

Announced Focused Inspection Report: Independent Healthcare

Service: The Medical Suite Scotland, Glasgow

Service Provider: Dr Anne Gillespie

10 July 2026

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1 Progress since our last inspection

What the provider had done to meet the requirements we made at our last inspection on 28 October 2025

Requirement

The provider must ensure that its medicines management policy accurately reflects how the service is delivered, including details of all in-person and remote prescribing carried out in the service.

Action taken

The medicines management policy had now been updated to include the process for in-person prescribing. Remote prescribing for online patients was no longer carried out by the service and was therefore not included in the revised policy. **This requirement is met.**

Requirement

The provider must follow national weight management guidance and the following must be clearly documented in the patient care record:

- a) steps taken to confirm the stated weight and body mass index is accurate*
- b) treatment plans, including follow up and monitoring, and*
- c) a record of the information provided to the patient, including dietary, physical and lifestyle advice.*

Action taken

There was no longer any prescribing of weight loss medication carried out by the service. Therefore, **this requirement is no longer applicable.**

What the service had done to meet the recommendation we made at our last inspection on 28 October 2025

Recommendation

The service should ensure systems are in place to support prescribing practitioners to follow the General Medical Council (GMC) high-level principles, good medical practice and good practice guidance for remote prescribing.

Action taken

The service provided evidence that it no longer intended to undertake remote prescribing for online patients. Therefore, **this recommendation is no longer applicable.**

2 A summary of our inspection

Background

Healthcare Improvement Scotland is the regulator of independent healthcare services in Scotland. As a part of this role, we undertake risk-based and intelligence-led inspections of independent healthcare services.

Our focus

The focus of our inspections is to ensure each service is person-centred, safe and well led. We evaluate the service against the National Health Services (Scotland) Act 1978 and regulations or orders made under the Act, its conditions of registration and Healthcare Improvement Scotland's Quality Assurance Framework. We ask questions about the provider's direction, its processes for the implementation and delivery of the service, and its results.

About our inspection

We carried out an announced focused inspection to The Medical Suite Scotland on Friday 10 July 2026. The purpose of the inspection was to make sure the service delivered care safely to patients when prescribing remotely. We reviewed the service's medicines management policy and spoke with the medical practitioner (doctor).

Based in Glasgow, The Medical Suite Scotland is an independent clinic providing non-surgical treatments.

The inspection team was made up of two inspectors.

What we found and inspection grades awarded

For The Medical Suite Scotland, the following grades have been applied.

Implementation and delivery	<i>How well does the service engage with its stakeholders and manage/improve its performance?</i>	
Summary findings		Grade awarded
The medicines management policy now accurately reflected the prescribing arrangements in the service. The service was no longer remote prescribing for online patients or issuing prescriptions for weight loss medication for in-person or remote patients.		✓ Satisfactory
Results	<i>How well has the service demonstrated that it provides safe, person-centred care</i>	
Prescriptions were now only being issued to in-person patients allowing the prescriber to comply with national prescribing guidelines and ensure safe prescribing.		✓ 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:
[Guidance for independent healthcare service providers – Healthcare Improvement Scotland](#)

Further information about the Quality Assurance Framework can also be found on our website at: [The quality assurance system and framework – Healthcare Improvement Scotland](#)

What action we expect Dr Anne Gillespie to take after our inspection

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.
- **Recommendation:** A recommendation is a statement which sets out what a service should do in order to align with relevant standards and guidance.

This inspection resulted in no new requirements or recommendations.

As the purpose of this focused inspection was to make sure the service delivered care safely to patients when prescribing remotely, the following requirement and recommendations from our October 2025 follow-up inspection will be carried over to the next inspection.

Requirement
The provider must ensure that staff employed in the provision of the independent healthcare service receive regular individual performance reviews and appraisals and that these are recorded in the staff files. Revised timescale – immediate <i>Regulation 12(c)(i)</i> <i>The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i> This was previously identified as a requirement in the April 2025 and October 2025 inspection reports for The Medical Suite Scotland.
Recommendations
The service should ensure that staff receive opportunities for learning and development relevant to their role. Health and Social Care Standards: My support, my life. I have confidence in the people who support and care for me. Statement 3.14 This was previously identified as a recommendation in the December 2019, December 2021, April 2025 and October 2025 inspection reports for The Medical Suite Scotland.

