

Review of compliance

DHI International UK Limited DHI International UK Limited	
Region:	London
Location address:	43 New Cavendish Street London W1G 9TH
Type of service:	Doctors treatment service Diagnostic and/or screening service Acute services without overnight beds / listed acute services with or without overnight beds
Date of Publication:	January 2012
Overview of the service:	DHI International UK Limited is private hair restoration clinic located within the vicinity of Harley Street. The Clinic offers consultation and treatment for hair loss to people aged 18 and above. It is registered to undertake the following regulated activities; Diagnostic and

	screening, surgical procedures and treatment for diseases, disorder or injury.
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

DHI International UK Limited was meeting all the essential standards of quality and safety.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 5 December 2011, checked the provider's records, talked to staff and talked to people who use services.

What people told us

People who use the services told us they were involved in decisions about their treatment, care and support and that their privacy and dignity was respected. Relatives commented on how good the care was. People told us they were happy with the care and support they received. Information leaflets and patients' guides are available and given to people to enable them make informed decisions about their care and treatment. Individual records are kept for each patient which shows that patients experience safe and appropriate care.

People commented that they received quality care, treatment and support from friendly and competent staff and they felt safe receiving treatment. These comments were supported by the documented entries in the comment book kept at the clinic, we saw various compliments written in the book by people saying how excellent their treatment and care was and felt that their privacy and dignity were maintained. People who use the service told us that they were in personal contact with the staff and clinic manager frequently to identify that they were satisfied with the service and staff delivering it.

What we found about the standards we reviewed and how well DHI International UK Limited was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

Patients using the service are informed about all aspects of their treatment and care. Their privacy and dignity is respected and maintained. Overall we found that DHI International UK Limited was meeting this essential standard.

Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

Patients who use the service experience safe and appropriate care, treatment and support that meet their needs and protect their rights. Overall we found that DHI International UK Limited was meeting this essential standard.

Outcome 07: People should be protected from abuse and staff should respect their human rights

We found people who use services generally experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights. Overall we found that DHI International UK Limited was meeting this essential standard.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Patients who use the service are safe and their health and welfare needs are met by competent staff. Overall we found that DHI International UK Limited was meeting this essential standard.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

We found effective systems were in place to assess and monitor the quality of service provision so that people who use services will benefit from safe quality care, treatment and support. Overall we found that DHI International UK Limited was meeting this essential standard.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

In relation to this outcome the patient told us they had found their privacy and dignity respected at all times. The patient also told us that they had received all the information they needed to make informed decision about the procedure and said the doctor went through everything with them. Information leaflets and patient guides are available and given to people to enable them make an informed decisions about their care and treatment.

Other evidence

There is a patient guide which is given to all patients on the day of their appointment. The patients guide is comprehensive and describes the types of services offered, the appointment system, confidentiality, consent and how to make complaints or give compliments. Patients have their consultations in private and we witnessed staff having conversations with patients in a respectful manner.

We found patient views were sought through a patient satisfaction questionnaire and through seeking patient views at clinic during consultations. We have no information that suggests there are areas of non compliance with this outcome.

Patients were involved in their care from the initial consultation and are encouraged to

contact the clinic at any time should they have questions. Staff members explained patients regularly contact the clinic and we saw how these contacts are recorded. We talked to the clinic manager who explained how they had introduced an additional approach which demonstrated how they supported and respected each patient.

In addition to the standard admission notification letter the clinic manager also includes a personalised 'thinking of you card' which included positive messages along with a reminder of the first follow up appointment following their procedure, which were signed by the clinic manager / medical director. We were told how the card had resulted in positive appreciation from patients.

Our judgement

Patients using the service are informed about all aspects of their treatment and care. Their privacy and dignity is respected and maintained. Overall we found that DHI International UK Limited was meeting this essential standard.

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Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

On the inspection visit conducted 15 November 2011 we were able to talk to one patient who was attending for a post operative appointment with the clinic nurse. The patient explained how they had felt fully informed throughout their patient journey, for example, they had an information pack along with being fully informed about the procedure by the doctor. The patient explained how they had been able to ring the clinic a few times for advice and support.

In relation to general care at the clinic, the people who use the service at the clinic said their experience had been wonderful and felt all the staff at the clinic were good in their respective roles.

We reviewed a number of recently completed patient questionnaires and some comments recorded included in the comments book were as follows:

"excellent service";

"very happy with everything";

"from start to finish the staff were very supportive and informative";

"I was very pleased with the way I was treated";

"I felt I was in good hands throughout and after care very good";

"quick response to my request for information".

Thank you cards recently received by the clinic stated;

"Thank you to each and everyone of you from the moment I walked into your clinic you gave me the warmest of welcomes...You have made my journey into my new self so

lovely and I cant thank you enough";
"Thank you for being so kind and helpful during my session";
"Thanks for all your help and support".

Other evidence

DHI International UK limited have demonstrated that they have systems in place to ensure they make reasonable adjustments to reflect people's needs, values and diversity. The provider has a range of policies and procedures related to care and welfare and we found these had been reviewed by the provider within reasonable timescales. Some of the provider policies were supported by local procedures. We reviewed a sample of five patient records. We found these pre and post operative care records to contain detailed assessments and were appropriately completed.

