

Express Diagnostics Limited

Express Diagnostics

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 safe?

Good



Are services effective?

Inspected but not rated



Are services caring?

Good



Are services responsive to people's needs?

Good



Are services well-led?

Good



Summary of findings

Overall summary

We last inspected Express Diagnostics in 2013 but we had not previously given a rating. This was the first inspection for Express Diagnostics using our current methodology and ratings. We rated it as good because:

- The service had enough staff to care for patients and keep them safe. Staff had training in key skills, understood how to protect patients from abuse, and managed safety well. The service controlled infection risk well. Staff assessed risks to patients, acted on them and kept good care records. They managed medicines well. The service managed safety incidents well and learned lessons from them.
- Staff provided good care and treatment. Managers monitored the effectiveness of the service and made sure staff were competent. Staff worked well together for the benefit of patients and had access to good information. Key services were available to suit patients needs.
- Staff treated patients with compassion and kindness, respected their privacy and dignity, and took account of their individual needs.
- The service planned care to meet the needs of local people, took account of patients' individual needs, and made it easy for people to give feedback. People could access the service when they needed it and did not have to wait too long for their appointments.
- Leaders ran services well using reliable information systems and supported staff to develop their skills. Staff understood the service's vision and values, and how to apply them in their work. Staff felt respected, supported and valued. They were focused on the needs of patients receiving care. Staff were clear about their roles and accountabilities. The service engaged well with patients and the community to plan and manage services and all staff were committed to improving services continually.

Summary of findings

Our judgements about each of the main services

Service

Diagnostic and screening services

Rating

Good



Summary of each main service

We last inspected Express Diagnostics in 2013 but we had not previously given a rating. This was the first inspection for Express Diagnostics using our current methodology and ratings. We rated it as good. See the summary above for details.

Summary of findings

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Summary of this inspection

Background to Express Diagnostics

Express Diagnostics Ltd is a private company providing diagnostic cardiology tests, audiology services and lung function tests. The service opened in 1994. It had not previously been rated.

Patients were referred to the service by the NHS and private hospitals. Individuals could also self-refer to the service. Patients included both adults and children. The service was open during working hours on Monday to Friday but could also provide appointments outside of these times.

The service had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. The service employed around 60 staff.

The service was registered to carry out the following regulated activities:

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

How we carried out this inspection

The inspection team consisted of 2 inspectors and a specialist advisor with expertise in cardiology who carried out a site visit on 8 November 2022.

The inspection was overseen by Catherine Campbell Head of Hospital Inspection.

You can find information about how we carry out our inspections on our website: <https://www.cqc.org.uk/what-we-do/how-we-do-our-job/what-we-do-inspection>.

During the site visit we met and spoke with 2 patients, and members of staff including, but not limited to, the Director of Clinical Services, the Quality Manager, the Human Resources Manager, the Information Governance Manager, Analysts and Cardio Respiratory Technicians.

We looked at documentation and data before, during and following the inspection.

Outstanding practice

We found the following outstanding practice:

- There was compassionate and effective leadership at all levels.
- Leaders had an inspiring shared purpose, and strived to deliver and motivate staff to succeed. Staff were proud of the organisation as a place to work and spoke highly of the culture.

Our findings

Overview of ratings

Our ratings for this location are:

| | Safe | Effective | Caring | Responsive | Well-led | Overall |
|-----------------------------------|------|-------------------------|--------|------------|----------|---------|
| Diagnostic and screening services | Good | Inspected but not rated | Good | Good | Good | Good |
| Overall | Good | Inspected but not rated | Good | Good | Good | Good |

Diagnostic and screening services

| | |
|------------|---|
| Safe | Good  |
| Effective | Inspected but not rated  |
| Caring | Good  |
| Responsive | Good  |
| Well-led | Good  |

Are Diagnostic and screening services safe?

Good 

This is the first time we have rated this service. We rated it as good.

Mandatory training

The service provided mandatory training in key skills to all staff and made sure everyone completed it.