Recommendations (continued)

The service should develop appropriate risk assessments to protect patients and staff.

Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.14

This was previously identified as a recommendation in the April 2025 and October 2025 inspection reports for The Medical Suite Scotland.

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

Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19

This was previously identified as a recommendation in the December 2019, December 2021, April 2025 and October 2025 inspection reports for The Medical Suite Scotland.

The service should develop an audit programme to include audits of all patient care records, and the clinic environment and equipment.

Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19

This was previously identified as a recommendation in the December 2019, December 2021, April 2025 and October 2025 inspection reports for The Medical Suite Scotland.

We would like to thank all staff at The Medical Suite Scotland for their assistance during the inspection.

3 What we found during our inspection

Key Focus Area: Implementation and delivery

Domain 3: Co-design, co-production	Domain 4: Quality improvement	Domain 5: Planning for quality
<i>How well does the service engage with its stakeholders and manage/improve its performance?</i>		

Our findings

The medicines management policy now accurately reflected the prescribing arrangements in the service. The service was no longer remote prescribing for online patients or issuing prescriptions for weight loss medication for in-person or remote patients.

Quality improvement

At previous inspections of the service in April 2025 and October 2025, we saw that the service's medicines management policy did not reflect the in-person and remote prescribing practices of the service. During this inspection, we saw that the policy had now been updated to include prescribing arrangements for in-person patients.

The policy included:

- methods of prescribing
- confirmation that controlled drugs were not prescribed by the service (medications that require to be controlled more strictly, such as some types of painkillers)
- who was authorised to prescribe, their professional registration, indemnity (insurance), and requirement to work within their competence
- how patients were assessed before prescribing, including identity checks, relevant medical history, allergies, current medication, contraindications (when a specific condition or factor [such as age, body mass index or another illness] makes a particular treatment, medication or procedure inadvisable as it could cause harm or possible complications for the patient) and consent to treatment
- what should be documented in the patient care record
- consent for sharing of information with, and details of, the patient's primary healthcare provider, and
- prescribing and patient care record audits.

Following discussions between Healthcare Improvement Scotland and the provider, the service had taken the decision, and provided evidence, that it no longer intended to prescribe remote prescriptions through the remote online prescribing service. Therefore, the medicines management policy did not include prescribing arrangements for remote patients.

- No requirements.
- No recommendations.

Key Focus Area: Results

Domain 6: Relationships	Domain 7: Quality control
<i>How well has the service demonstrated that it provides safe, person-centred care?</i>	

Our findings

Prescriptions were now only being issued to in-person patients allowing the prescriber to comply with national prescribing guidelines and ensure safe prescribing.

At previous inspections of the service in April 2025 and October 2025, we saw that the service was prescribing medicines, including weight loss medication, to remote patients through a remote online prescribing service. This allows patients to be prescribed medicines without a face-to-face appointment with a doctor.

We identified that the doctor (prescriber) in the service did not have access to relevant information about patients to allow them to comply with national weight management guidance or the General Medical Council (GMC) high-level principles, good medical practice and good practice guidance for remote prescribing. This meant that the doctor could not be assured that the appropriate verification, monitoring and support was in place for each patient they were prescribing for.

This practice was discussed at length during the inspection, including the risks of prescribing without access to a more complete history of the patient and the regulatory implications if these risks were not addressed. Following the inspection, we were provided with written confirmation that the service had decided to no longer prescribe remote prescriptions through the remote online prescribing service. Prescriptions were now only written for in-person patients who were registered at the service. We were told that weight loss medication was also not prescribed to the service's in-person patients.

- No requirements.
- No recommendations.

Appendix 1 – About our inspections

Our quality of care approach and the quality assurance 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:

[The quality assurance system and framework – Healthcare Improvement Scotland](#)

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

Email: his.ihtregulation@nhs.scot

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