Announced Inspection Report: Independent Healthcare

Service: Dr Karen Graham @ The Complete Look
Service Provider: Dr Karen Graham

9 January 2019
Healthcare Improvement Scotland is committed to equality. We have assessed the inspection function for likely impact on equality protected characteristics as defined by age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation (Equality Act 2010). You can request a copy of the equality impact assessment report from the Healthcare Improvement Scotland Equality and Diversity Advisor on 0141 225 6999 or email contactpublicinvolvement.his@nhs.net.
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1 A summary of our inspection

The focus of our inspections is to ensure each service is person-centred, safe and well led. Therefore, we only evaluate the service against three key quality indicators which apply across all services. However, depending on the scope and nature of the service, we may look at additional quality indicators.

About our inspection

We carried out an announced inspection to Dr Karen Graham @ The Complete Look on 9 January 2019. We spoke with one member of staff and we telephoned four patients after the inspection who had received treatment at the clinic. This was our first inspection to this service.

The inspection team was made up of one inspector.

What we found and inspection grades awarded

For Dr Karen Graham @ The Complete Look, the following grades have been applied to three key quality indicators.

<table>
<thead>
<tr>
<th>Key quality indicators inspected</th>
<th>Domain 2 – Impact on people experiencing care, carers and families</th>
<th>Domain 5 – Delivery of safe, effective, compassionate and person-centred care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality indicator</td>
<td>Summary findings</td>
<td>Grade awarded</td>
</tr>
<tr>
<td>2.1 - People’s experience of care and the involvement of carers and families</td>
<td>Patients commented that they found the service very professional, warm and welcoming. They also told us they were kept fully informed during all stages of their engagement with the service, including comprehensive aftercare information.</td>
<td>✔️ Good</td>
</tr>
<tr>
<td>5.1 - Safe delivery of care</td>
<td>The service had good systems in place to help deliver safe care.</td>
<td>✔️ Good</td>
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The following additional quality indicator was inspected against during this inspection.

### Domain 5 – Delivery of safe, effective, compassionate and person-centred care

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<tr>
<th>5.2 - Assessment and management of people experiencing care</th>
<th>The service carried out comprehensive assessments before and after treatment.</th>
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Grades may change after this inspection due to other regulatory activity. For example, if we have to take enforcement action to improve the service or if we investigate and agree with a complaint someone makes about the service.

More information about grading can be found on our website at: [http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/ihc_inspection_guidance/inspection_methodology.aspx](http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/ihc_inspection_guidance/inspection_methodology.aspx)

### What action we expect Dr Karen Graham @ The Complete Look to take after our inspection

This inspection resulted in one recommendation. See Appendix 1 for the recommendation.

An improvement action plan has been developed by the provider and is available on the Healthcare Improvement Scotland website: [www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx](http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx)

Dr Karen Graham, the provider, must make the necessary improvements as a matter of priority.

We would like to thank all staff at Dr Karen Graham @ The Complete Look for their assistance during the inspection.
2 What we found during our inspection

Outcomes and impact

This section is where we report on how well the service meets people’s needs.

Domain 2 – Impact on people experiencing care, carers and families
High performing healthcare organisations deliver services that meet the needs and expectations of the people who use them.

Our findings

Quality indicator 2.1 - People’s experience of care and the involvement of carers and families

Patients commented that they found the service very professional, warm and welcoming. They also told us they were kept fully informed during all stages of their engagement with the service, including comprehensive aftercare information.

The service used a variety of methods to gather feedback in line with its patient participation policy, including giving patients a questionnaire and listening to patient feedback. We saw evidence that patient feedback was regularly recorded and reviewed.

The service had changed its previous patient questionnaire to one which gave more holistic feedback, to help capture the overall patient experience. The updated questionnaire was widely used in other areas of healthcare and asked questions about:

- how the patient felt during treatments
- how the practitioners responded to any concerns raised
- practitioners’ attitudes, and
- whether treatments were clearly explained.

The service gave potential patients information about their treatment and had different aftercare plans for different treatments. The leaflets highlighted the risks and possible side effects of the treatment, along with out-of-hours service contact details and Healthcare Improvement Scotland’s contact details.
Patient reviews showed a very high level of satisfaction and highlighted that each treatment was well explained. Some comments we received included:

- ‘Clear and understanding. Felt relaxed.’
- ‘Friendly, efficient and relaxed.’

- No requirements.
- No recommendations.
Service delivery

This section is where we report on how safe the service is.

Domain 5 – Delivery of safe, effective, compassionate and person-centred care

High performing healthcare organisations are focused on safety and learning to take forward improvements, and put in place appropriate controls to manage risks. They provide care that is respectful and responsive to people’s individual needs, preferences and values delivered through appropriate clinical and operational planning, processes and procedures.

Our findings

Quality indicator 5.1 - Safe delivery of care

The service had good systems in place to help deliver safe care.

The clinic was clean and well organised. We saw contracts in place for maintenance of the premises and safe disposal of medical sharps and waste. Portable appliance testing had been carried out.

All practitioners working in the clinic were trained in adult life support and had their registrations and qualifications checked every year. The manager showed us the emergency equipment. All equipment we saw was in a good state of repair and emergency medication was in-date.

The service had policies in place for:

- child protection
- duty of candour
- protecting vulnerable adults, and
- whistleblowing.

The service manager had completed training in the updated data protection regulations. We saw that all files were stored safely in an electronic format. Each patient care record we reviewed showed clinical risks are identified at assessment. We saw that consent included any risks or side effects and that patients were given the opportunity of a cooling-off period.

