

Promedicus Limited

Pro Medicus

Quality Report

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This report describes our judgement of the quality of care at this provider. It is based on a combination of what we found when we inspected, other information known to CQC and information given to us from patients, the public and other organisations.

Ratings

Overall rating for this ambulance location

| | |
|----------------------------------|--|
| Patient transport services (PTS) | |
|----------------------------------|--|

Summary of findings

Letter from the Chief Inspector of Hospitals

We carried out a focused unannounced inspection to review the service's arrangements for the safe transport and treatment of patients following the suspension of their service. As this was a focused inspection, we did not inspect every key line of enquiry under the five key questions.

Are services safe at this service

Equipment was serviced and calibrated to ensure its safety and accuracy. A robust system for the storage of disposable items was in place with regular stock and expiration date checks. Mandatory training was carried out in line with the provider's policy by all staff employed. Policies and procedures had been implemented to ensure staff were aware of responsibilities in relation to safeguarding. Information relating to local authority contact details were accessible to staff to ensure timely referrals if required. Medicines were stored appropriately and securely with only necessary staff being able to access them. Systems were in place to monitor the administration and disposal of medicines. Fire safety equipment was in place and staff were aware of the correct procedure in the event of a fire.

Are services effective at this service

Appraisal systems were now in place for all staff. An induction process and policy had been introduced to ensure new staff were aware of policies and procedures and possessed the required skills prior to beginning their role with patients.

Are services caring at this service

This was a focused inspection and we did not consider this as part of the inspection.

Are services responsive at this service

This was a focused inspection and we did not consider this as part of the inspection.

Are services well led at this service

A range of policies and procedures had been introduced by the provider to ensure safe working practices were in place. Staff were aware of these policies and where to locate them if needed. Governance arrangement to monitor and ensure quality had been introduced; sustainability relating to these was discussed with the management team.

Recruitment procedures were appropriate and staff files contained necessary information to ensure they were competent and suitable for their role and that all necessary pre-employment checks had been carried out.

The provider had made significant improvements to the service regarding governance processes, risk management, patient safety and the quality of care and treatment to be delivered.

Professor Sir Mike Richards
Chief Inspector of Hospitals

Summary of findings

Our judgements about each of the main services

Service

Patient transport services (PTS)

Rating Why have we given this rating?

Mandatory training had been carried out by all staff in line with the provider's policy. Staff were encouraged to carry out further training where they wished to develop.

Systems were in place to ensure equipment and disposable items were safe and suitable for patient use.

There were appropriate systems in place for the storage, administration and disposal of medicines.

Fire safety procedures had been improved and staff knew what to do in the event of a fire.

Staff files were up to date and contained necessary documentation to ensure they were competent and suitable for their role. A policy was in place regarding pre-employment checks and was being followed.

Records were stored confidentially and out of hour's provision for securing records had been put in place.

Risk management and quality assurance systems had been improved. Staff felt proud of improvements within the service and took ownership of tasks to sustain them.

Pro Medicus

Detailed findings

Services we looked at

Patient transport services (PTS)

Detailed findings

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Detailed findings from this inspection

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Background to Pro Medicus

Pro Medicus is an independent ambulance service providing patient transport services and ambulance work for events, on both a regular and occasional basis. Pro Medicus is based in Hertfordshire.

The Registered Manager is Stephen Burton who is also the company director. Stephen Burton has been Registered Manager since the organisation began in 2011.

We undertook the inspection following the suspension of the service on 16 September 2015.

We inspected, but have not rated, elements of three of the five core standards including, safety, effectiveness and well-led.

Our inspection team

Our inspection team comprised of two inspectors.

How we carried out this inspection

We undertook an unannounced focused inspection on 16 September 2015.

We spoke with two members of staff and two managers during the inspection. We looked at six vehicles and reviewed a range of documents including daily vehicle

checklists used by staff and policies relating to safeguarding. We also requested a range of documents pre inspection, including policies and procedures, audits for medication and equipment as well as training records of staff employed by the service.

Facts and data about Pro Medicus

Pro Medicus Limited is registered to provide treatment for disease, disorder and injury and transport services, triage and medical advice provided remotely.

The service has a fleet of 10 vehicles used to transport patients to and from a variety of settings including NHS

hospitals. A repatriation service is also provided from airports throughout the country. Pro Medicus also provide medical cover for sports games, festivals and community events.

Detailed findings

The service employs seven staff, including emergency medical technicians and first aiders with shifts seven day per week; occasional night shifts are worked if required.

Our ratings for this hospital

Our ratings for this hospital are:

| | Safe | Effective | Caring | Responsive | Well-led | Overall |
|----------------------------|------|-----------|--------|------------|----------|---------|
| Patient transport services | N/A | N/A | N/A | N/A | N/A | N/A |
| Overall | N/A | N/A | N/A | N/A | N/A | N/A |

Patient transport services (PTS)

| | |
|------------|--|
| Safe | |
| Effective | |
| Caring | |
| Responsive | |
| Well-led | |
| Overall | |

Information about the service

Pro Medicus is an independent ambulance service providing patient transport services and medical cover for events throughout the country. Transport and event cover is provided by emergency medical technicians and first aid trained staff using private ambulances. A variety of cover is provided including patient transport for NHS ambulance services, sporting games and community events.

