

# SDC (UK) 1 Limited

# SDC (UK)1 Limited Prime Health & Beauty Clinic -Nottingham

# **Inspection report**

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## Overall summary

We carried out a focussed inspection of Prime Health & Beauty Clinic – Nottingham on 20 April 2017. This was to check that improvements had been made following the breach of legal requirements we identified from our comprehensive inspection carried out on 24 February 2016. During our inspection in February 2016 we identified regulatory breaches in relation to regulations 13 and 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

This report only covers our findings in relation to the areas identified as requiring improvement following our inspection in February 2016. You can read the report from this comprehensive inspection by selecting the 'all

reports' link for SDC (UK)1 Limited Prime Health & Beauty Clinic - Nottingham on our website at www.cqc.org.uk. The areas identified as requiring improvement during our inspection in February 2016 were as follows:

- Ensure that the doctor undertakes training on safeguarding vulnerable adults
- Ensure that recruitment procedures are followed and that the relevant checks are made on clinical staff in line with Schedule 3 of the Health and Social Care Act (Regulated Activities) Regulations 2014

Our focused review on 20 April 2017 showed that improvements had been made

# Summary of findings

# The five questions we ask about services and what we found

We always ask the following five questions of services.

### Are services safe?

We found that this service was providing safe care in accordance with the relevant regulations



# SDC (UK)1 Limited Prime Health & Beauty Clinic - Nottingham

**Detailed findings** 

# Background to this inspection

This inspection was carried out on 20 April 2017 and was led by a member of the CQC medicines team. A second member of the CQC medicines team was present.

Before our inspection, we reviewed information sent to us by the provider. This information told us how they had addressed the breaches of legal requirements we identified during our comprehensive inspection on 24 February 2016.

The inspection was a desk top review carried out at the clinic in Derby which is run by the same doctor. We reviewed documentation relating to the Nottingham clinic and spoke to the registered manager and a member of staff.

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the service was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008

Prime Health and Beauty Clinic provides a private weight reduction service for adults and supplies medicines and dietary advice to the patients who use the service. The clinic operates from a first floor consulting room in the centre of Nottingham. It is open from 10.30am to 6.00pm on Tuesdays and Saturdays.

The clinic is run by one doctor who 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 a legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the service is run. There is a clinic in Derby run by the same provider.

This service is registered with CQC under the Health and Social Care Act 2008 in respect of the provision of advice or treatment by, or under the supervision of, a medical practitioner, including the prescribing of medicines for the purposes of weight reduction. At Prime Health & Beauty Clinic - Nottingham, the aesthetic cosmetic treatments that are also provided are exempt by law from CQC regulation. Therefore we were only able to inspect the treatment for weight reduction and not the aesthetic cosmetic services.

### Our key findings were:

Since our February 2016 inspection, improvements had been made.

- The doctor and all relevant staff had undertaken training in safeguarding vulnerable adults
- Staff files had been updated and there was a recruitment policy and checklist in place to ensure that the appropriate checks would be made for any new staff employed.

There were areas where the provider could make improvements and should:

• Review the arrangements for dealing with medical emergencies

# **Detailed findings**

 Review the arrangements for cleaning and maintaining premises and equipment, as identified at our last inspection, to ensure they are carried out regularly

# Are services safe?

# **Our findings**

# Reliable safety systems and processes (including safeguarding)

We saw a policy on adult safeguarding, and certificates to show that the doctor and members of staff had attended a course on adult safeguarding. There was a form available for staff to use to highlight any concerns to the local safeguarding team. We spoke to a member of staff who confirmed that they had read the safeguarding policy, however there was no record of this. The clinic had a form to record that staff had read policies, but it had not been completed. We were told that the policy folder had been lost and so all polices had been reissued, and that a signature list would be completed for the new versions.

### **Medical emergencies**

The service did not deal with medical emergencies so they did not hold emergency medicines and equipment. They had not formally assessed what would be required to manage an emergency, however we saw records to show that the doctor was planning to attend a relevant course to update their knowledge in this area.

### **Staffing**

We saw that staff files had been put in place for the doctor and other staff who worked in the slimming clinic service. These included a Disclosure and Barring Services (DBS) check which the provider told us they had decided to request. We saw that the recruitment policy had been updated and included a document checklist and a template for interview notes, however no staff had started work in the slimming clinic service since the introduction of the policy, so there were no completed examples available. We saw that there was a confidentiality policy in place which a member of staff confirmed they had read, but there was no record of this. There was a record form available and we were told this would be completed immediately.

### **Premises and equipment**

We saw records to show that equipment such as blood pressure measuring equipment and weighing scales had been checked and maintained in February 2017. Premises were cleaned by staff and the doctor told us she cleaned the equipment weekly, however there was no formal schedule or record keeping system in place for cleaning or maintenance so we could not be sure it was carried out regularly.