

Announced Focused Inspection Report: Independent Healthcare (online inspection)

Service: FrownDocs, Stirling

Service Provider: FrownDocs Ltd

26 October 2020

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1 A summary of our inspection

We carried out an announced inspection to FrownDocs on Monday 26 October 2020. The purpose of the inspection was to make sure the service was delivering care safely to patients, in light of the COVID-19 pandemic. We reviewed the service's infection prevention and control policies and procedures, and spoke with two members of staff during an online video conferencing call. This was our first inspection to this service.

The inspection team was made up of one inspector.

As part of the inspection process, we asked the service to submit a self-evaluation. The questions in the self-evaluation are based on our Quality Framework and ask the service to tell us what it does well, what improvements could be made and how it intends to make those improvements. The service submitted a limited self-evaluation.

What we found and inspection grades awarded

For FrownDocs, the following grade has been applied to the key quality indicator inspected.

Key quality indicators inspected		
Domain 5 – Delivery of safe, effective, compassionate and person-centred care		
Quality indicator	Summary findings	Grade awarded
5.1 - Safe delivery of care	Effective measures had been introduced to minimise the risk of COVID-19 transmission between staff and patients. Patient care records should be fully completed, and policies regularly reviewed and updated.	✓ Satisfactory

Grades may change after this inspection due to other regulatory activity. For example, if we have to take enforcement action to improve the service or if we investigate and agree with a complaint someone makes about the service.

More information about grading can be found on our website at:

http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/ihc_inspection_guidance/inspection_methodology.aspx

What action we expect FrownDocs Ltd to take after our inspection

This inspection resulted in three recommendations. See Appendix 1 for a full list of the recommendations.

An improvement action plan has been developed by the provider and is available on the Healthcare Improvement Scotland website:
www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx

We would like to thank all staff at FrownDocs for their assistance during the inspection.

2 What we found during our inspection

Service delivery

This section is where we report on how safe the service is.

Domain 5 – Delivery of safe, effective, compassionate and person-centred care

High performing healthcare organisations are focused on safety and learning to take forward improvements, and put in place appropriate controls to manage risks. They provide care that is respectful and responsive to people's individual needs, preferences and values delivered through appropriate clinical and operational planning, processes and procedures.

Our findings

Quality indicator 5.1 - Safe delivery of care

Effective measures had been introduced to minimise the risk of COVID-19 transmission between staff and patients. Patient care records should be fully completed, and policies regularly reviewed and updated.

The service's aesthetic practitioner is a registered GP. The service employs a manager, and there is a rental agreement with a beautician and permanent make-up artist. All staff are kept up to date with COVID-19 guidance through staff meetings held every month.

Only one treatment room was currently being used to provide aesthetic treatments. A second treatment room was used by the beautician and permanent make-up artist. The care environment and patient equipment were clean and in good condition. Staff had considered all aspects of cross contamination and taken action to prevent this. The service had recently moved to new premises, and we were told there had been a significant declutter of the clinic. We saw up-to-date cleaning schedules and discussed in detail the enhanced cleaning of the service that now took place. We saw that appropriate cleaning products were being used before and after each patient's appointment. Appointments were spaced out appropriately to allow for extra cleaning. Pens used by patients at reception were cleaned immediately.

The number of people using the service throughout the day had been reduced, with patients advised to arrive alone and 5 minutes before their appointment time. Patients have a telephone assessment before their appointment, which includes asking about symptoms of COVID-19. They are assessed again on arrival

to the clinic, where they complete a questionnaire about COVID-19 symptoms. This includes contact details, in the event that track and trace is required.

Personal protective equipment, such as face masks, gloves and aprons, was stored appropriately in the reception area and treatment room. Patients were provided with personal protective equipment, such as facemasks, to wear before and after treatment. Alcohol-based hand rub was also available for them to use. We saw an adequate supply of clinical and domestic waste bins for the disposal of personal protective equipment.

Both electronic and paper patient care records were used in the service. We were only able to review one patient care record. We could see that an appropriate COVID-19 related assessment had taken place, and medical history and consent to treatment forms had been documented.

All policies and procedures we saw contained sufficient information and detail about the actions being taken to keep staff and patients safe.

What needs to improve

A number of policies, including the infection prevention and control policy, had not been updated with the service's new logo and made reference to the previous director of the service (recommendation a).

Emergency contact information and the patient's GP details had not been completed in the patient care record we reviewed. The date on the patient's medical assessment was also not documented (recommendation b).

The wrong type of sharps bin was being used to dispose of leftover medications contained in used syringes (recommendation c).

Each treatment room had a non-compliant hand wash basin. We spoke with staff about the need for a risk assessment to be carried out on each sink to ensure adequate hand hygiene can be performed. We will follow this up at a future inspection.

- No requirements.

Recommendation a

- The service should ensure that all policies and procedures are regularly reviewed and updated to make sure all information is correct.

Recommendation b

- The service should ensure all documentation is completed for each patient treatment.

Recommendation c

- The service should ensure the correct waste disposal bins are used for the disposal of all medications.

Appendix 1 – Requirements and recommendations

The actions that Healthcare Improvement Scotland expects the independent healthcare service to take are called requirements and recommendations.

- **Requirement:** A requirement is a statement which sets out what is required of an independent healthcare provider to comply with the National Health Services (Scotland) Act 1978, regulations or a condition of registration. Where there are breaches of the Act, regulations, or conditions, a requirement must be made. Requirements are enforceable at the discretion of Healthcare Improvement Scotland.
- **Recommendation:** A recommendation is a statement that sets out actions the service should take to improve or develop the quality of the service but here failure to do so will not directly result in enforcement.

Domain 5 – Delivery of safe, effective, compassionate and person-centred care	
Requirements	
None	
Recommendations	
a	The service should ensure that all policies and procedures are regularly reviewed and updated to make sure all information is correct (see page 7). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.11
b	The service should ensure all documentation is completed for each patient treatment (see page 8). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.11
c	The service should ensure the correct waste disposal bins are used for the disposal of all medications (see page 8). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.11

Appendix 2 – About our inspections

Our quality of care approach and the quality framework allows us to provide external assurance of the quality of healthcare provided in Scotland.

Our inspectors use this approach to check independent healthcare services regularly to make sure that they are complying with necessary standards and regulations. Inspections may be announced or unannounced.

We follow a number of stages to inspect independent healthcare services.

Before inspections

Independent healthcare services submit an annual return and self-evaluation to us.

We review this information and produce a service risk assessment to determine the risk level of the service. This helps us to decide the focus and frequency of inspection.



Before

During inspections

We use inspection tools to help us assess the service.

Inspections will be a mix of physical inspection and discussions with staff, people experiencing care and, where appropriate, carers and families.

We give feedback to the service at the end of the inspection.



During

After inspections

We publish reports for services and people experiencing care, carers and families based on what we find during inspections. Independent healthcare services use our reports to make improvements and find out what other services are doing well. Our reports are available on our website at: www.healthcareimprovementscotland.org

We require independent healthcare services to develop and then update an improvement action plan to address the requirements and recommendations we make.

We check progress against the improvement action plan.



After

More information about our approach can be found on our website:

www.healthcareimprovementscotland.org/our_work/governance_and_assurance/quality_of_care_approach.aspx

Complaints

If you would like to raise a concern or complaint about an independent healthcare service, you can complain directly to us at any time. However, we do suggest you contact the service directly in the first instance.

Our contact details are:

Healthcare Improvement Scotland

Gyle Square
1 South Gyle Crescent
Edinburgh
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Telephone: 0131 623 4300

Email: his.ihcregulation@nhs.scot

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