

Wrightway Health Limited Wrightway Health Limited Inspection report

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Ratings

Overall rating for this service

Are services safe?

Overall summary

We carried out an announced focussed inspection on 12 March 2018 to ask the service the following key question; Are services safe?

Our findings were:

Are services safe?

We found that this service was providing safe care in accordance with the relevant regulations.

Background

We carried out an announced comprehensive inspection at Wrightway Health Limited on 10 October 2017. The service was rated as meeting the regulations for providing effective, caring, responsive and well led services, and not meeting the regulations for providing safe services as a breach of regulation 17 (good governance) was found. The full comprehensive report following the inspection on 10 October 2017 can be found by selecting the 'all reports' link for Wrightway Health Limited on our website at www.cqc.org.uk. We undertook a follow up focused inspection of Wrightway Health Limited on 12 March 2018. This inspection was carried out to review in detail the actions taken by the service to improve the quality of care and to confirm that the provider was now meeting legal requirements.

This service is registered with CQC under the Health and Social Care Act 2008 in respect of some, but not all, of the services it provides. There are some exemptions from regulation by CQC which relate to particular types of service and these are set out in Schedule 2 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At Wrightway Health Ltd services are provided to patients under arrangements made by their employer. Some of these types of arrangements are exempt by law from CQC regulation. Therefore, at Wrightway Health Ltd, we were only able to inspect the services which are not arranged for patients by their employers with whom the patient holds a policy (other than a standard health insurance policy).

Summary of findings

Wrightway Health Ltd is an independent provider of occupational health services and also offers a range of specialist services and treatments such as first aid coaching and fit mask testing (mask fitting for people with jobs which may cause respiratory complications) to people on a pre-bookable appointment basis.

Wrightway Health Limited is registered with the Care Quality Commission to provide services at Wrightway Health Ltd, West, Site, Norwich Research Park, Norwich, NR4 7UA. The clinic is based close to the city centre of Norwich in a quiet residential area. The provider also uses clinic rooms in Great Yarmouth, Cambridge, Bury St Edmunds and Ipswich. The main property in Norwich consists of a patient waiting room, reception area and administration office and consulting rooms which are located on the ground floor of the property. Further administration and meeting rooms were available on the first floor. There is on site car parking at all sites.

The provider holds a list of corporate clients and offers services to patients who reside in East Anglia and surrounding areas but also to patients who live in other areas of England who require their services.

The lead doctor is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like

registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The provider employs seven doctors; one doctor is also the Director of the company and is responsible for the overall management of the clinics, three nurses and seven occupational health technicians. The clinical team are supported by a team of administration and management staff. The provider had recently employed an operations manager to further enhance the team.

The site is open from 8am until 5pm Monday to Friday.

The provider is not required to offer an out of hour's service. Patients who need emergency medical assistance out of corporate operating hours are advised to seek assistance from alternative services such as the NHS 111 telephone service or accident and emergency. This is detailed on the website and its patient guide.

Our key findings were:

- All doctors and management staff were trained to safeguarding level three.
- All clinicians had received enhanced disclosure and barring checks.
- All equipment we checked was in date. There was a new policy in place to support this and a new system to manage equipment had been implemented.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

We found that this service was providing safe care in accordance with the relevant regulations.

- All doctors and management staff were trained to safeguarding level three. Training was also cascaded to all other members of staff at six monthly training.
- All clinicians had received enhanced disclosure and barring checks.
- All equipment we checked was in date. There was a new policy in place to support this and a new system to manage equipment had been implemented.



Wrightway Health Limited Detailed findings

Background to this inspection

The inspection was carried out on 12 March 2018. This inspection was undertaken by a CQC inspector.

We carried out an announced, comprehensive inspection on 10 October 2017 to ask the service the following key questions; Are services safe, effective, caring, responsive and well-led? The service was rated as meeting the regulations for providing effective, caring, responsive and well led services, and not meeting the regulations for providing safe services as a breach of regulation 17 (good governance) was found. The full comprehensive report following the inspection on 10 October 2017 can be found by selecting the 'all reports' link for Wrightway Health Limited on our website at www.cqc.org.uk. We undertook a follow up focused inspection of Wrightway Health Limited on 12 March 2018. This inspection was carried out to review in detail the actions taken by the service to improve the quality of care and to confirm that the provider was now meeting legal requirements.

During our visit we:

- Spoke with a range of staff.
- Reviewed DBS and training records.
- Reviewed the system for the checking of equipment.

During this focussed follow up inspection, we looked at the following key question:

• Is it safe?

This question therefore formed the framework for the areas we looked at during the inspection.

Are services safe?

Our findings

At our previous inspection on 10 October 2017, we rated the service as not meeting the regulations for providing safe services. The following improvements were needed:

- Clinicians did not have DBS checks completed and there was no formal, documented risk assessment in place for this.
- There were out of date items including syringes and needles in clinic rooms at one site and there was no system in place to monitor this.

Further areas for improvements included:

• All doctors should be working toward achieving level 3 training in child safeguarding.

These arrangements had improved when we undertook a focussed follow up inspection on 12 March 2018. The service is now rated as meeting the regulations for providing safe services.

Safety systems and processes

The provider had clearly defined and embedded systems, processes and practices in place to keep patients safe and safeguarded from abuse, which included:

• Arrangements were in place to safeguard children and vulnerable adults from abuse that reflected relevant legislation and local requirements and policies were accessible to all staff. The policies clearly outlined who to contact for further guidance if staff had concerns about a patient's welfare. The manager was responsible

for safeguarding. Doctors were trained to safeguarding level three. Nurses were trained to safeguarding level two. The management team were trained to safeguarding level three in order to support the whole team. The provider also carried out six monthly training for all staff which covered a variety of areas, including safeguarding. This training was used to update staff on any changes to policy, guidance and legislation. The provider had implemented a system whereby all new clinical staff would be trained to the appropriate safeguarding level when joining the company.

• We reviewed DBS checks that had been undertaken since the last inspection. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable). We found that appropriate enhanced DBS checks had been undertaken for clinical staff.

Risks to patients

• The provider had implemented a new policy for the checking of equipment and medicines in all of the clinics. The provider had put a new checking system in place which included a red and amber dot system to alert staff to equipment due to go out of date in the next month or three months. Technicians carried out regular checks on a weekly basis. This was cross checked by the operations manager on a monthly basis. Medicines and equipment in the rooms was in date and appropriate for use. Vaccines stored in the fridge were in date and appropriate checks of the temperature of the fridges had been recorded.