

# Announced Follow-up Inspection Report: Independent Healthcare

**Service:** Est-Ethics Wellness Clinic, Glasgow

**Service Provider:** Est-Ethics Ltd

19 June 2023

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# 1 A summary of our follow-up inspection

## Previous inspection

We previously inspected Est-Ethics Wellness Clinic on 25 October 2022. That inspection resulted in one requirement and eight recommendations. As a result of that inspection, Est-Ethics Ltd produced an improvement action plan and submitted this to us. The inspection report and details of the action plan are available on the Healthcare Improvement Scotland website at:

[www.healthcareimprovementscotland.org/our\\_work/inspecting\\_and\\_regulating\\_care/independent\\_healthcare/find\\_a\\_provider\\_or\\_service.aspx](http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx)

## About our follow-up inspection

We carried out an announced follow-up inspection to Est-Ethics Wellness Clinic on Monday 19 June 2023. The purpose of the inspection was to follow up on the progress the service has made in addressing the one requirement and eight recommendations from the last inspection. This report should be read along with the October 2022 inspection report.

We spoke with the service manager during the inspection.

The inspection team was made up of one inspector.

Improved grades awarded as a result of this follow-up inspection will be restricted to no more than 'Satisfactory'. This is because the focus of our inspection was limited to the action taken to address the requirements and recommendations we made at the last inspection. Grades higher than Satisfactory awarded at the last inspection will remain the same. Grades may still change after this inspection due to other regulatory activity.

### Key quality indicators inspected

#### Domain 2 – Impact on people experiencing care, carers and families

Quality indicator	Grade awarded
2.1 - People's experience of care and the involvement of carers and families	✓ Satisfactory

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

5.1 - Safe delivery of care	✓ Satisfactory
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#### Domain 9 – Quality improvement-focused leadership

9.4 - Leadership of improvement and change	✓ Satisfactory
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The grading history for Est-Ethics Wellness Clinic can be found on our website.

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

Further information about the Quality Framework can also be found on our website at:

[https://www.healthcareimprovementscotland.org/our\\_work/governance\\_and\\_assurance/quality\\_of\\_care\\_approach/quality\\_framework.aspx](https://www.healthcareimprovementscotland.org/our_work/governance_and_assurance/quality_of_care_approach/quality_framework.aspx)

We found that the provider still had work to do to address the requirement made at our previous inspection on 25 October 2022. It had taken steps to act on some of the recommendations we had made.

### **What action we expect Est-Ethics Ltd to take after our inspection**

This inspection resulted in one requirement and three recommendations which remain outstanding, and one new requirement and one new recommendation. Requirements are linked to compliance with the National Health Services (Scotland) Act 1978 and regulations or orders made under the Act, or a condition of registration. See Appendix 1 for a full list of the requirements and 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](http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx)

Est-Ethics Ltd, the provider, must address the requirements and make the necessary improvements as a matter of priority.

We would like to thank all staff at Est-Ethics Wellness Clinic for their assistance during the inspection.

## 2 Progress since our last inspection

What the provider had done to meet the requirement and recommendations we made at our last inspection on 25 October 2022

### Outcomes and impact

This section is where we report on how well the service meets people's needs.

#### Domain 2 – Impact on people experiencing care, carers and families

High performing healthcare organisations deliver services that meet the needs and expectations of the people who use them.

#### Our findings

#### Quality indicator 2.1 - People's experience of care and the involvement of carers and families

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##### Recommendation

*The service should develop a participation policy to direct the way it engages with its patients and uses their feedback to drive improvement.*

##### Action taken

Although the service had now developed a participation policy, this did not provide detail on the methods to be used for obtaining patient feedback. During the last inspection in October 2022, the service was advised to use a structured method for obtaining feedback such as a survey with set questions. This would help to evaluate feedback and measure the impact of changes made in the service. The service was still only using informal feedback methods, such as online review platforms. **A new recommendation has been made** (see Appendix 1).

##### Recommendation

*The service should ensure all staff are trained in the principles of duty of candour.*

##### Action taken

Since the last inspection in October 2022, employed staff had now undertaken training in the principles of duty of candour. However, there was no evidence that staff working under a practicing privileges arrangement (staff not employed directly by the provider but given permission to work in the service) had received this training (see Appendix 1).

## 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

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##### Requirement – Timescale: by 20 March 2023

*The provider must ensure that treatment rooms have adequate and suitable ventilation.*

##### Action taken

Since the last inspection in October 2022, an air extraction unit had been installed in the one treatment room that had no source of ventilation. However, this ventilation system was not supplying fresh air into the treatment room. This means the service had installed the wrong type of ventilation equipment. **This requirement is not met** (see Appendix 1).

##### Recommendation

*The service should ensure that all equipment used for patient care is regularly serviced, where appropriate, to ensure it is in good working order.*

##### Action taken

We were provided with evidence that clinic staff now carried out weekly checks on patient care equipment and a routine maintenance service was also carried out by an external contractor.

##### Recommendation

*The service should ensure that appropriate cleaning products are used for the cleaning of all sanitary fittings, including clinical wash hand basins, in line with national guidance.*

##### Action taken

The cleaning product being used was still not suitable for the cleaning of sanitary fittings, including clinical wash hand basins (see Appendix 1).