We undertook an unannounced focused inspection on 16 September following suspension of their service.

Summary of findings

Improvements in patient safety, quality assurance and procedures following the provider's previous inspection had been made.

Mandatory training had been carried out by all staff in line with the provider's policy. Staff were encouraged to carry out further training where they wished to develop.

Systems were in place to ensure equipment and disposable items were safe and suitable for patient use. Appropriate systems were in place to ensure equipment was maintained, serviced and was fit for use.

There were appropriate systems in place for the storage, administration and disposal of medicines.

Fire safety procedures had improved and staff had a good knowledge of what to do in the event of a fire.

Staff files were up to date and contained all necessary documentation to ensure they were competent and suitable for their role.

Records were stored confidentially and out of hour's provision for securing records had been put in place.

Risk management and quality assurance systems had been improved. Staff felt proud of improvements they made and took ownership of tasks to embed the risk management process.

Patient transport services (PTS)

Are patient transport services safe?

We have not rated the patient transport service for safety. This was a focused inspection and elements of this standard were not inspected.

All staff employed had attended mandatory training in accordance with the provider's policy.

Policies and procedures were in place to protect vulnerable adults and children. Staff had a good knowledge of how to report safeguarding concerns.

Medicines were stored safely and there were systems in place to monitor stock, administration and disposal.

Appropriate systems were in place to ensure equipment was maintained, serviced and was fit for use.

Disposable items of equipment including dressing and airway devices were stored clearly within a stock room, with rotation and expiration date checks being conducted.

Oxygen was stored securely on premises and vehicles.

Confidential patient records were stored appropriately and an out of hour's provision in place to allow temporary safe storage.

Fire safety assessments had been carried out and appropriate equipment was available on premises and vehicles.

Incidents

- We did not gather evidence for this as part of the inspection.

Mandatory training

- A policy was in place to advise what training was mandatory to staff. We saw evidence that this training had been carried out by all staff employed by the provider and attendance records were kept in staff files. Staff we spoke to confirmed this.

Safeguarding

- The provider had introduced appropriate policies for safeguarding children and for protecting vulnerable adults from abuse. This policy had been devised and reviewed in conjunction with an external safeguarding team.

- Safeguarding policies contained information on contacting the local authority when an urgent safeguarding referral needed to be made.
- Staff we spoke with knew their responsibilities relating to safeguarding and had an understanding of what actions they should take if there was an immediate concern for patient safety. Staff provided us examples of what they would report and knew how to report their concerns in line with the new safeguarding policies.

Cleanliness, infection control and hygiene

- We inspected six vehicles during our visit and found all vehicles to be visibly clean. We saw a schedule for regular deep cleans and that regular deep cleans had been recorded.
- There was appropriate provision for the storage of clinical waste including a variety of clinical waste bags in line with national guidance.
- Sharps bins (for safe disposal of needles) were not correctly labelled but we were advised this would be rectified prior to them being used in service. The provider took action to address this.
- Anti-bacterial hand gel was available on all vehicles. Staff told us they carried small bottles of hand gel with them during duty.
- Not all vehicles contained sufficient personal protective equipment (PPE) including aprons and masks. This was identified to the management team and was rectified before the end of our inspection.
- We saw plans for infection control audits that would be commenced once the vehicles were back in service.

Environment and equipment

- All vehicles used by the provider had appropriate service, MOT and insurance arrangements in place.
- Oxygen cylinders were stored safely on premises and vehicles. Signage was visible in all areas where oxygen was stored so that staff and members of the public could see health and safety risks that may be present.
- Disposable equipment storage was secure, with a system for rotating and checking expiration dates in place. Equipment was easily identifiable and not overstocked.

Patient transport services (PTS)

- We were provided with service records for equipment which were up to date. We were shown where items that required service or were faulty were located. This area was separate to the other equipment and easily recognisable by staff.
- We saw a new daily vehicle checklist had been introduced; this was comprehensive and allowed full checking of road worthiness and equipment safety prior to leaving site. An audit was to be carried out on the completion of the checklist when service resumed.
- During our inspection we found that the previous problems with vehicle security had been rectified and all vehicles were secure and not accessible to members of the public who also used the site.
- All the vehicles we inspected contained necessary firefighting equipment and this was within service dates.
- New locking systems were in place for the store room and offices. They were key coded and only staff who worked for the provider knew the codes. The store room door was also fitted with a self-closing mechanism.
- There were appropriate patient security measures on all vehicles, seatbelts and trolley straps were all in working order. This meant that patients could be transported securely and risk of injury reduced if there was an accident.
- A signing-in process had been introduced which required all visitors to read fire safety guidance to ensure their safety whilst on the premises.