All staff received and kept up-to-date with their mandatory training. The mandatory training was comprehensive and met the needs of patients and staff. Topics included, but were not limited to, infection prevention, mental health awareness, and general data protection regulations (GDPR). Staff also received non-mandatory training in topics such as health and wellbeing, and mindfulness. Training was provided mostly through e-learning sessions and was tailored to staff dependent on their role. The service gave probationary members of staff a training record for use throughout their employment.

Clinical staff completed training on recognising and responding to patients with mental health needs, learning disabilities, autism and dementia.

Managers monitored mandatory training and alerted staff when they needed to update their training.

Safeguarding

Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it.

All clinical staff had received safeguarding training to a level which was above the minimum requirement. Managers monitored when staff were due to have mandatory training and compliance was 100%.

Staff knew how to identify adults and children at risk of, or suffering, significant harm and worked with other agencies to protect them. Staff knew how to make a safeguarding referral and who to inform if they had concerns, despite it being needed infrequently.

Diagnostic and screening services

Staff followed safe procedures for children visiting the service. The provider offered a chaperone service on request to young people aged under 16. After discussing this with us during our inspection the service amended its policy to ensure all young people under 16 were provided with a chaperone. Staff acting as chaperones had been trained.

Safety was promoted through recruitment procedures and employment checks. Staff had Disclosure and Barring Service (DBS) checks completed before they could work. DBS checks help employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups.

Cleanliness, infection control and hygiene

The service controlled infection risk well. Staff used equipment and control measures to protect patients, themselves and others from infection. They kept equipment and the premises visibly clean.

Clinical areas were clean and had suitable furnishings which were clean and well-maintained. The reception area and toilet were visibly clean.

The service performed well for cleanliness, scoring 100% at its last external annual infection prevention audit in May 2022.

Cleaning records were up-to-date and demonstrated that all areas were cleaned regularly.

Staff followed infection control principles including the use of personal protective equipment (PPE). Hand washing facilities and sanitising hand gel were available.

Staff cleaned equipment after patient contact and labelled equipment to show when it was last cleaned.

Environment and equipment

The design, maintenance and use of facilities, premises and equipment kept people safe. Staff were trained to use them. Staff managed clinical waste well.

Staff carried out safety checks of specialist equipment, and records showed that equipment servicing and maintenance was up-to-date.

The service had suitable facilities to meet the needs of patients families, with sufficient free car parking, a comfortable waiting area, and bathroom facilities.

The service had enough suitable equipment to help them to safely care for patients. We saw records that equipment was regularly maintained and serviced.

The premises were accessible for wheelchair users, with a ramp to the front door, a lift, disabled toilet facilities, and accessible rooms.

There was access to emergency equipment. There was a bay with an emergency trolley and a defibrillator, which were clean and ready to use. We saw records that the equipment was checked regularly. There was direct access for an ambulance.

Staff stored and disposed of clinical waste safely using clinical waste bins which were emptied regularly.

Diagnostic and screening services

Assessing and responding to patient risk

Staff identified and quickly acted upon patients at risk of deterioration

Staff responded promptly to any sudden deterioration in a patient's health. The service had a trained emergency response team as well as trained first aiders on duty each day. The service could transport patients if they needed to attend an NHS Emergency Department but did not need an ambulance. Any patients who needed to be transported to an NHS Emergency Department could leave their cars in the service's car park for as long as necessary.

Staffing

The service had enough staff with the right qualifications, skills, training and experience to provide the right care and treatment. Managers gave staff a full induction.

The service was fully staffed and sickness rates were low. At the time of our inspection there were around 60 members of clinical and non-clinical staff. We viewed staff electronic files and saw recruitment processes and checks, sickness records, training, occupational health records and appraisals.

Managers gave staff a comprehensive induction and individual training records appropriate to their role and training needs.

Records

Staff kept detailed records of patients' care and treatment. Records were clear, up-to-date, stored securely and easily available to all staff providing care.

