**London Fertility Centre - Portland Place**

Portland Place, Marylebone, London, W1B 1QJ  
Tel: 02072240707  
Date of Inspection: 18 July 2013  
Date of Publication: August 2013

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

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<thead>
<tr>
<th>Standard</th>
<th>Result</th>
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<tbody>
<tr>
<td>Consent to care and treatment</td>
<td>Met this standard</td>
</tr>
<tr>
<td>Care and welfare of people who use services</td>
<td>Met this standard</td>
</tr>
<tr>
<td>Cleanliness and infection control</td>
<td>Met this standard</td>
</tr>
<tr>
<td>Staffing</td>
<td>Met this standard</td>
</tr>
<tr>
<td>Complaints</td>
<td>Met this standard</td>
</tr>
</tbody>
</table>
## Details about this location

<table>
<thead>
<tr>
<th>Registered Provider</th>
<th>London Fertility Centre Limited</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overview of the service</td>
<td>London Fertility Centre ? Portland Place is one of the two registered locations of the provider London Fertility Centre Limited. The provider is a company of Spire Healthcare Limited. This location provides the clinical environment for procedures relating to the fertility services provided. London Fertility Centre ? Portland Place is licensed by the Human Fertilisation and Embryology Authority (HFEA).</td>
</tr>
<tr>
<td>Type of service</td>
<td>Acute services without overnight beds / listed acute services with or without overnight beds</td>
</tr>
</tbody>
</table>
| Regulated activities | Diagnostic and screening procedures  
Family planning  
Surgical procedures  
Treatment of disease, disorder or injury |
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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<td>Care and welfare of people who use services</td>
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</tr>
<tr>
<td>Cleanliness and infection control</td>
<td>8</td>
</tr>
<tr>
<td>Staffing</td>
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</tr>
<tr>
<td>Complaints</td>
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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 18 July 2013, talked with people who use the service and talked with carers and / or family members. We talked with staff.

We received and reviewed information from the Human Fertilisation and Embryology Authority.

What people told us and what we found

We inspected both the London Fertility Centre locations on the same day. They operate as one service and people using the service understood this. Some people would have received initial consultations and treatment at other Spire Healthcare hospitals prior to attending the Portland Place location for clinical treatment such as egg retrieval or embryo transfer. This location was licensed by the HFEA and the last licensing inspection was in March 2013. More information about this process can be found on the HFEA website.

People were positive about their experiences at London Fertility Centre ? Portland Place. They were positive about staff and said that they could always ask for more information and would raise a concern if they had one. People said they had received sufficient information to give their consent. One person said it had been "absolutely fine" and could find "no issues" with the whole process to date. The service was described as "efficient as well as caring".

People were assessed and screened prior to commencing treatment and this included tests, consultations and discussions about suitability. Medical records confirmed the detailed information and consent processes undertaken by the centre.

There were effective systems in place to reduce the risk and spread of infection. The location was clean and well maintained and staff had received infection control training. There were enough qualified, skilled and experienced staff to meet people’s needs.

People were made aware of how to complain about any aspect of the service. There were processes to review, investigate and learn from complaints.

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

<table>
<thead>
<tr>
<th>Consent to care and treatment</th>
<th>Met this standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before people are given any examination, care, treatment or support, they should be asked if they agree to it</td>
<td>![ ]</td>
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</tbody>
</table>

**Our judgement**

The provider was meeting this standard.

Before people received any care or treatment they were asked for their consent and the provider acted in accordance with their wishes.

**Reasons for our judgement**

Before people received any treatment they were asked for their consent and the provider acted in accordance with their wishes. We spoke with two couples about their experience of the service provided by London Fertility Centre Limited. They had received very detailed and specific patient information about their proposed treatment following consultation with one of the doctors and then a specialist fertility nurse. They told us they had taken this away so that they had the opportunity to discuss and think about whether they wished to commence any treatment. They also said they had continuing opportunities to ask more questions and seek more information whenever they wished.

