Assura Blackpool LLP  
Oldham Integrated Care Centre

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<th>Region:</th>
<th>North West</th>
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<tr>
<td>Location address:</td>
<td>New Radcliffe Street  Oldham  Lancashire  OL1 1NL</td>
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<tr>
<td>Type of service:</td>
<td>Doctors consultation service  Doctors treatment service</td>
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<td>Date of Publication:</td>
<td>April 2012</td>
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| Overview of the service: | Oldham Community Dermatology Service provides consultation, advice, diagnostics and treatment from doctors and consultants who have a specialist interest in skin conditions and diseases (dermatology).  
   The service is provided by Assura Blackpool LLP which works closely with Oldham NHS as commissioning |
partners and local hospitals to provide a community integrated health care service. Consultations, diagnostics and minor surgery are offered on a sessional basis at Oldham Integrated Care Centr
Summary of our findings
for the essential standards of quality and safety

Our current overall judgement

Oldham Integrated Care Centre was meeting all the essential standards of quality and safety.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 9 March 2012, looked at records of people who use services and talked to staff.

What people told us

All patients spoken with praised the service and made positive comments about the staff and standard of care and treatment received. They told us that they received good information about the service and that they were treated with respect. They told us that staff put them at their ease, and listened to them and involved them in their treatment by discussing their diagnoses and explaining the risks and benefits of their options and treatment plan.

Patients were impressed with the staff and the professional but friendly and welcoming way in which they carried out their duties and responsibilities. One person said "the staff are exceptional; very courteous and reassuring in their professionalism".

Patients told us that they had confidence in the service and were routinely asked to comment on the quality of service and treatment provided. One person told us that they were very impressed with the service, overall. They said the service was "exceptional in terms of quality and service delivery".

What we found about the standards we reviewed and how well Oldham Integrated Care Centre was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

The provider ensures that patients understand the care, treatment and support available to them and supports them to express their views about the facilities, services, care and treatment provided.
Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

People who use the service receive safe and appropriate care and treatment that meets their needs and protects their rights.

Outcome 07: People should be protected from abuse and staff should respect their human rights

The people who use the service are safeguarded from abuse and the risks of abuse.

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

The service provides enough suitably qualified and experienced staff to safeguard the health, safety and welfare of patients.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

Quality assurance systems are in place, so patients benefit from safe care and treatment that meets their needs and expectations.

Other information

Please see previous reports for more information about previous reviews.
What we found
for each essential standard of quality
and safety we reviewed
The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

**Compliant** means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*
Outcome 01:  
Respecting and involving people who use services

What the outcome says
This is what people who use services should expect.

People who use services:
* Understand the care, treatment and support choices available to them.
* Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
* Have their privacy, dignity and independence respected.
* Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement
The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us
When we visited Oldham Community Dermatology Service we spoke with three people who were patients of the practice. All the people we spoke with told us that they were happy with the care and treatment provided. They told us that they received an informative brochure with a letter confirming their appointment. They said that the staff at the practice treated them with respect and put them at their ease, involving them in discussion about their symptoms and treatment options.

Other evidence
The service gives all prospective patients an informative brochure which sets out the basis on which the service is provided and offers practical guidance on such things as making and cancelling an appointment, the qualifications of clinicians and making a complaint. The brochure is made available in other formats and languages upon request. In addition the service provides a patient rights and responsibilities leaflet and other information including the certificate of registration is available at reception.

We found that patients’ privacy and dignity were maintained. Consultations take place in a private room and there is as separate treatment room.

Staff told us that all information disclosed by a patient is confidential. We saw that all
information given by patients was held securely and that all staff were aware of confidentiality and data protection.

There are systems in place to seek feedback from people using the service. Patients are invited to complete a quality assurance questionnaire on each visit. Records showed that the information from completed quality assurance questionnaires is collated and used to inform ongoing development and improvement in practice.

Our judgement
The provider ensures that patients understand the care, treatment and support available to them and supports them to express their views about the facilities, services, care and treatment provided.
Outcome 04:  
Care and welfare of people who use services

What the outcome says
This is what people who use services should expect.

People who use services:
* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement
The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us
All patients spoken with praised the service and made positive comments about the staff and standard of care and treatment received. They told us that the staff listened to them and involved them in their treatment by discussing their diagnoses and explaining the risks and benefits of their options and treatment plan. One person told us that they were very impressed with the service. They said the service was "exceptional in terms of quality and service delivery". They found that staff were efficient, professional and very reassuring.

Other evidence
All patients spoken with had been referred to the practice by their own general practitioner (GP). After obtaining consent from two patients we looked at their clinical records. People were asked about their medical histories and we saw individualised clinical notes detailing examination, treatment planning and further investigations where required. We could see that peoples' views were taken into consideration and acted upon. Each patient's GP is informed, in writing, of the outcome of the consultation and any treatment given to ensure continuity of care.