All patient records and referrals were electronic. Patient referral forms were sufficiently detailed and were accessible by staff when needed. Test results and patient information were stored securely.

Medicines

The service used systems and processes to safely prescribe, administer, record and store medicines.

The service did not use any medicines except for Salbutamol which was stored, used and managed safely. Salbutamol was used for some patients having lung function tests. All staff using the medicine had been trained.

Incidents

The service managed patient safety incidents well. Staff recognised incidents and near misses and reported them appropriately. Managers investigated incidents and shared lessons learned with the whole team and the wider service. When things went wrong, staff apologised and gave patients honest information and suitable support.

There had been no patient safety incidents at the service, but staff we spoke to knew now to recognise incidents and report them. There were systems to make sure incidents were reported and investigated. Staff were open and honest and said they would have no hesitation in reporting incidents.

Staff understood the duty of candour and knew to give patients and families a full explanation if things went wrong.

Are Diagnostic and screening services effective?

Diagnostic and screening services

Inspected but not rated 

We do not currently rate effective for diagnostic and screening services.

Evidence-based care and treatment

The service provided care and treatment based on national guidance and evidence-based practice. Managers checked to make sure staff followed guidance.

Staff followed up-to-date policies to plan and deliver high quality care according to best practice and national guidance. Care, treatment and support was delivered in line with legislation, standards and evidence-based guidance, including the National Institute for Health and Care Excellence (NICE) guidance and other expert professional bodies, to achieve effective outcomes.

The service's cardiology reports followed The Society for Cardiological Science and Technology (SCST) guidance.

Patient outcomes

Staff monitored the effectiveness of care and treatment. They used the findings to make improvements and achieved good outcomes for patients. The service had been accredited under relevant accreditation schemes.

Managers carried out a comprehensive programme of repeated audits for technicians and analysts to ensure competency. Managers used information from the audits to improve care and treatment. Managers shared and made sure staff understood information from the audits.

Action plans were developed to address areas of improvement and were regularly reviewed and reported.

The service was accredited by The British Standards Institution (BSI).

Competent staff

The service made sure staff were competent for their roles. Managers appraised staff's work performance and held supervision meetings with them to provide support and development.

Staff were experienced, qualified and had the right skills and knowledge to meet the needs of patients. All technicians were trained and all analysts had obtained or were working towards obtaining a diploma from The Society of Cardiological Science and Technology (SCST). The service analysed any significant findings in patients' electrocardiogram (ECG) test results. This helped avoid delays in care for patients, because the service could provide an analysed ECG for them to take to hospital appointments.

Managers gave all new staff a full induction tailored to their role. The induction included the service's policy documents, the standard operating procedures and training record specific to their role, and meetings with the Human Resources Manager and other staff.

Managers identified any training needs their staff had and gave them the time and opportunity to develop their skills and knowledge.

Diagnostic and screening services

Staff had the opportunity to discuss training needs with their line manager and were supported to develop their skills and knowledge with regular appraisals.

Managers made sure staff received any specialist training for their role.

The service supported the learning and development needs of staff. The service prided itself on supporting the health and wellbeing of its employees.

Consent, Mental Capacity Act and Deprivation of Liberty safeguards

Staff followed national guidance to gain patients' consent.

Staff gained consent from patients for their care and treatment in line with legislation and guidance. Staff made sure patients received and understood relevant information before their tests were carried out. Staff clearly recorded consent in the patients' records.

Staff were aware of consent procedures for those aged under eighteen years old.

Are Diagnostic and screening services caring?

Good 

This is the first time we have rated this service. We rated it as good.

Compassionate care

Staff treated patients with compassion and kindness, respected their privacy and dignity, and took account of their individual needs.

Staff were discreet and responsive when caring for patients. Staff took time to interact with patients and those close to them in a respectful and considerate way. We observed staff being very caring and professional with patients and putting them at ease.

Patients said staff treated them well and with kindness. The two patients we spoke to said staff were excellent.

