

Just Ears

Inspection report

Room 12, Pure Offices
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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?

Requires Improvement 

Are services effective?

Good 

Are services well-led?

Good 

Overall summary

This service is rated as Good overall. At the previous inspection in July 2021 we rated this service as Requires Improvement.

The key questions are rated as:

Are services safe? – Requires improvement

Are services effective? – Good

Are services well-led? – Good.

We carried out an announced focused inspection at Just Ears on 6 July 2022. The inspection was focused on following up on breaches of regulations identified at our previous inspection carried out in July 2021. Following the inspection in 2021 we asked the provider to make improvements regarding:

- Implementing systems to identify, monitor and mitigate risks relating to health and safety, for example by maintaining assurances that risks at branch sites are managed effectively.
- Maintaining staff records that evidence safe recruitment in accordance to national guidance.
- Ensuring the service retained records of equipment safety checks and maintenance.
- Developing a full range of relevant policies that are kept up-to-date and made available to staff.
- Ensuring any changes to the service, such as new branch sites, are included in an updated Statement of Purpose and these changes are notified to the Care Quality Commission (CQC).

In July 2021, we rated two of the key questions, Safe and Well-led as Requires Improvement and reported two breaches of regulations. These were:

- Regulation 17 (Safe care and treatment) Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and
- Regulation 12 (Statement of Purpose) CQC (Registration) Regulations 2009

For this follow up inspection in 2022, we focused on the key questions of Safe, Effective and Well-led and checked the areas we had previously found needed improvement. We found improvements had been made, most of the issues had been resolved whilst some areas of improvement needed to be further embedded such as regular appraisals..

Just Ears provides ear wax removal service using microsuction. This is where clinicians use a microscope to view the ear canal and a small suction device to remove the wax.

This service is registered with CQC under the Health and Social Care Act 2008 for the provision of the regulated activity: Treatment of disease, disorder or injury.

One of the Just Ears' directors 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.

Our key findings were:

- There was a vision for the service and a commitment to patient-centred care

Overall summary

- The provider had made improvements following our previous inspection in relation to premises and risk assessments. It had invested in additional human resources advice and a new information management system.
- The provider actively sought patient feedback to develop and improve services.
- Just Ears had developed their own training and competency assessment programme for practitioners.
- There was a positive culture which supported effective communication, learning and development.
- Just Ears was not assured that staff had completed safety training in line with its own requirements. The provider must ensure staff employed by the service receive the appropriate training and supervision.

The areas where the provider **must** make improvements as they are in breach of regulations are:

- The provider must ensure staff have the training and skills required by the organisation to deliver safe care, and a system to monitor this.

(Please see the specific details on action required at the end of this report).

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

- The provider should ensure clinical practitioners complete the required adult safeguarding training for their roles.
- The provider should risk assess training requirements for safeguarding children.
- The provider should ensure they have an effective system for recording staff skills, qualifications, professional registration and training.
- The provider should ensure all staff receive timely and effective appraisals.
- The provider should ensure all policies are reviewed and added onto the new information management system.
- The provider should continue to embed the new information management system and populate it with updated management information.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

Our inspection team was led by a CQC lead inspector.

Background to Just Ears

The registered provider is Southern ENT Limited, and the service is operated from the following address:

Room 12, Pure Offices, Port View, One Port Way, Port Solent, Portsmouth, PO6 4TY

The Just Ears website is <https://www.justears.co.uk/>

The main location at Port Solent is the hub of 13 Just Ears sites in the south east of England, located in an area between Ringwood and Salisbury in the west and Tonbridge in Kent, to the east. All management staff are based at the main location in Port Solent.

Just Ears provides ear wax removal service using microsuction. The service is delivered by trained ear, nose and throat (ENT) practitioners, including consultant surgeons, nurse practitioners and a GP with a specialist interest in ENT. The services are provided privately to adults and these services are not commissioned by the NHS.

This service is registered with Care Quality Commission (CQC) under the Health and Social Care Act 2008 for the provision of the regulated activity, Treatment of disease, disorder or injury. The provider had added three new sites and closed two since our last inspection.