Patients are reminded of their rights to refuse any recommended procedure or receive a second opinion, as set out in the service's patients' rights and responsibilities guide.

Patients are also reminded of their right to access their medical records and guidance on how to go about this is set out in the service's patient information guide.
We saw that the practice had extensive policies and procedures, which staff were able to show and discuss with us. The service has clinical governance processes and procedures in place to ensure people experience effective, safe and appropriate care and treatment that meets their needs and protects their rights. The patient experience report covering the period June to December 2011 illustrates high degrees of patient satisfaction ranging from 96 to 100% each month.

Our judgement
People who use the service receive safe and appropriate care and treatment that meets their needs and protects their rights.
Outcome 07: Safeguarding people who use services from abuse

What the outcome says
This is what people who use services should expect.

People who use services:
* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement
The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us
When we visited the practice we asked patients if they felt safe and if they had confidence in the service. All three patients spoken with told us that they felt safe and had confidence in the staff. One person said "they treat me with respect; exceptional staff; very courteous and reassuring in their professionalism".

Other evidence
Staff were able to demonstrate that they knew what constituted abuse and were aware of the practice's and local adult and child safeguarding procedures. They were able to tell us the correct procedure to follow if they suspected abuse and had access to appropriate guidance including telephone numbers and contact details.

We were told that staff had received training on child and adult protection procedures and we saw certificates to confirm this.

Staff recruitment records showed that proper checks were carried out including criminal records checks, and checks on registration with professional bodies, where appropriate, before employment commenced.

Our judgement
The people who use the service are safeguarded from abuse and the risks of abuse.
Outcome 13: Staffing

What the outcome says
This is what people who use services should expect.

People who use services:
* Are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

What we found

Our judgement
The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us
Patients told us that they were impressed with the staff. One person said "the staff are exceptional; very courteous and reassuring in their professionalism".

Other evidence
The manager was able to demonstrate that there were a sufficient number of skilled staff with the right competencies, knowledge, qualifications, skills and experience to meet the needs of patients.

The staff team comprised a registered manager, a service manager, three doctors, a registered general nurse and two health care assistants. Records showed that each staff member was qualified according to the requirements of their respective discipline. Information provided by the registered manager showed that each clinician was registered with the General Medical Council and had undertaken specific training in dermatology and a range of other topics including child and adult protection. Both health care assistants had achieved a National Vocational Qualification in health and social care at level three and had also completed training in a range of other relevant topics including infection control and child and adult protection.

Our judgement
The service provides enough suitably qualified and experienced staff to safeguard the health, safety and welfare of patients.
Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says
This is what people who use services should expect.

People who use services:
* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

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All patients spoken with praised the service and made positive comments about the staff and standard of care and treatment received. They told us that they were routinely asked to comment on the quality of service and treatment and all said they had made positive comments. One person told us that they were very impressed with the service. They said the service was "exceptional in terms of quality and service delivery".

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| Oldham Community Dermatology Service has an established quality assurance system which is based on seeking and acting on the views of patients. Each patient is invited to complete a Dermatology Service Questionnaire before they attend for their first appointment and another following treatment. The questions are designed to help staff measure and improve the quality of health care provided and are based on patient outcomes. In addition patients are invited to complete an Oldham Community Dermatology Service Patient feedback form which focuses on the quality of service delivered. The information is collated and presented in a monthly patient experience report for analysis and review by clinicians, managers and the clinical governance team.

The patient experience report covering the period June to December 2011 illustrates high degrees of patient satisfaction ranging from 96 to 100% each month. Comments made by patients during this period were almost entirely positive. For example one comment was "excellent service" and another "I was impressed by the service and felt
comfortable and listened to and satisfied with the outcome of consultation”. Where people made critical comments the report showed that action was taken to improve service delivery.

Information about the safety and quality of treatment and service is gathered by monthly audit and fed back to the service commissioner in a monthly report. Reports for December 2011 and January 2012 stated that the service is compliant with the National Institute of Clinical Excellence Guidance and adheres to national health service guidelines for dermatology.

The service has a complaints procedure which is detailed in the information guide and promoted on posters at the practice. However, records show that the service has never received a formal complaint.

**Our judgement**

Quality assurance systems are in place, so patients benefit from safe care and treatment that meets their needs and expectations.
What is a review of compliance?

By law, providers of certain adult social care and health 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 Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called Guidance about compliance: Essential standards of quality and safety.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

**Improvement actions**: These are actions a provider should take so that they maintain continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

**Compliance actions**: These are actions a provider must take so that they achieve compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action**: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.
### Information for the reader

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### Care Quality Commission

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