The medical records we reviewed contained the signed provider's consent forms as well as the Human Fertilisation and Embryology Authority consent forms which related to the use of eggs and embryos for the person's treatment and for their storage. People also said that the information was presented in a way that they understood.

All the people receiving fertility treatment had capacity so that they were able to give informed consent.
Care and welfare of people who use services

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

Staff reported that each person was assessed by the clinical director or another doctor prior to starting treatment. Staff checked people’s suitability for the treatments licensed by the Human Fertilisation and Embryology Authority at the provider’s Portland Place location.

People attended for their tests, consultations and procedures following a detailed individual care and treatment plan. Treatments were planned by the staff together with the people using the service, for example if women needed to receive injections as part of the treatment then nurses would teach them how to give these safely. At this location women had procedures such as egg retrieval and embryo transfer.

There were arrangements and equipment in place to deal with foreseeable medical emergencies and staff confirmed that they had had training in resuscitation. Risk assessments were in place for this location and for the procedures undertaken. The HFEA licensing inspections checked that the correct procedures for witnessing and checking of specimens, eggs, sperm and embryos were undertaken. The location had storage facilities and these were alarmed with a back-up system and staff on call in case of emergency.

People told us that they were very well looked after at the centre. One person said the service was "absolutely fine with no issues". Another said that staff phoned with test results and updates and they felt very involved with the treatment plans.
Cleanliness and infection control  

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. Infection control policies and procedures were available on the Spire Healthcare intranet to guide staff. Expert infection control advice was available from the Spire Healthcare specialist if needed and one of the nurses was the infection control lead. Clinical staff confirmed they had received infection control training.

There was a contract for the appropriate disposal of clinical waste and sharp items. We saw that clinical waste was stored and disposed of safely. Each clinical area had a cleaning schedule and practitioners were responsible for maintaining clean and hygienic surfaces and equipment. The centre was cleaned daily. We saw that the centre was clean and well maintained on the day of our visit. A deep clean by specialist cleaners of the operating theatre, laboratory and recovery areas was undertaken routinely. In addition the clinical areas were checked by a microbiologist and the last report demonstrated 100% cleanliness.

All clinical instruments used in the centre were single use and were not reused so that no decontamination of instruments was required. We saw staff wore appropriate protective items, such as gloves and aprons, when needed. There were hand washing facilities in each clinical area.
Staffing

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

Our judgement

The provider was meeting this standard.

There were enough qualified, skilled and experienced staff to meet people's needs.

Reasons for our judgement

There were enough qualified, skilled and experienced staff to meet people's needs. We spoke with staff from all the areas of the service; doctors, nurses, administration and embryology. All reported that there were sufficient staff to meet the needs of the people using the service at present. This was confirmed by the people we spoke with.

Sedation was provided for some women for some procedures. A specialist anaesthetist was in charge of this in every case and remained on site until the woman had recovered and was well enough to go home. There was also an on call doctor, nurse and embryologist for weekends in case a person required treatment. Fertility procedures were very time sensitive and the service had arrangements to meet the needs of people in this regard.

Staff explained their experience and qualifications which enabled them to provide treatment and care to people. They worked across both registered locations.
Complaints  
Met this standard

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

Reasons for our judgement

People were made aware of the complaints system in the patient information. They told us they were able to discuss any concerns whenever they attended the centre and had their comments listened to and answered promptly. There were comment cards in the reception area which people were encouraged to use to comment on their experience that day and the comments were collated into a report by a complaints lead. There was also an annual survey of people using the service which will be undertaken in the next few months.

People's complaints were fully investigated and resolved, where possible, to their satisfaction. The provider kept a log of complaints and there was a process for investigation, response to the complainant and action plans and learning from complaints. Any complaints would be reviewed using the Spire Healthcare integrated governance system.
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.
Contact us

<table>
<thead>
<tr>
<th>Phone</th>
<th>03000 616161</th>
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<td>Write to us at:</td>
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<td>Website</td>
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