One of the Just Ears' directors 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 additional branch sites operated by Just Ears are in the following towns and cities:

Woolston

Woolston Lodge Surgery
66 Portsmouth Road, Woolston, Southampton
SO19 9AL

Chichester

Southdowns Private Healthcare
The Old Granary
The Street
Boxgrove
Chichester
PO18 0ES

Emsworth

Just Ears Emsworth
Hampshire Health
97 Havant Road
Emsworth
PO10 7LF

Esher

Health Village Esher at Esher Groves
Church Street
Esher, Surrey
KT10 8QS

Gosport

Knott Kinetics,
49 Stoke Rd,
Gosport
PO12 1LS

Guildford

Guildford Just Ears
Guildford Physiotherapy and Sports Clinic
Matthews House
85 Epsom Road, Guildford
Surrey, GU1 3PA

Horndean

Horndean
Horndean Surgery
7-11 London road
Horndean
PO8 0BN

Ringwood

Ringwood Medical Centre
The Close
Ringwood
Hampshire
BH24 1JY

Salisbury

Salisbury Medical Practice,
Fisherton House, Fountain Way,
Wilton Road,
Salisbury,
Wiltshire,
SP2 7FD

Tonbridge

The Tonbridge Clinic
339 Shipbourne Road
Tonbridge
Kent
TN10 3EU

Winchester

Friarsgate Surgery
Buttercross Suite
Stockbridge Road
Winchester SO22 6EL

Poole

Just Ears Poole
Total Therapy, Lower Ground Floor
Lilliput Surgery, Elms Avenue Poole BH14 8EE

Orpington

Just Ears Orpington
Petts wood Practice
1a West Way
Petts Wood
Kent

The clinics are open at different times Monday to Friday, and the service also offers appointments on Saturday mornings if requested. Patients can view availability and book online for each site or can discuss appointment availability over the phone with the central administration staff.

How we inspected this service

We requested documents to be reviewed in advance and carried out short site visits to the main office and to Emsworth branch clinic. We viewed submitted evidence including photos of Gosport site, to show changes made since the last inspection.

We did not speak with patients directly. The provider routinely collected feedback from all patients after their appointments, and shares the results on their website for public viewing. We used this to assess patient feedback.

Are services safe?

We rated safe as Requires improvement because:

At the last inspection in 2021, we rated Safe as Requires Improvement. This was because the provider lacked assurances relating to the safety of the rooms used in the different sites and staff did not have access to safety policies. We found recruitment checks were not fully documented.

This inspection undertaken in July 2022 showed the provider had made improvements to ensure assurances were in place for the different sites used to deliver the services. Systems were in place to demonstrate safe recruitment and staff had access to policies and procedures on a new information management system.

However, at this inspection we found that some staff were not up to date with the safety training required by Just Ears and practitioners were not required to complete the level of adult safeguarding training stated in the intercollegiate guidance 'Adult Safeguarding: Roles and Competencies for Health Care Staff (Royal College of Nursing)'. This is a breach of regulation and the details are included at the end of this report.

Safety systems and processes

The service had clear systems to keep people safe and safeguarded from abuse. However, further improvements must be made in how the service manages training in relation to keeping patients safe.

- The provider leased rooms in 13 branch sites, within a range of health centres and physiotherapy clinics. At our last inspection in 2021 we found the service had not conducted safety risk assessments for their leased rooms. At this inspection, we found risk assessments had been completed for all branch sites and were held on a new information management system which supported and prompted regular reviews.
- At the last inspection in 2021, we found that staff did not have access to key documents when they were working at branch sites. At this inspection in July 2022, we found the provider had key documents relating to patient safety, including policies, clinical protocols and the employees handbook on the service's new information management system, where they could be referenced by all staff. These documents outlined who to go to for further guidance.
- We found that staff were not up to date with safety training required by Just Ears. Staff were expected to complete safety training in topics such as infection control, adult safeguarding, basic life support, and information governance. Records showed not all staff had completed the training in the timescales required by Just Ears. For example, two staff had not completed basic life support within the previous two years and there was no recorded training for four other staff. Staff were required to complete training in adult safeguarding annually. However, there was no evidence that this had been completed by six staff.
- The service only treated adults and advised patients not to bring children with them to their appointment. The service did not require practitioners to have an awareness of child safeguarding, however this had not been formally risk assessed.
- We found Just Ears required clinical practitioners (nurses) to complete adult safeguarding training at level 2. This was not in line with the competency framework set out in the intercollegiate guidance 'Adult Safeguarding: Roles and Competencies for Health Care Staff (Royal College of Nursing)' in 2018, which states that registered nurses should be trained to Level 3. This was highlighted at the inspection and registered manager of Just Ears acknowledged this was required.
- The Just Ears medical director was the safeguarding lead and staff we spoke with understood their role and responsibilities in reporting suspected abuse of vulnerable adults. The standard operating procedures for each clinic summarised actions to be taken in response to safeguarding concerns and included contact details of the local safeguarding agency.

