

FBA Medical Limited

Regent Street Clinic Leeds

Inspection report

41 Park Square East

Leeds

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Overall summary

We carried out an announced comprehensive inspection of this service on 26 October 2017 where breaches of legal requirements were found. After the comprehensive inspection, the service wrote to us to say what they would do to meet legal requirements in relation to a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We undertook this announced focused inspection on 23 May 2018 to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Regent Street Clinic Leeds on our website at www.cqc.org.uk.

We carried out an announced follow up inspection on 23 May 2018 to ask the service the following key question; Are services well-led?

Our findings were: Are services well-led?

We found that this service was now providing well-led care in accordance with the relevant regulations.

Background

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory

functions. This inspection was planned to check whether the service was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

Regent Street Clinic Leeds is an independent provider of GP services owned by FBA Medical Limited. The clinic is located at 41 Park Square East, Leeds, LS1 2NE. The clinic offers privately funded services to patients who reside in Leeds and patients who live in other areas of England who require their services. The clinic also offers a range of specialist services and treatments such as travel vaccinations and advanced medical aesthetics to people on both a walk-in and pre-bookable appointment basis. FBA Medical Limited provides services at other locations in Leicester, Sheffield, Nottingham and Derby.

The clinic is based in the city centre of Leeds. The property consists of a patient waiting room and reception area on the ground floor and consulting rooms which are located on the first floor of the building. There is on street car parking available.

The clinic is a member of the Independent Doctors Federation (IDF). The IDF is a designated body with its own responsible officer. The clinic is an accredited yellow fever centre which is registered with NATHNaC (National Travel Health Network and Centre). The practice is also registered with the British College of Aesthetics Medicine (BCAM).

Summary of findings

The Leeds clinic employs one doctor (male), one practice manager and a receptionist.

The medical practitioner is the registered manager who is based at the Nottingham head office. 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 practice is open five days a week:-

Monday 9am-12pm

Tuesday 9am-2pm

Wednesday 9am-12pm

Thursday 9am-2pm

Friday 9am-2pm

This service is registered with the Care Quality Commission (CQC) under the Health and Social Care Act 2008 in respect of some, but not all, of the services it provides. At Regent Street Clinic the aesthetic cosmetic treatments that are also provided are exempt by law from CQC regulation. 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.

They are registered with the Care Quality Commission (CQC) to provide the following regulated activities:

- Treatment of disease, disorder or injury
- Diagnostic and screening procedures

The group practice manager told us that the proportion of their work was:

- Private GP work 11%
- Travel vaccines and advice 52%
- Facial aesthetics 19%
- Sexual health 8%
- Occupational health 6%
- Medical examinations 3%

Our key findings were:

- The provider had established effective systems and processes to ensure good governance in accordance with the fundamental standards of care.
- The provider had reviewed safeguarding contact details to include localised details.

The provider had reviewed arrangements for the monitoring of infection control auditing activity. We were assured that standards of cleanliness were consistently maintained and improved.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services well-led?

We found that this service was providing well-led care in accordance with the relevant regulations.

- Governance arrangements within the practice were now operated effectively. For example, the implementation of systems and processes to minimise the risk and spread of infection and the safe storage of medicines requiring refrigeration were now managed in line with national guidance.
- The provider had introduced a new system to enable them to keep all policies and procedures up to date; during our visit we found that the system in place was now effective. We were able to easily review the providers' documentation. The group practice manager demonstrated that all staff members had access to their policies and procedures. In addition the infection prevention and control policy had been reviewed.
- There was a leadership structure in place.
- The service had now recorded staff signatures in all appraisal records in the staff files.

Regent Street Clinic Leeds

Detailed findings

Background to this inspection

We carried out an announced focussed inspection at Regent Street Clinic Leeds on 23 May 2018. Our inspection team was led by a CQC inspector.

During the inspection we:

- Spoke with the doctor, group practice manager and a newly appointed receptionist.

- Observed communication and interaction between staff and patients face to face in the waiting area.

To get to the heart of patients' experiences of care and treatment, we always ask the following question:

- Is it well-led?

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

Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action?)

Our findings

We found that this service was providing well-led care in accordance with the relevant regulations.

At our previous inspection on 26 October 2017, we found that the clinic was not fully compliant for providing well-led services. This was because there were insufficient systems or processes that enabled the registered person to assess, monitor and improve the quality and safety of the services being provided.

At this inspection on 23 May 2018 we saw evidence that improvements had been made. At this inspection we found the clinic met the requirements for providing well-led services. These improvements now need to be sustained, moving forwards.

Governance arrangements

The service had an effective overarching governance framework in place to fully support the delivery of good quality care.

- The provider had introduced a new system to enable them to keep all policies and procedures up to date. During our visit we found that the system was now effective. We were able to review the provider's documentation. The group practice manager demonstrated that all staff members had access to them. This was confirmed by the new member of staff that we interviewed on the day. The infection control policy had been reviewed recently.

The provider had taken steps to improve their governance framework, which meant they now had better oversight of the following areas within the service:

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- COSHH (Control of Substances Hazardous to Health)
- Safeguarding.
- Medicines management.
- Medical waste management.

We also saw that appraisal documentation now included signatures of the staff who had been appraised and safeguarding contact details now included the relevant local information.