Staff followed policy to keep patient care and treatment confidential. The service carried out all tests in private rooms. The provider offered a chaperone service on request to young people aged under 16. After our inspection the service amended its policy to ensure all young people under 16 were provided with a chaperone.

Staff understood and respected the personal, cultural, social and religious needs of patients and how they may relate to care needs. The provider had a privacy and dignity policy which stated that patients would not be asked to remove any more clothing than was necessary and would be provided with gowns. After discussing this with us during our inspection the provider updated the policy to state that any cultural considerations such as regarding covering of skin would be dealt with sensitively.

Are Diagnostic and screening services responsive?

Diagnostic and screening services

Good 

Good 

This is the first time we have rated this service. We rated it as good.

Service delivery to meet the needs of local people

The service planned and provided care in a way that met the needs of local people and the communities served. It also worked with others in the wider system and local organisations to plan care.

Managers planned and organised services so they met the changing needs of the local population. Patients were able to book evening or weekend appointments if they were unable to attend during the service's usual opening hours. The service could arrange to carry out some tests in patients' own homes if necessary. The service could arrange to collect heart monitors from the homes of patients who were unable to return them themselves due to ill-health or lack of transport. Staff would stay late if special transport for a patient had been delayed.

The service offered a free hearing screening check.

Facilities and premises were appropriate for the services being delivered. There was ample free parking and several designated disabled parking bays. The premises were wheelchair accessible.

The service had systems to help care for patients in need of additional support. The service provided evening and weekend appointments for patients who were unable to attend during the service's usual opening hours.

Meeting people's individual needs

The service was inclusive and took account of patients' individual needs and preferences. Staff made reasonable adjustments to help patients access services. They coordinated care with other services and providers.

Staff made sure patients living with mental health problems, learning disabilities and dementia, received the necessary care to meet all their needs. All staff were trained to be dementia friendly. The service provided easy-read and large-print versions of patient information documents. Patients with learning disabilities and patients with high anxiety were offered extra time for their tests and were able to rebook appointments if necessary.

Staff understood and applied the policy on meeting the information and communication needs of patients with a disability or sensory loss. The service had a loop system for patients with hearing aids. There was ample seating for patients waiting for tests, and private rooms suitable for each type of test.

The service had information leaflets available in languages spoken by the patients and local community. Managers made sure staff, and patients, loved ones and carers could get help from interpreters or signers when needed.

Access and flow

People could access the service when they needed it and received the right care promptly. Waiting times for treatment were in line with national standards.

Diagnostic and screening services

Managers made sure patients could access services when needed and received treatment within agreed timeframes and national targets. All patients were offered appointments within 10 working days. All patients received their test results within 10 working days of their appointments. The service could provide results more quickly when needed, for example when a patient had an appointment the following day with their GP or hospital consultant.

Learning from complaints and concerns

It was easy for people to give feedback and raise concerns about care received. The service treated concerns and complaints seriously, investigated them and shared lessons learned with all staff. The service included patients in the investigation of their complaint.

The service had an up-to-date complaints policy, which outlined procedures for accepting, investigating, recording and responding to complaints about the service. Staff understood the policy on complaints and knew how to handle them, although very few complaints had been received. Staff we spoke with were able to explain what they would do if concerns were raised by patients. The service's website had links for patients to rate the service they had received and to give feedback.

Are Diagnostic and screening services well-led?

Good 

This is the first time we have rated this service. We rated it as good.

Leadership

Leaders had the skills and abilities to run the service. They understood and managed the priorities and issues the service faced. They were visible and approachable in the service for patients and staff. They supported staff to develop their skills and take on more senior roles.

There was compassionate and effective leadership at all levels. Leaders at all levels demonstrated the high levels of experience, capacity and capability needed to deliver excellent and sustainable care. There was a clear management structure with defined lines of responsibility and accountability. The registered manager held overall leadership responsibility with support from managers. The registered manager was passionate about the service and worked well with the team of staff. The registered manager actively engaged with staff both formally and informally in order to understand issues and to be visible and approachable.

Vision and Strategy

The service had a vision for what it wanted to achieve and a strategy to turn it into action.