Are services safe?

- At our previous inspection we found that the agreements, or memoranda of understanding (MOUs), between the host sites and Just Ears did not make it clear who had responsibility for undertaking specific safety checks. The MOUs had been updated since our last inspection to make these responsibilities clear. For example, Just Ears requested assurances from host sites in relation electrical and gas safety.
- We saw evidence that portable appliances were safety checked, and Just Ears had set up systems to prompt this to be conducted regularly on their own equipment.
- At our last inspection we found the provider did not have records of completing environmental risk assessments. At this inspection the provider showed us these had been completed for all branch sites and records were maintained on file within the service's information system
- At the last inspection we observed that electrical leads for the microscope and suction device could present a trip hazard, and this had not been documented with mitigations. At this inspection found this had been addressed.
- There was a maintenance contract in place for the repair and maintenance of microscopes and suction equipment.
- At the last inspection we found the provider did not have a system for recording recruitment processes, to demonstrate staff were safe to work in their roles. We found at this inspection that there was a checklist for ensuring appropriate recruitment checks were undertaken for new staff. The practice manager monitored that required pre-employment checks and induction were completed. Disclosure and Barring Service (DBS) checks were undertaken where required. (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). Staff with patient contact were required to complete enhanced DBS checks and evidence of this was kept on file.
- There was an effective system to manage infection prevention and control. There were cleaning checklists for each site and agreements between the host site and Just Ears on cleaning arrangements. Just Ears requested evidence from host sites that the premises met the standards of health care premises.
- At the previous inspection, staff did not have consistent access to electronic versions of policies and procedures. At this inspection we found they were available on the service's new information system. There was password protection and access rights were controlled so that staff had access to policies relevant to their roles.

Risks to patients

There were systems to assess, monitor and manage risks to patient safety.

- There were arrangements for planning and monitoring the number and mix of staff needed. Staff worked across different sites and clinics were adjusted depending on patient demand. Staff were prepared to be flexible in where they worked and could cross-cover when necessary. This was in their employment contract.
- Staff understood their responsibilities to manage emergencies and to recognise those in need of urgent medical attention. There was guidance specific to each site in the room folders. Staff never worked alone at sites and guidance was to call for help and dial 999. However, not all staff were up to date with training in basic life support.
- Just Ears provided appropriate professional indemnity for all clinical staff and liability insurance for all staff.
- If the practitioner identified an infection that needed medical treatment, they advised the patient accordingly and wrote to their GP to explain their findings.

Information to deliver safe care and treatment

Staff had the information they needed to deliver safe care and treatment to patients.

- Individual care records were written and managed in a way that kept patients safe. The provider maintained electronic care records that were templated to ensure practitioners completed and recorded each stage of the ear health assessment and treatment.

Are services safe?

- Practitioners ensured patients understood what the treatment would feel like, and possible risks and side effects, before patients signed their consent to treatment on the electronic record. The practitioners recorded their findings from an examination of both ears including any issues that might need additional medical care, for example relating to the health of the tympanic membrane. The patient record included a plan for further care.
- Care records were available and accessible, so patients' previous history of care within the service was available, irrespective of the Just Ears clinic they had previously attended.
- The service had systems for sharing information with other agencies to enable them to deliver safe care and treatment. If findings indicated the need for further medical treatment, the practitioner sent a letter to the patient's GP. The letters were sent by head office and held within the patient record. Patients were also sent a copy.
- The service had a system in place to retain medical records in line with Department of Health and Social Care (DHSC) guidance in the event that they cease trading.