### **Recommendation**

*The service should develop a programme of regular audits to cover key aspects of care and treatment. Audits must be documented and improvement action plans implemented.*

### **Action taken**

We saw a programme of audits had now been introduced, with audits taking place every 3 months, such as an infection prevention and control audit and a medicine management audit. Any required actions or improvements needed were taken.

## **Our findings**

### **Quality indicator 5.2 - Assessment and management of people experiencing care**

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### **Recommendation**

*The service should ensure that the details of patients' emergency contact and GP are documented in the patient care record.*

### **Action taken**

We noted the electronic patient care record system had been updated since the October 2022 inspection. All required patient information, including patients' GP and emergency contact details, was completed in the three patient care records we reviewed.

However, it was noted there was limited information on the consent form for pre- and post-surgery patient consultations. The service offers a pre-surgical assessment appointment for patients undertaking a surgical procedure in private hospitals outside the UK that the patient has organised themselves. The service also offers post-surgery aftercare for these patients when they return to the UK. More information must be provided to patients to ensure they are able to make fully informed consent and are aware of the risks. Examples of the patient information that must be included are:

- travel medical insurance the patient should have in place
- that treatment in another country is not covered by UK legislation and any UK enforcement body, including Healthcare Improvement Scotland
- the possibility that corrective surgery may be required and any implications of that, including cost, and
- that aftercare should be in place with an independent healthcare provider in the UK. The aftercare provider should have emergency arrangements in



place with a UK independent hospital so patients can be easily and urgently referred if they present to the clinic with complications that require surgical or other complex treatment.

The service must amend its website to make clear that it does not have a partnership with, recommend or endorse any hospital abroad and that it only offers separate packages of pre- and post-surgical care. The website must have detailed information for patients considering surgery abroad including signposting to relevant government websites for further advice. **A new requirement has been made** (see Appendix 1).

### Domain 7 – Workforce management and support

High performing healthcare organisations have a proactive approach to workforce planning and management, and value their people supporting them to deliver safe and high quality care.

### Our findings

#### Quality indicator 7.1 - Staff recruitment, training and development

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##### Recommendation

*The service should retain occupational health records, including immunisation status, for all staff recruited and employed in the service.*

##### Action taken

Occupational health records for the medical and nursing staff working in the service had still not been obtained (see Appendix 1).

## Vision and leadership

This section is where we report on how well the service is led.

### Domain 9 – Quality improvement-focused leadership

High performing healthcare organisations are focused on quality improvement. The leaders and managers in the organisation drive the delivery of high quality, safe, person-centred care by supporting and promoting an open and fair culture of continuous learning and improvement.

### Our findings

#### Quality indicator 9.4 - Leadership of improvement and change

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##### Recommendation

*The service should develop a quality improvement plan to formalise and direct the way it drives and measures improvement.*

##### Action taken

A quality improvement plan had now been developed and was used to document planned improvements in the service. This included improvements being made as a result of patient feedback and outcomes from audits.

## 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 where failure to do so will not directly result in enforcement.

Domain 2 – Impact on people experiencing care, carers and families	
Requirements	
None	
Recommendations	
<b>a</b>	<p>The service should further develop its participation policy to direct the way it engages with its patients and uses their feedback to drive improvement (see page 6).</p> <p>Health and Social Care Standards: My support, my care. I have confidence in the organisation providing my care and support. Statement 4.8</p>
<b>b</b>	<p>The service should ensure all staff are trained in the principles of duty of candour (see page 6).</p> <p>Health and Social Care Standards: My support, my care. I have confidence in the organisation providing my care and support. Statement 4.4</p> <p>This was previously identified as a recommendation in the October 2022 inspection report for Est-Ethics Wellness Clinic.</p>

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

### Requirements

- 1** The provider must ensure that treatment rooms have adequate and suitable ventilation (see page 7).

Timescale – by 11 November 2023

*Regulation 10(2)(c)*

*The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011*

This was previously identified as a requirement in the October 2022 inspection report for Est-Ethics Wellness Clinic.

- 2** The provider must ensure that detailed information is provided about the pre- and post-surgical care service offered to patients considering surgical procedures outside the UK. Information must include the risks of private healthcare abroad and precautions to take (see page 9).

*Regulation 4(1)*

*The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011*

### Recommendation

- c** The service should ensure that appropriate cleaning products are used for the cleaning of all sanitary fittings, including clinical wash hand basins, in line with national guidance (see page 7).

Health and Social Care Standards: My support, my life. I experience a high quality environment if the organisation provides the premises. Statement 5.22

This was previously identified as a recommendation in the October 2022 inspection report for Est-Ethics Wellness Clinic.

Domain 7 – Workforce management and support	
Requirements	
None	
Recommendation	
<b>d</b>	<p>The service should retain occupational health records, including immunisation status, for all staff recruited and employed in the service (see page 9).</p> <p>Health and Social Care Standards: My support, my care. I have confidence in the organisation providing my care and support. Statement 4.24</p> <p>This was previously identified as a recommendation in the October 2022 inspection report for Est-Ethics Wellness Clinic.</p>

## 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](http://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](http://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  
EH12 9EB

**Telephone:** 0131 623 4300

**Email:** [his.ihcregulation@nhs.scot](mailto:his.ihcregulation@nhs.scot)

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