Medicines

- Only medicines that staff were trained to administer were stocked. Controlled drugs identified previously had been disposed of and no longer stored by the provider.
- Medicines were stored in a central locker system, the keys for these lockers were only available to staff who were able to utilise the medication.
- Stock checks, administration records and audits were in place to ensure safe storage of medicines.
- The provider had implemented a medicines handling and storage policy.

Records

- We did not review patient records as part of this inspection; however, we saw safe storage systems to ensure patient confidential information was not accessible by anyone other than the management team. A locked post-box system had been implemented to allow patient records to be kept safely out of hours until permanent storage could occur.
- Records were digitised and then destroyed after 30 days had passed to minimise risk of storing confidential records.

Assessing and responding to patient risk

- We did not gather evidence for this as part of the inspection.

Staffing

- We did not gather evidence for this as part of the inspection.

Major incident awareness and training

- We did not gather evidence for this as part of the inspection.

Are patient transport services effective?

We have not rated the patient transport service for effective. This was a responsive inspection and elements of this standard were not inspected.

Within staff files there were records of appraisals, however these did not always document staff input and were based solely on staff conduct.

All staff employed by the provider had pre-employment checks, references and training/skills assessments records to ensure that they were competent, experienced and suitable for their role.

An induction policy had been introduced to ensure new staff had appropriate training and awareness of policies and procedures.

Evidence-based care and treatment

- We did not gather evidence for this as part of the inspection.

Assessment and planning of care

Patient transport services (PTS)

- We did not gather evidence for this as part of the inspection.

Nutrition and hydration

- We did not gather evidence for this as part of the inspection.

Patient outcomes

- We did not gather evidence for this as part of the inspection.

Competent staff

- New staff files had been put in place to allow information to be accessed easily. Staff files contained evidence of Disclosure and Barring System (DBS) checks, references, photographic ID and past work histories. Two staff files did not have an up to date DBS check but we were told that they would not be working with any patients until these had been completed. We checked and this was in line with the provider's policy.
- Appraisals were present in all staff files, however these did not all have staff involvement and contained information based on staff conduct. We did not see evidence of learning or development needs being identified. The provider informed us that this was work in progress and that a regular cycle of staff appraisal had now been implemented.
- A new staff induction policy had been implemented which ensured staff received role specific training and had knowledge of the provider's policies and procedures prior to working with patients.

Coordination with other providers

- We did not gather evidence for this as part of the inspection.

Multidisciplinary working

- We did not gather evidence for this as part of the inspection.

Access to information

- We did not gather evidence for this as part of the inspection.

Consent, Mental Capacity Act and Deprivation of Liberty Safeguards

We did not gather evidence on consent during the inspection.

Are patient transport services caring?

This was a responsive inspection and we did not gather evidence for this domain.

Are patient transport services responsive to people's needs? (for example, to feedback?)

This was a responsive inspection and we did not gather evidence for this domain.

Are patient transport services well-led?

We have not rated the patient transport service for being well-led. This was a focused inspection and elements of this standard were not inspected.

We saw improvements in governance processes and plans to evaluate the quality and efficiency of services provided. The provider had introduced new policies and procedures governing risk management, patient safety and the quality of care and treatment to be delivered by the service.

Risk assessments had been carried out where appropriate, including fire safety.

Vision and strategy for this service

- The provider had created new values which were care, compassion, commitment, high standards and best clinical practice. Staff we spoke to were aware of these new values.
- The provider had enhanced the statement of purpose for the service, giving clear details about the service and its vision and values.

Governance, risk management and quality measurement

- Policies and procedures had been implemented within the service that covered areas including medicines management, safeguarding and infection prevention. The staff we spoke with were aware of the new policies and these were accessible in paper form within the offices.

Patient transport services (PTS)

- The provider had no system in place to ensure staff had read policies or updated guidance, which we raised during our inspection. Following our inspection, we were provided with evidence of a new system requiring staff to sign a document on reading a policy or procedure.
- An internet portal had been introduced to allow staff to access information from home or whilst at work, this included updates to guidance or general news. The provider intended to develop this further to ensure all staff used it effectively.
- Risk assessments had been carried out where appropriate, including in relation to fire safety.
- The statement of purpose, which outlines what a service does and who it provides the service to, had been updated and outlined clearly what services and regulated activities the provider carried out.

Leadership and Culture

- We did not gather evidence for this as part of the inspection.

Innovation, improvement and sustainability

- Staff we spoke with felt there had been great improvements within the service as a whole, and that all staff now had cohesive working relationships. Staff told us they took accountability for tasks and driving improvements within the service. Staff were encouraged to develop themselves with further training.
- We saw that improvements in quality assurance had occurred and that regular audits were being carried out.
- We discussed the sustainability of audits and stock checks with the management team once service had resumed and we were told this would be monitored and protected time for these tasks would be provided.