Safe and appropriate use of medicines

- The service did not store emergency medicines or prescribe medicines to patients. Practitioners directed patients to their GP if they found evidence of an ear infection.

Track record on safety and incidents

The service had a good safety record.

- The provider had not experienced any serious incidents or significant events in the past two years. There were risk assessments in place for each site and Standard Operating Procedures for staff to follow. Staff knew their responsibility to keep patients safe and to raise any concerns or incidents with the head office for review.
- The service monitored activity and patient feedback. This helped it to understand the performance of individual practitioners and provide additional support if necessary.

Lessons learned and improvements made

The service learned and made improvements when things went wrong.

- There had been no incidents in the past year. If any incidents occurred, they would be reviewed first by the medical director. They also reviewed any clinical complications and raised these for wider discussion, including at the monthly director meetings and quarterly clinical governance meetings.
- At the last inspection we said the provider had not developed an incident policy to describe the actions it would take in response to different types of incident. In this inspection we found the procedure on actions to take in response to incidents was included within the provider's Standard Operating Procedure document. For example, there was guidance on how to support a patient if they experienced illness or dizziness. Staff understood their duty to raise concerns if they had any and to comply with the requirements of the Duty of Candour. The provider encouraged a culture of openness and honesty.

Are services effective?

We rated effective as Good

Effective needs assessment, care and treatment

The provider had systems to keep clinicians up to date with current evidence based practice. We saw evidence that clinicians assessed needs and delivered care and treatment in line with current legislation, standards and guidance relevant to their service.

- Patients' immediate and ongoing needs in relation to ear health and hearing were fully assessed. Practitioners assessed patients' needs following the provider's clinical protocols. Earwax removal is recommended by the National Institute for Health and Care Excellence (NICE) to improve hearing, and in 2017 NICE stated microsuction should only be used by trained staff and is safer than wax removal using ear syringing.
- Practitioners had enough information to develop a treatment plan for each patient. This was based on the patient's initial contact with the service, their medical history and findings from their examinations of both ears.
- We saw no evidence of discrimination when making care and treatment decisions.
- Staff assessed and managed patients' pain where appropriate. Patients were advised that the treatment would be noisy, and practitioners advised them to say if they felt pain and checked on how they felt during the procedure.
- Patients were advised about possible side effects such as tinnitus (a sensation or awareness of sound that is not caused by a real external sound source) and/or dizziness and were asked to call the service if they experienced any complications.

Monitoring care and treatment

The service was actively involved in quality improvement activity.

- The service used information about care and treatment to make improvements. For example, it had improved the clinical record to add further prompts for practitioners to complete, to provide a more comprehensive record of care.
- Just Ears had undertaken an audit to understand reasons for patients re-attending within two weeks for unplanned care. This audit was based on data collected between March 2018 and August 2020. It was reported in our previous inspection report and publication was planned for 2022.

Effective staffing

Staff had the skills, knowledge and experience to carry out their roles.

- All staff were appropriately trained and supported in carrying out ear microsuction. Just Ears had developed a comprehensive clinical training and induction programme, tailored to staff with different levels of experience. This was clearly laid out and staff said they found it very effective. Before staff were employed, they were assessed for their aptitude for the work. Their training involved observing clinical partners. There was a training microscope at the head office with a dual scope design which supported this approach. Trainees received a microsuction wax removal training manual that incorporated the training programme, guidance on how to complete the treatment record and a description of how to carry out the procedures. This guidance emphasised what to do if the practitioner identified an infection in the ear. The provider had an induction and training programme for all newly appointed staff and staff were required to pass a competency exam before being allowed to treat patients without supervision. Trainee staff were supervised carrying out microsuction earwax removal with a minimum number of patients. When they were confident to practice unsupervised, they were required to complete their logbook and a probation period.
- At recruitment, Just Ears checked medical and nursing professionals were registered with the General Medical Council (GMC) and the Nursing and Midwifery Council (NMC). Staff said they were supported with revalidation.

Are services effective?

Coordinating patient care and information sharing

Staff worked together, and worked well with other organisations, to deliver effective care and treatment.

