

Aupres Medical LLP

Inspection report

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

Ratings

Overall rating for this location

Good



Are services well-led?

Good



Overall summary

We carried out an announced inspection of Aupres Medical LLT on the 9 March 2022 when the service was rated good overall and for all key questions, except for well-led which was rated as requires improvement. We issued a breach of Regulation 17 (Good Governance) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The full report of the previous inspection can be found by selecting all reports linked for Aupres Medical LLT on our website www.cqc.org.uk.

The provider was registered for the regulated activity of diagnostic and screening, family planning, maternity and midwifery and treatment of disease, disorder and injury at Aupres Medical LLP. At the time of our inspection the service was not carrying out the regulated activities of family planning and maternity and midwifery at this location.

The service, Aupres Medical LLP, provided cardiac treatment for patients over the age of 18 years. The service specialised in external counter pulsation therapy, (a non-invasive treatment for the heart). The provider also provided the cardiology care to patients referred by a fellow independent psychiatry service regarding the use of thyroxine medication to treat bi-polar disorder. However, this aspect of the service was outside the scope of our registration as we do not inspect and rate research projects.

The clinical lead for the service was the CQC registered manager. A registered manager is a person who is registered with the CQC 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.

We carried out a focused inspection on the 12 December 2022, to review the improvements made by the service in response to the breach of regulation.

The previous rating of overall good is continued.

We have rated the service Good for providing a well led service.

Our key findings were:

- The provider had improved both the governance of the service and the management of risks, for example: -
- They had improved their recruitment and training procedures.
- They had improved the access to emergency equipment and put a risk assessment in place to demonstrate what emergency medicines were required at the service.

The areas where the provider **should** make improvements are:

- Take action to update all staff training regularly.

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

The inspection was led by a CQC inspector who had access to advice from a specialist advisor.

Background to Aupres Medical LLP

The registered provider for the service is Aupres Medical LLP. The provider is registered to carry out the regulated activity of diagnostic and screening procedures, family planning, maternity and midwifery services and treatment of disease disorder or injury at:

Aupres Medical LLP

1 Harley Street

London

W1G9QD.

The service Aupres Medical LLP provided cardiac treatment for patients over the age of 18 years. The service specialised in external counter pulsation therapy, (a non-invasive treatment for the heart). At the time of the inspection the provider did not carry out the regulated activities family planning and maternity ad midwifery at this location.

The staff team consists of consultant cardiologist, a clinic nurse and an external counter pulsation therapist. They were supported by the registered manager and a business manager.

The service's telephone line is open from 9am to 5pm Monday to Friday, and all appointments are made at the patient's convenience.

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How we inspected this service.

The methods that were used were interviewing staff and review of documents.

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

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

These questions therefore formed the framework for the areas we looked at during the inspection

Are services well-led?

We rated well-led as Good because:

Governance arrangements

- We carried out an inspection on 9 March 2022, and found information was not always available to demonstrate good governance. Such as whether staff had completed their training, evidence of an emergency medicine and equipment risk assessment, evidence of safe recruitment and minutes of meetings.

At this inspection we found: -

- The provider submitted a recruitment policy last reviewed October 2022.
- A review of staff recruitment records, submitted by the provider, for a self-employed technician who commenced work in June 2021, found the provider had obtained immunisation status, a self-employed agreement and training certificates and an Disclosure and Barring Service check (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.)
- However, on the day of the inspection the evidence submitted did not fully demonstrate an effective recruitment system. This was because the provider did not have evidence of references or staff identity or staff immunisation for some staff. Following the inspection, the provider submitted the missing documents.
- A review of staff training found the service had a system in place to ensure staff had completed the appropriate training for their role. However, the consultant cardiologist had not completed basic life support and the nurse had not completed safeguarding adult level three training. The provider submitted evidence the consultant cardiologist had now completed their training and that the nurse was completing level three safeguarding training.
- The provider had the medicines, adrenaline, Glyceryl trinitrate (GTN) spray and aspirin for use during medical emergencies and had a risk assessment in place that demonstrated they had considered what emergency medicines to stock at the service.
- The provider submitted a copy of their business continuity plan last reviewed December 2022.
- The provider explained the staff spoke daily and provided a copy of meeting minutes for July, September and December, which demonstrated staff discussions about patient safety and audits.

Managing risks, issues and performance

- On the day of the inspection in March 2022, we found a discrepancy, as the fire risk assessment stated that the fire extinguishers were last tested in 2021, but we saw a fire extinguisher had a date of last checked in 2019. At this inspection the provider submitted photographs of two fire extinguishers from the premises which were last tested in July 2022. Also, whilst waiting for the landlord to carry out the check, the provider had purchased their own fire extinguisher.
- At the previous inspection in March 2022, the provider submitted the property owner's legionella risk assessment completed on 17 June 2020, this included a recommendation for the shower's removable parts, (heads, inserts and hoses) to be dismantled, cleaned and descaled four times a year. However, we saw there was an unused shower in the lady's toilet which was not maintained. At this inspection, the provider submitted a photograph which demonstrated the shower had been decommissioned and informed us the toilet area was now regularly cleaned.
- At the time of the previous inspection in March 2022, the provider did not have a defibrillator at the location and there was no evidence of a documented risk assessment to support the decision not to have one available for use in a medical emergency. At this inspection, the provider informed us and submitted photographic evidence they had a defibrillator in place, which staff checked when the service was used. In addition, they informed us they had an agreement to access the oxygen held by the neighbouring service provider.

Are services well-led?

- The provider had also put guidelines for staff to follow regarding the management of anyone who was unwell at the clinic.