The service had clear aims and objectives which were set out in its statement of purpose. The service aimed to help the NHS increase its capacity, providing patients with first class services including superior facilities, reduced waiting times, and professional and accurate testing. Leaders were focussed on ensuring the service continued to meet its aims and objectives, and meeting future challenges.

Culture

Staff felt respected, supported and valued. They were focused on the needs of patients receiving care. The service provided opportunities for career development. The service had an open culture where patients, their families and staff could raise concerns without fear.

Diagnostic and screening services

Leaders had an inspiring shared purpose, and strived to deliver and motivate staff to succeed. The service had a strong culture which the registered manager described as “patient first”. There were high levels of satisfaction across all staff. We spoke to staff who were open and honest, and who were keen to continually improve the experience of patients. Staff were proud of the organisation as a place to work and spoke highly of the culture. Staff at all levels were actively encouraged to speak up and raise concerns. Staff confirmed they felt able to raise any concerns and acknowledge and rectify any mistakes. Staff we spoke to understood the duty of candour.

Some staff had been supported by the service to obtain qualifications to advance their careers.

The service adhered to the principles of the Workplace Wellbeing Charter. The service sought to provide a good work and life balance for its employees for example by having a wellbeing budget to spend on enjoyable activities for staff.

Governance

Leaders operated effective governance processes, throughout the service and with partner organisations. Staff at all levels were clear about their roles and accountabilities and had regular opportunities to meet, discuss and learn from the performance of the service.

There were effective governance structures, processes and systems of accountability to support the delivery of good quality services and safeguard high standards of care.

All levels of governance and management functioned effectively and interacted with each other appropriately. There were a range of systems and processes of accountability which supported the delivery of safe and high-quality services, including regular team meetings. Staff at all levels were clear about their roles and understood what they were accountable for and to whom.

Managers and directors held quarterly quality management meetings, and weekly manager discussions. There were also regular staff meetings, and regular audit checks were completed.

Management of risk, issues and performance

Leaders and teams used systems to manage performance effectively. They identified and escalated relevant risks and issues and identified actions to reduce their impact. They had plans to cope with unexpected events.

The registered manager demonstrated knowledge and oversight of the service’s main risks and understood the challenge of risks in terms of quality, improvements, and performance. Leaders maintained a company business risk register which identified potential risks and their consequences and specified how these were mitigated. This included how the service would cope with unexpected events such as a cyber-attack or natural disaster, as well as risks such as staffing and recruitment. The service also had risk assessments and audits to manage specific topics such as infection control.

Information Management

The service collected reliable data and analysed it. Staff could find the data they needed, in easily accessible formats, to understand performance, make decisions and improvements. The information systems were integrated and secure. Data or notifications were consistently submitted to external organisations as required.

Diagnostic and screening services

The service was up to date with information governance and had data retention policies. These stipulated the requirements of managing patients' personal information in line with current data protection laws.

The service retained records in line with General Data Protection Regulations (GDPR).

During our inspection, we saw good arrangements to ensure confidentiality of accurate patient information.

There were regular external audits of information and management systems.

Engagement

Leaders and staff actively and openly engaged with patients, staff and local organisations to plan and manage services. They collaborated with partner organisations to help improve services for patients.

Leaders held monthly meetings to share information with the local NHS Trusts who contracted the service. There were regular staff surveys, and staff were also able to communicate with managers on an on-going basis. There were processes to collect and act upon patient feedback.

Learning, continuous improvement and innovation

All staff were committed to continually learning and improving services. They had a good understanding of quality improvement methods and the skills to use them. Leaders encouraged innovation and participation in research.

The service sought feedback to improve services. The service used feedback and audit results to help identify any desired improvements and ensure they provided an effective service. Policy compliance and training were discussed at monthly team meetings, and staff took time together in team meetings to review the service's performance and objectives.

We saw evidence of improvements in response to feedback. We noted that staff had a positive attitude to our inspection and were keen to use our findings to improve services.