Announced Inspection Report: Independent Healthcare

Service: The Aberdeen Clinic Ltd, Aberdeen
Service Provider: The Aberdeen Clinic Ltd

6 December 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 The Aberdeen Clinic Ltd on 6 December 2018. We spoke with five members of staff during the inspection and telephoned three patients who had made use of the service. 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 The Aberdeen Clinic Ltd, the following grades have been applied to three key quality indicators.

<table>
<thead>
<tr>
<th>Key quality indicators inspected</th>
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<tbody>
<tr>
<td><strong>Domain 2 – Impact on people experiencing care, carers and families</strong></td>
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<tr>
<td><strong>Quality indicator</strong></td>
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<tr>
<td>People’s experience of care and the involvement of carers and families</td>
</tr>
<tr>
<td><strong>Summary findings</strong></td>
</tr>
<tr>
<td>Good systems were in place for gathering feedback and we saw evidence that the service was responsive to the feedback received.</td>
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<tr>
<td><strong>Grade awarded</strong></td>
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<tr>
<td>✔️ Good</td>
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<tr>
<td><strong>Domain 5 – Delivery of safe, effective, compassionate and person-centred care</strong></td>
</tr>
<tr>
<td><strong>Quality indicator</strong></td>
</tr>
<tr>
<td>Safe delivery of care</td>
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<tr>
<td><strong>Summary findings</strong></td>
</tr>
<tr>
<td>Good systems were in place for ensuring a safe delivery of care, including infection control, medicines management and data protection.</td>
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<td><strong>Grade awarded</strong></td>
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<tr>
<td>✔️ Good</td>
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<tr>
<td><strong>Domain 9 – Quality improvement-focused leadership</strong></td>
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<tr>
<td>Leadership of improvement and change</td>
</tr>
<tr>
<td><strong>Summary findings</strong></td>
</tr>
<tr>
<td>The service has shown that it is responsive and innovative when responding to patient feedback.</td>
</tr>
<tr>
<td><strong>Grade awarded</strong></td>
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<td>✔️ Good</td>
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The following additional quality indicator was inspected against during this inspection.

<table>
<thead>
<tr>
<th>Domain 5 – Delivery of safe, effective, compassionate and person-centred care</th>
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<tbody>
<tr>
<td>5.2 - Assessment and management of people experiencing care</td>
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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 The Aberdeen Clinic Ltd to take after our inspection**

This inspection resulted in two recommendations. See Appendix 1 for a full list of the recommendations.

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)

The Aberdeen Clinic Ltd, the provider, must make the necessary improvements as a matter of priority.

We would like to thank all staff at The Aberdeen Clinic Ltd 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

Good systems were in place for gathering feedback and we saw evidence that the service was responsive to the feedback received.

The service used a variety of methods to gather feedback in line with its patient participation policy, including an online patient experience questionnaire and a suggestions box at reception. We saw evidence that patient feedback was regularly recorded and reviewed. Staff we spoke with told us they shared feedback with colleagues and senior members of staff. The service also used an online survey provider. Staff were encouraged to telephone patients to ask about their experience at the service.

The senior management team collated and analysed all of the information it received. Action plans were in place for areas identified for improvement and minutes of the monthly senior management meeting showed that progress was discussed there.

The service gave potential patients an information folder about their treatment and had different folders for different treatments. The folder 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.

The service was a member of ISCAS (Independent Healthcare Sector Complaints Adjudication Service). While this is voluntary, the service felt that it helped patients when they were dealing with financial or administrative matters. The service has a complaints policy which included details for contacting Healthcare Improvement Scotland (HIS) and how to make a complaint to HIS.
The patients that we spoke with were very positive about the experience that they had at the clinic. Some comments we received included:

- ‘Excellent, very friendly and welcoming. They offer a good range of services.’
- ‘They talk you through the examination and procedure. There’s a nurse always chatting to you. It’s nicer going to a small friendly environment. I would certainly go back and recommend them.’
- ‘Just great. Absolutely super. Everything was so easy. I would thoroughly recommend them.’

**What needs to improve**

Some feedback was not easily accessible as it had been stored in different parts of the service’s information system (recommendation a).

- No requirements.

**Recommendation a**

- We recommend that the service should review its information system to ensure that any information from patients is easily accessible to help identify areas for improvement.
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

Good systems were in place for ensuring a safe delivery of care, including infection control, medicines management and data protection.

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 Aberdeen Clinic Ltd were trained in adult life support and had their registrations and qualifications checked every year. The service manager showed us the emergency equipment, including a defibrillator. 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 practitioners in the service have received training and information in the updated data protection regulations. We saw that all files were stored safely in paper and electronic formats.

Each patient care record we reviewed showed a clear pathway from assessment to any interventions and that aftercare advice was given. 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 ordering, storing and administering medicines.

The service carried out a variety of audits to help make sure the safety of all of its systems was monitored. The audits included hand hygiene, management of medicines, adverse events and an audit of procedures being correctly followed.

The service showed us yearly training plans which included adult life support, medicines management and infection control. The service also provided some online training for staff.

**What needs to improve**

While the service showed us training plans for previous years, it did not have one for 2019 at the time of our inspection (recommendation b).

- No requirements.

**Recommendation b**

- We recommend that the service should develop a training plan for 2019.

**Our findings**

**Quality indicator 5.2 - Assessment and management of people experiencing care**

**The service carries out comprehensive assessment for all its patients.**

Patient care records we reviewed showed that comprehensive consultations and assessments were carried out before treatment, including taking a full medical history. 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.

Patients were given verbal and written aftercare advice. Patient care records were in paper format and the service was moving to electronic care records.

- 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 service has shown that it is responsive and innovative when responding to patient feedback.

Staff we spoke with said the service was small with supportive leadership that was visible, approachable and open to new ideas. Staff were encouraged to suggest improvements to the service’s ways of working and patient experience at staff meetings or one-to-ones. We saw that quality improvement was a standing item on the staff meeting agenda.

Good assurance systems were in place including staff meetings, patient survey, comments and complaints. We saw that identified improvements were actioned. We saw that the service used complaints or concerns raised as a learning experience.

The service had developed its website to provide ‘real life’ patient experience videos. This evidenced innovative practice and allowed patients to share their experience of using the service.

Some patients who worked offshore in the oil industry could not attend the clinic in a normal working day. Following this feedback, the service had extended its operating hours to accommodate these patients.

The Aberdeen Clinic Ltd’s 5 year plan included maximising its capacity, developing its cardiology department and identifying healthcare gaps in the local community where it could provide a service.

What needs to improve

The service planned to improve its governance structures around patient feedback and information. It had employed a new quality manager to be...
responsible for improving and overseeing this process. However, at the time of our inspection it was not possible to evaluate how effective this had been. We will follow this up at future inspections.

- No requirements.
- No recommendations.
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 2 – Impact on people experiencing care, carers and families

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Heath and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.8
## Domain 5 – Delivery of safe, effective, compassionate and person-centred care

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Heath and Social Care Standards: My support, my life. I have confidence in the people who support and care for me. Statement 3.14
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

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
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