- Patients received coordinated and person-centred care. Staff helped patients find the most appropriate site for their appointment and explained options.
- Staff communicated effectively with each other and said they could always seek advice from colleagues when required.
- The service also prepared patients effectively for their appointments. For example, staff advised patients to use specific wax-softening products in advance of the appointment to improve the microsuction outcome.
- Patients were asked for consent to share details of their consultation with their registered GP. We saw evidence of letters sent to their registered GP in line with GMC guidance
- The practitioners liaised with patients' GPs if they found infections or advised patients to attend hospital if these were severe.

Supporting patients to live healthier lives

Staff supported patients to look after the health of their ears.

- Where appropriate, staff gave people advice so they could continue to look after the health of their ears. The Just Ears website also provided a range of information about the anatomy of the ear and ear care. This included how best to keep the ear clean and how to minimise the risk of damage or infections. The website offered useful information for patients to help them keep their ears healthy.
- Risk factors relating to the health of patients' ears were identified from the medical history and from notes from previous treatments. This helped staff tailor their advice for patients, for example in how best to self-care for their ears.
- Where patients' needs could not be met by the service, staff redirected them to an alternative appropriate service, such as their GP.

Consent to care and treatment

The service obtained consent to care and treatment in line with legislation and guidance.

- Staff understood the requirements of legislation and guidance when considering consent and decision making. Patients were asked to consider and complete a revised and comprehensive consent form detailing the possible risks before the practitioner started treatment.
- The consent form had been made more detailed since the 2021 inspection and practitioners ensured patients understood the procedure and a range of possible complications prior to treatment.
- The service had set up the patient record to ensure that consent was sought before practitioners started any treatment.

Are services well-led?

We rated well-led as Good because:

The provider had addressed the issues raised at the previous inspection in 2021 in relation to governance and safety. Appraisals for staff had been completed or were booked and the provider had submitted revised Statement of Purpose documents to CQC when required. The provider used a new electronic information system to support good governance and had contracted in external services to provide human resources advice and tools. There was a new practice manager and administration team to support and embed governance arrangements.

The information management system was not fully populated and the provider should ensure it is populated with management information including that relating to staff training.

Leadership capacity and capability;

Leaders had the capacity and skills to deliver high-quality, sustainable care.

- Leaders were knowledgeable about issues relating to the future of the business. They were aware of the challenges and had plans to address them. A new practice manager had been appointed and they were focused on setting up improved management systems to support consistent governance. They had commissioned an external company to assist with human resources.
- Staff told us leaders were visible and approachable. They worked with staff and supported them to deliver high standards of care and treatment.

Vision and strategy

The service had a clear vision to deliver high quality care and promote good outcomes for patients.

- There was a clear vision and set of values. The agreed mission statement for Just Ears Clinic was that it 'aims to provide an excellent, high quality, affordable service for self-funding patients for the removal of ear wax using the very safe and reliable technique of microsuction. We aim to provide this in a caring and responsive manner regardless of race, age, gender, disability, sexual orientation, religion or belief.' The mission statement included a commitment to provide a patient-centred service, promoting best practice treatment in a caring and compassionate way.

Culture

The service had a culture of high-quality sustainable care.

- Staff felt respected, supported and valued. They were proud to work for the service and found the culture to be inclusive and caring.
- The service focused on the needs of patients and actively sought patient feedback. Positive patient feedback was used as a key measure of quality. Staff received regular feedback on patient feedback and this was shared with staff in a supportive way.
- Openness, honesty and transparency were demonstrated when responding to complications and complaints. The provider was aware of and had systems to ensure compliance with the requirements of the duty of candour.
- Staff told us they could raise concerns and were encouraged to do so. They had confidence that these would be addressed.

Are services well-led?

- At our last inspection, we reported that regular staff appraisals had not always taken place as they should due to the pressures linked to the COVID-19 pandemic. At this inspection, we found that there was a new team of administration staff and they had regular support and appraisals. Appraisals had been booked for practitioners in August and September 2022. Staff told us they received monthly reports on their client feedback and were encouraged to provide a high quality of care.
- The safety and well-being of all staff was considered and there was no lone-working at any of the clinics.

