Announced Focused Inspection Report: Independent Healthcare

**Service:** Bruntsfield Physiotherapy and Sports Medicine Clinic, Edinburgh

**Service Provider:** Shona Dewar Physiotherapy Ltd

25 June 2021
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 his.contactpublicinvolvement@nhs.scot
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1  A summary of our inspection

We carried out an announced inspection to Bruntsfield Physiotherapy and Sports Medicine Clinic on Friday 25 June 2021. The purpose of the inspection was to make sure the service was delivering care safely to patients, in light of the COVID-19 pandemic. We reviewed the service’s infection prevention and control policies and procedures, and spoke with one member of staff during the inspection. This was our first inspection to this service.

The inspection team was made up of one inspector.

As part of this inspection, we did not request a self-evaluation from the service.

What we found and inspection grades awarded

For Bruntsfield Physiotherapy and Sports Medicine Clinic, the following grade has been applied to the key quality indicator inspected.

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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
What action we expect Shona Dewar Physiotherapy Ltd to take after our inspection

This inspection resulted in no requirements and no recommendations.

We would like to thank all staff at Bruntsfield Physiotherapy and Sports Medicine Clinic for their assistance during the inspection.
2 What we found during our inspection

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 infection and prevention control measures in place. Potential patients were informed of the steps they had to take before attending an appointment. The service had followed all current guidance on social distancing and infection prevention and control measures when people attended the service and during the course of any treatments. Clinical waste bins could be stored closer to the treatment area in the clinical treatment room.

The service’s infection prevention and control governance structure had clear lines of reporting between staff and senior management. Additional infection prevention and control support came from professional organisation membership and Public Health Scotland. The service’s infection prevention and control measures were recorded in a risk assessment completed at the beginning of the pandemic. The risk assessment outlined the measures to take. They included:

- decontamination procedures
- personal protection equipment, and
- enhanced cleaning procedures, including recording.

These included:

- removal of unnecessary items and clutter, such as reducing the number of chairs in waiting areas
• increased cleaning of ‘high-touch’ areas, such as door handles and chairs
• personal protective equipment including aprons, gloves, goggles and face shields, as well as face masks for both patients and staff, and
• increased appointment times to allow for cleaning procedures and minimise the risks of patients meeting.

Staff changed into a uniform when entering the building and changed back into their own clothes before leaving. Staff changing rooms were available. Staff told us they laundered their uniforms at home at 60 degrees in line with guidance.

A process had been introduced to manage the flow of patients accessing the service. The door to the clinic was kept locked at all times. To gain access, patients rang the doorbell and a staff member would let them in.

At the time of our inspection, the service was not accepting any walk-in patients. Patients were told to call first so that they could be screened before entry.

The service encouraged patients to attend their appointment alone, unless they were a parent or guardian. If they were attending with another individual, both had to complete the COVID-19 screening form before the appointment.

We inspected four patient care records and all four showed that each patient had been screened for COVID-19 or asked to isolate before their appointment. The records showed that each patient had been informed of the risks involved when they attended for an appointment.

We saw that patients were screened for COVID-19 in the reception area. This included taking the patient’s temperature and asking specific questions to assess their risk of COVID-19 transmission. Signs were displayed promoting social distancing, the use of face masks and hand hygiene. Alcohol-based hand rub and face masks were available for patients entering the service.

Gloves and aprons were stored in dedicated dispensers located near the point of care. We observed good compliance from staff with the use of face masks. Personal protective equipment was disposed of in the clinical waste bins. Staff told us they had good access to personal protective equipment.

Clinical wash hand sinks with liquid soap, hand towels and waste bins were available. Alcohol-based hand rub dispensers were also located throughout the service. When observed, staff carried out hand hygiene appropriately.
We inspected a range of patient equipment and furniture, including:

- card machine pin pad
- chair handles (clinic and waiting area)
- desk, stool and any other surfaces that patients may have been in contact
- door handles
- pillows, and
- treatment couch.

A cleaning matrix was displayed in each area to remind staff of the items to be cleaned and cleaning product to use.

Staff were able to tell us the cleaning products used to clean equipment after patient use, which was in line with current guidance. Daily and weekly equipment cleaning checklists for the inpatient and outpatient areas were used. Senior staff told us they regularly carried out both informal and formal assurance checks on patient equipment. We saw that the checklists were signed off as satisfactory.

The environment was clean, tidy and generally in a good state of repair, which allowed effective cleaning and decontamination. We saw that windows could be opened in the treatment areas and artificial ventilation was in use. The staff told us they had access to enough equipment and had enough time to complete tasks. A process was in place to allow them to escalate any concerns or to highlight if any tasks had not been completed. Staff we spoke with were able to tell us the cleaning products they used, where they would be used and the national colour-coding system for the cleaning equipment, in line with current guidance.

**What needs to improve**
The service could consider placing clinical waste bins closer to the treatment area in the clinical treatment room. 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.

This inspection resulted in no requirements and no recommendations.
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: his.ihcregulation@nhs.scot