The service’s infection control policy referred to hospital acquired infection standards and the national infection prevention and control manual. We saw a
good supply of protective personal equipment available and cleaning rotas were up to date.

We saw evidence of a comprehensive system in place for transporting medication from one clinic to another.

Patients commented that:

- ‘Service was fantastic, the manager is helpful and very informative.’
- ‘Extremely professional, there is nothing at all I dislike.’

What needs to improve

While the service had submitted risk assessments during its registration process, these had not been updated and entered into a risk register.

- No requirements.
- No recommendations.

Our findings

Quality indicator 5.2 - Assessment and management of people experiencing care

The service carried out comprehensive assessments before and after treatment.

Patient care records we reviewed showed that comprehensive consultations and assessments, including taking a full medical history were carried out before treatment. Risks and benefits of the treatment were explained and a consent form completed. We saw that treatment plans were developed and agreed with the individual.

Records of each treatment session were kept and every time a patient visited, their initial assessment was reviewed and updated. Patients also consented for further treatment at the treatment sessions.

Patient care records were in electronic format and aftercare advice was given verbally as well as in writing. Patients’ photographs were taken as part of their assessment and the areas which had been treated were highlighted. A ‘before and after’ comparison could be made. The photograph of the patient could be removed if required.

- No requirements.
- No recommendations.
Vision and leadership

This section is where we report on how well the service is led.

Domain 9 – Quality improvement-focused leadership

High performing healthcare organisations are focused on quality improvement. The leaders and managers in the organisation drive the delivery of high quality, safe, person-centred care by supporting and promoting an open and fair culture of continuous learning and improvement.

Our findings

Quality indicator 9.4 – Leadership of improvement and change

The manager of the service showed good awareness of quality improvement. The service did not have a formal quality improvement plan.

We saw that the service had adopted a continuous improvement model and part of this process was continuing professional development. This was managed through the General Medical Council (GMC) registration, its revalidation process, and yearly appraisals in the service. Other professional development activities included attending conferences, maintaining connections with NHS aesthetic colleagues, and subscriptions to journals to raise awareness of legislation and best evidence-based care for patients.

As part of its continuous improvement model, the service manager had decided to limit the treatments that the clinic offered, the amount of patients it accepted and the type of aesthetic products it used. This allowed it to focus on specialising in a smaller range of treatments to ensure a high quality service.

We discussed the importance of quality improvement and how to achieve it. The manager showed a very clear understanding of the need to evaluate the service and how to achieve this. The service carried out patient experience surveys and, given the high levels of patient satisfaction it had focused on maintaining the current level of service provided.

What needs to improve

The service did not have a formal improvement plan in place to help structure improvement processes and outcomes (recommendation a).

- No requirements.
Recommendation a

We recommend that the service should develop a quality improvement plan.
Appendix 1 – Requirements and recommendations

The actions that Healthcare Improvement Scotland expects the independent healthcare service to take are called requirements and recommendations.

- **Requirement:** A requirement is a statement which sets out what is required of an independent healthcare provider to comply with the National Health Services (Scotland) Act 1978, regulations or a condition of registration. Where there are breaches of the Act, regulations, or conditions, a requirement must be made. Requirements are enforceable at the discretion of Healthcare Improvement Scotland.

- **Recommendation:** A recommendation is a statement that sets out actions the service should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.

### Domain 9 – Quality improvement-focused leadership

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<thead>
<tr>
<th>Requirements</th>
<th>None</th>
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| Recommendations  | We recommend that the service should develop a quality improvement plan (see page 11).  
Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19 |
|-----------------|------|
Appendix 2 – About our inspections

Our quality of care approach and the quality framework allows us to provide external assurance of the quality of healthcare provided in Scotland.

Our inspectors use this approach to check independent healthcare services regularly to make sure that they are complying with necessary standards and regulations. Inspections may be announced or unannounced.

We follow a number of stages to inspect independent healthcare services.

**Before inspections**

Independent healthcare services submit an annual return and self-evaluation to us.

We review this information and produce a service risk assessment to determine the risk level of the service. This helps us to decide the focus and frequency of inspection.

**During inspections**

We use inspection tools to help us assess the service.

Inspections will be a mix of physical inspection and discussions with staff, people experiencing care and, where appropriate, carers and families.

We give feedback to the service at the end of the inspection.

**After inspections**

We publish reports for services and people experiencing care, carers and families based on what we find during inspections. Independent healthcare services use our reports to make improvements and find out what other services are doing well. Our reports are available on our website at: [www.healthcareimprovementscotland.org](http://www.healthcareimprovementscotland.org)

We require independent healthcare services to develop and then update an improvement action plan to address the requirements and recommendations we make.

We check progress against the improvement action plan.

More information about our approach can be found on our website: [www.healthcareimprovementscotland.org/our_work/governance_and_assurance/quality_of_care_approach.aspx](http://www.healthcareimprovementscotland.org/our_work/governance_and_assurance/quality_of_care_approach.aspx)
Complaints

If you would like to raise a concern or complaint about an independent healthcare service, you can complain directly to us at any time. However, we do suggest you contact the service directly in the first instance.

Our contact details are:

Healthcare Improvement Scotland
Gyle Square
1 South Gyle Crescent
Edinburgh
EH12 9EB

Telephone: 0131 623 4300

Email: comments.his@nhs.net
You can read and download this document from our website. We are happy to consider requests for other languages or formats. Please contact our Equality and Diversity Advisor on 0141 225 6999 or email contactpublicinvolvement.his@nhs.net