Governance arrangements

There were roles and systems of accountability to support good governance and management. Systems were not fully implemented and embedded.

- Just Ears had structures, processes and systems to support governance and management. These were not fully embedded as the service used a new system to support governance and the functions and benefits of this system were still being rolled out, under the management of a new practice manager. Information was being transferred onto the new system at the time of the inspection.
- Roles of accountability were in place. The service held regular director meetings and clinical governance meetings and these had been held virtually during periods of the COVID-19 pandemic. There were group-chats for operational staff to keep up to date with changes and events. Newsletters had been reinstated for staff communication.
- At the last inspection we found the provider had not maintained an up-to-date statement of purpose to reflect the different branches and their management arrangements. Since the last inspection, the registered manager had notified CQC of changes to branch sites and had submitted an updated statement of purpose.
- At the last inspection we found the provider had not established and reviewed policies in relation to, for example, health and safety or incident management, and policies were not clearly version-controlled to demonstrate their review date and any changes. At this inspection we found the provider had a health and safety policy in place. There was a new information system for storing and managing policies and procedures. Just Ears had appointed a new practice manager and administration team for the organisation and was in the process of reviewing policies and procedures and adding them to this system.
- The service used performance information which was reported and monitored and management and staff were held to account. Management reports showed that support was arranged for staff where indicated.
- The service submitted data or notifications to external organisations as required. They notified the Care Quality Commission of relevant changes to their organisational structure.
- There were robust arrangements in line with data security standards for the availability, integrity and confidentiality of patient identifiable data, records and data management systems.

Managing risks, issues and performance

There were clear and effective processes for managing risks, issues and performance.

- At the last inspection we found there were gaps in identifying and managing risks relating to premises and staff recruitment. These had been addressed and there were systems for gaining assurance from host providers that premises were safely maintained. Just Ears had recruited consultancy services for human resources support and there were systems to demonstrate safe staff recruitment. However, we found the provider did not have a system for recording and monitoring required staff training and staff training requirements were not clearly communicated.
- The service had processes to manage current and future performance. A templated clinical record meant that staff could not complete each stage of the assessment and treatment plan without first including full details. The template had been updated to ensure staff completed information boxes relating to both ears, as opposed to leaving this for free-text entries.

Are services well-led?

- Clinical performance was monitored primarily through patient feedback and staff received monthly performance reports. There was evidence of action to change services to improve quality.
- The provider had plans in place and had trained staff for major incidents.

Appropriate and accurate information

The service acted on appropriate and accurate information.

- Views of patients, quality and operational information was used to ensure and improve performance.
- There were robust arrangements in line with data security standards for the availability, integrity and confidentiality of patient identifiable data, records and data management systems.

Engagement with patients, the public, staff and external partners

The service involved patients, the public, staff and external partners to support high-quality sustainable services.

- The service encouraged and heard views and concerns from the public, patients, staff and external partners and acted on them to shape services and culture. All patients were asked to provide feedback on their experience and treatment and they were prompted to offer their suggestions on a range of topics. These were noted and discussed by the service.
- Staff views were gained informally and also at exit interviews. There had not been a staff survey since the COVID-19 pandemic and the leadership team aimed to undertake another in 2022.
- The service encouraged staff awareness and involvement by publishing newsletters and weekly updates.
- The service was transparent, collaborative and open with stakeholders about performance.

Continuous improvement and innovation

There were systems and processes for learning and continuous improvement but these were not fully embedded

- There was a focus on continuous learning and improvement through the monitoring of patient feedback and monitoring the requests from patients for further review following their microsuction appointment.
- The service aimed to set up a patient forum for testing out new ideas and more in-depth feedback.
- At our last inspection we found the appraisal process had lapsed. At this inspection, practitioner staff appraisals were booked for dates in August and September 2022, and administrative staff had completed their induction and appraisal reviews.
- The provider had a new information management system and was in the process of making wider use of its functionality by populating it with key data and documents.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Treatment of disease, disorder or injury	Regulation 18 HSCA (RA) Regulations 2014 Staffing The provider was not assured that its practitioners met its own training requirements for statutory and mandatory training.