

AO Medical Ltd

Inspection report

104 Oak Road Tiptree Colchester CO5 0NA Tel: 07531463257

Date of inspection visit: 08 October 2021 Date of publication: 28/10/2021

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?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Good	

Overall summary

This service is rated as Choose a rating overall.

The key questions are rated as:

Are services safe? - Good

Are services effective? - Good

Are services caring? - Good

Are services responsive? – Good

Are services well-led? - Good

We carried out an announced comprehensive inspection at AO Medical Ltd, on 08 October 2021 as part of our inspection programme.

This service is registered with CQC under the Health and Social Care Act 2008 in respect of some, but not all, of the services it provides. There are some general exemptions from regulation by CQC which relate to particular types of service and these are set out in Schedule 2 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. AO Medical Ltd provides a range of cosmetic procedures, injections, and intravenous therapy treatments, some of which are outside the CQC scope of registration. Therefore, we did not inspect or report on the services outside of scope.

The service has a registered manager. (the provider). 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:

- The service provided care in a way that kept people safe and protected them from avoidable harm.
- People received care and treatment that met their expectations.
- The provider cared for people in a kind and respectful manner, involving them in their decisions about their care treatments.
- The provider organised and delivered care and treatments to meet peoples' needs. People could access their care and treatment in a manner that met their needs.
- The provider had processes and systems in place to monitor quality and governance.

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. They spoke with the provider during a site visit and requested information before and after the visit.

Background to AO Medical Ltd

AO Medical Ltd offers 'IntraVita' intravenous (IV) drip therapy and is registered with the CQC as an independent consulting doctors service. The treatments delivered are intravenous (IV) drips, injections which were in scope of registration, and surgical anti-aging treatments. The provider is registered to provide surgical procedures, and diagnostic and screening procedures, and is located at 104 Oak Rd, Tiptree, Colchester, Essex, CO5 0NA.

IntraVita International Ltd is a UK registered pharmacy in the grounds of this location (which is outside the scope of registration for this inspection) producing healthcare products regulatory agency (MHRA) approved products as a wholesaler, offering training courses, and aesthetic treatments in the aesthetic industry. They are also a centre for clinical trials and research and have been approved by ethics committees for numerous studies on humans for companies to obtain CE Mark or FDA Approval.

The treatment provided to people includes consultations, assessments and treatments. The clinic has two treatment rooms, an IV chill-out area, and a training facility.

The service 'intravenous therapy' was mainly provided for non-medical purposes, and a range of aesthetic procedures, some of these activities are outside the scope of CQC registration.

The service operates Monday to Friday from 10am to 3pm. All the appointments are pre-bookable on-line.

How we inspected this service

We requested information from the provider and reviewed this prior to the inspection site visit. The methods we used on site, were talking to the provider, and a review of documents, polices, risk assessments, and procedures. We spoke with people that used the service remotely following the site visit.

To get to the heart of peoples' 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 safe?

We rated safe as Good because:

Safety systems and processes

The service had clear systems to keep people safe and safeguarded from abuse.

- The provider conducted audits and safety risk assessments. It had appropriate safety policies, which were regularly reviewed. We found the provider was aware how to protect adults from abuse.
- The service had procedures in place to assure them that people were psychologically prepared prior to receiving treatment.
- The provider had received a disclosure and barring service (DBS) 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).
- The provider held up-to-date safeguarding and safety training appropriate to their role. They knew how to identify and report concerns.
- There was an effective system to manage infection prevention and control. We found daily cleaning assessments, a legionella risk assessment, and personal protective equipment (PPE) assessments to ensure the service was safe.
- The provider ensured that facilities and equipment were safe, and that equipment was maintained according to the manufacturers' instructions. There was a system and audits to manage healthcare waste safely.
- The provider carried out appropriate environmental risk assessments, which took into account the profile of people using the service.

Risks to people

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

- There were suitable medicines and equipment to deal with medical emergencies which were stored appropriately and checked regularly. This included ensuring they were stored at the correct temperature.
- There was access to the premises for people living with a disability.
- Changes had been made to the environment and the infection control processes at the service to ensure people were provided with effective Covid 19 precautions when attending the service. The changes included signage to remind people attending the service to wear a face mask in specified areas, to maintain distance from others where appropriate, and increased hand washing and sanitising.
- Assessments had been carried out in relation to the environment to ensure the premises were safe and appropriately maintained. For example, an electrical portable appliance test (Pat test) was carried out May 2021, a health and safety assessment carried out June 2021, fire risk assessments and a fire drill carried out July 2021.

Information to deliver safe care and treatment

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

- Individual care records were written and managed in a way that kept people safe. The care records we saw showed an appropriate medical history was taken to ensure enough information was available to deliver safe care and treatment. The records were securely stored to assure peoples privacy.
- The service had systems for sharing information with other services to enable them to deliver safe care and treatment.
- The service had a system in place to retain medical records in line with Department of Health and Social Care (DHSC) guidance.

Safe and appropriate use of medicines

4 AO Medical Ltd Inspection report 28/10/2021



Are services safe?

The service had reliable systems for appropriate and safe handling of medicines.

- The systems and arrangements for managing medicines, including vaccines, emergency medicines and equipment minimised risks.
- The service carried out regular medicines audit to ensure prescribing was in line with best practice guidelines for safe prescribing.
- The provider prescribed, administered or supplied medicines to people and gave them advice about medicines in line with legal requirements and current national guidance. Processes were in place for checking medicines and the provider kept accurate records of medicines.
- There was a process to verify the identity of people.

Track record on safety and incidents

The service had a good safety record.

