained. There were emergency policies available and showed evidence of review. Staff had received training

in April 2013 in basic life support.

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

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**Our judgement**

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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.

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**Reasons for our judgement**

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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. We saw the provider had a safeguarding children policy in place and the contact details of the local authority safeguarding team were available. We saw records that healthcare professionals had attended safeguarding vulnerable children training. The provider demonstrated an awareness of safeguarding vulnerable adults processes and The Mental Capacity Act but had not attended formal training.

The provider had a system in place to record incidents of concern and told us staff could and would approach him at any time. We saw there was a whistle blowing policy available. We also saw there were regular practice/ staff meetings which provided an opportunity for staff to raise issues.

## Supporting workers

✓ Met this standard

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

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### Our judgement

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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.

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### Reasons for our judgement

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Staff received appropriate professional development. Staff with a professional qualification were subject to revalidation with their professional body. Continuous professional development (CPD) was well organised and documented. The doctor's benefitted from regular training sessions by visiting professionals in addition to formal courses. We saw two staff files which had details of training and revalidation.

## 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

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### Our judgement

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The provider was meeting this standard.

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

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### Reasons for our judgement

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People who use the service, their representatives and staff were asked for their views about their care and treatment and they were acted on. The provider conducted regular surveys to give people using the service an opportunity to comment on their experiences of it. The most recent audit was carried out in November 2012 and was designed to get people's views about the practice website. The results showed 70% of people were not aware of the website. There was an action plan in place to improve patient use of the website to order medication and manage communication.

There was evidence that learning from incidents / investigations took place and appropriate changes were implemented. The provider took account of complaints and comments to improve the service. The doctors carried out a number of clinical audits to monitor and improve treatment and care. They attended monthly clinical meetings with another practice of a similar size to compare findings. The registered manager told us the doctors peer reviewed a sample of each others records to ensure professional standards of documentation and treatment pathways were maintained. The minutes documented discussions and the actions taken to remedy or make improvements in the service.

## 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.

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**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.

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**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.

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**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

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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)

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### **(Registered) Provider**

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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'.

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### **Regulations**

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

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### **Responsive inspection**

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

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### **Routine inspection**

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

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### **Themed inspection**

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

## Contact us

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Phone: 03000 616161

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Email: [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

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Write to us  
at: Care Quality Commission  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA

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Website: [www.cqc.org.uk](http://www.cqc.org.uk)

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