- There were comprehensive risk assessments for people seen in relation to safety issues.
- The provider had an accident book and safety review processes to keep people safe.

Lessons learned and improvements made

The service learned made improvements when things went wrong.

- We were shown the system to record and act on significant events.
- There were adequate systems for reviewing and investigating incidents when things went wrong.
- The service acted on and learned from external safety events as well as patient and medicine safety alerts.



Are services effective?

We rated effective as Good because:

Effective needs assessment, care and treatment

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

- Records of current evidence based clinical practice was seen.
- Peoples needs were assessed and where appropriate this included their mental and physical wellbeing.
- The provider gathered enough information from people about their medical history to make sure informed decisions about treatments were appropriate.
- We saw no evidence of discrimination when making care and treatment decisions.
- The provider assessed and managed peoples' pain where appropriate.

Monitoring care and treatment

The service carried out quality improvement activity.

• The provider made improvements to their service based on improving peoples satisfaction and outcomes. For example the use of non-penicillin anti-biotics prescribing to reduce the possibility of allergic reactions, and lying patients down for treatments that could be at risk of fainting due to possible needle or treatment phobias.

Effective staffing

The provider had the skills, knowledge and experience to carry out their role.

- The provider was appropriately qualified and registered with the Nursing and Midwifery Council and was up to date with revalidation.
- The provider understood their learning needs and held up to date records of skills, qualifications and training.
- The service monitored the process to seek consent appropriately.

Supporting people to live healthier lives

The provider was consistent and proactive to empower, and support people to manage their health.

- Where appropriate, the provider gave people advice so they could self-care.
- Risk factors were identified, highlighted to people and where appropriate highlighted to their normal care provider for additional support with the consent of the people using the service.
- Where people's needs could not be met by the service, the provider referred them on to an appropriate service for their needs.

Consent to care and treatment

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

• The provider understood the requirements of legislation and guidance when considering consent and decision making.



Are services effective?

• The provider supported people to make decisions. Where appropriate, they assessed people's ability to make a decision.



Are services caring?

We rated caring as Good because:

Kindness, respect and compassion

People were treated with kindness, respect and compassion.

• The provider reported highly positive patient feedback, which was evidenced on the provider's website and the compliments received. The provider displayed an understanding and non-judgmental attitude to all people.

Involvement in decisions about care and treatment

People were helped to be involved in decisions about care and treatment.

- People told us during remote interviews, that they felt listened to and supported by the provider and were given enough time during consultations to make an informed decision about the choice of treatment available to them.
- We were told the risks and benefits were always explained and the provider did not encourage people to undergo treatments they were not comfortable with.

Privacy and Dignity

The service respected peoples' privacy and dignity.

• The provider recognised the importance of people's dignity and respect.



Are services responsive to people's needs?

We rated responsive as Good because:

Responding to and meeting people's needs

The service organised and delivered services to meet people' needs and took account of people's needs and preferences.

- The facilities and premises were appropriate for people and the services delivered by the provider.
- Adaptations had been made to the facilities to allow disabled access.

Timely access to the service

People were able to access care and treatment from the service within an appropriate timescale for their needs.

- People reported the service online appointment system was easy to use and could telephone the provider if they needed to arrange a more flexible appointment time.
- Referrals and transfers to other services were undertaken in a secure manner, respecting people's privacy, and in a timely way.

Listening and learning from concerns and complaints

The service had a complaints procedure to respond appropriately to people and improve quality.

- Information about how to make a complaint or raise concerns was readily available in the public and consultation areas. The provider had received no complaints.
- The service had a complaints policy and procedure in place.



Are services well-led?

We rated well-led as Good because:

Leadership capacity and capability;

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

• The provider was knowledgeable about issues and priorities relating to the quality and future of their treatments.

Vision and strategy

The service had a clear vision and credible strategy to deliver high quality service for people.

There was a clear vision and set of values which was set out on the service website.

Culture

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

- The provider was proud and passionate to maintain a high quality of service for people.
- The provider was aware of and had a policy to ensure compliance with the requirements of the duty of candour.
- There was a strong emphasis on the safety and well-being of people using the service.

Governance arrangements

There were clear responsibilities, roles and systems of accountability to support good governance and management.

- Good governance was clearly set out, understood and effective. The governance promoted interactive and co-ordinated person-centred care.
- The provider had established policies, procedures and activities to ensure safety and assurance that they were performing as intended.

Managing risks, issues and performance

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

- There was an effective process to identify, understand, monitor and address current and future risks including risks to patient safety.
- Clinical audit had a positive impact on quality of care and outcomes for people. There was clear evidence of actions to improve quality.
- The provider had a business continuity plan.

Appropriate and accurate information

The service acted on appropriate and accurate information.

• The service submitted data or notifications to external organisations when required for example the Care Quality Commission.



Are services well-led?

• There were arrangements in line with data security standards for the availability, integrity and confidentiality of patient identifiable data, records and data management systems.

Engagement with people, the public, staff and external partners

The service involved people, and external partners to support high-quality sustainable services.

- The service encouraged and listened to views and concerns from people and acted on them to shape services and culture
- The provider could describe to us the systems for people to give feedback. We saw evidence of feedback on the providers website which was all positive regarding the service, treatments, and the providers care.
- We spoke with a service provider used by AO Medical to refer patients for services not carried out by the provider. We were told the information passed to their service was appropriate and sufficient to keep people safe.

Continuous improvement and innovation

There was evidence of systems and processes for learning, continuous improvement and innovation.

- There was a focus on continuous learning and improvement.
- The service made use of internal and external feedback and reviews.
- The provider regularly improved the range of services provided.