All staff are trained to recognise if people accessing the services are in need of immediate medical assistance and are assisted to the appropriate service if necessary. Resuscitation equipment is available and staff have been trained in basis life support. There is a policy for dealing with emergencies in place.

During the inspection visit a patient allowed us to sit through their follow up appointment with the medical director so we could observe care and interaction. We found the medical director used a professional approach whilst ensuring a friendly and relaxing environment. The patient was treated with dignity, respect and their values were respected by the doctor. Any questions the patient asked were answered and along with appropriate verbal support and re-assurance. The consultation room was private with the door closed without interruption with window blinds closed. The medical director ensured the patient a clear awareness of all forthcoming appointments and procedures.

Our judgement

Patients who use the service experience safe and appropriate care, treatment and support that meet their needs and protect their rights. Overall we found that DHI International UK Limited was meeting this essential standard.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

We were unable to speak to people who use the service about this outcome on this occasion.

Other evidence

The risk of people using the service being abused is low, because they are adults and capable of disclosing any incidents of abuse. We saw that appropriate checks are made on staff suitability before they start work at the clinic. There is a safeguarding policy in place. The safeguarding policy includes information of the local authority safeguarding team, who the safeguarding professionals are, and their contact details.

On our inspection visit we found the clinic had separate policies and procedures for child and adult protection. We talked to staff members who told us how they would report any identified concern. Staff spoken with stated that there have been no safeguarding incidents to report.

Our judgement

We found people who use services generally experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights. Overall we found that DHI International UK Limited was meeting this essential standard.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

The people we spoke with told us that the staff were professional and knowledgeable. Feedback from the clinic's patient surveys indicated that the majority of people felt the staff there were friendly, non judgemental and supportive.

Other evidence

There are four full time nurses in addition to medical staff at the clinic. Staff have undertaken specific training to carry out their role. Medical Director is in charge of the clinic and all procedures undertaken at the clinic. Nurses receive group supervision from medical staff and individual supervision from a contracted company. Regular teaching sessions on clinical subjects are conducted by medical staff. Continuous professional development meetings are regularly attended by all the staff at the clinic. The medical director holds regular meetings with the staff. The clinic has a small staff team who work closely with each other. Those we spoke with told us that they felt supported.

The clinic has an appraisal process set out within their human resources policy and all staff members explained how they valued this process. All members of staff have received appraisals and were aware of when their next appraisal was due. The clinic manager also ensures regular monthly supervision sessions which are referred to as 'one2one' sessions which were recorded. We were able to confirm completion of appraisals and 'one2one' sessions by viewing several completed examples.

The clinic manager told us that all staff undertook an induction into the clinic's procedures and their ways of working. The clinic has an operation manual for staff to

ensure that staff put people who use the service first and give them the support they need. All staff have received training in customer care. The medical director told us that new doctors sat in on consultations with experienced doctors so that they could learn from them.

The clinical staff qualifications and registration are regularly checked and recorded to make sure they are fit to practice.

Our judgement

Patients who use the service are safe and their health and welfare needs are met by competent staff. Overall we found that DHI International UK Limited was meeting this essential standard.

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Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

The people we spoke with told us that they were given opportunities to discuss their treatment when they wanted. They told us that they had taken part in quality satisfaction surveys and felt listened to.

People who use the service are given a copy of the complaints procedure and this is displayed in the clinic. Each person is assigned a patient care consultant who they can contact if they are unhappy about anything at the clinic.

Other evidence

We saw evidence that clinical audit meetings are held, the last meeting was held in October 2011. Patient notes were audited on a monthly basis, records reviewed shows that they were all satisfactory. Staff at the clinic participated in audit interviews in November 2011. The clinic manager explained other types of audit conducted including medicines management audits, complaints audits, adverse incidents audits, hand hygiene audits along with wound infection audits. The clinic had collated various audit reports, for example, we reviewed an infection control audit (August 2011) which included analysis and trends. It was also explained how the clinic monitors key performance indicators for surgeons, their performance and success rate.

All staff commented that a high quality service is offered to patients. Patient Satisfaction surveys are done monthly and reported on a yearly basis, there was evidence to show that the results of the patient satisfaction survey are used to inform service development.

The clinic manager showed us evidence that they had risk assessed the environment and carried out regular checks on safety. There is a qualified first aider and doctors on site during opening hours. The safety of the environment and equipment is regularly monitored. A fire risk assessment of the environment was carried out in July 2011. Medical equipment is tested annually by a private company.

The clinic manager has used quality monitoring tools to assess the clinic's compliance with the essential outcomes of quality and safety which they are legally required to meet. He shared some of these with us. We saw evidence that the service is committed to reviewing and improving their services.

The clinic manager explained how they conduct an annual clinical governance assessment, which covers a range of areas based on CQC outcomes. We received a copy of this report in September 2011. It was also explained by the clinic manager that regular visits were made to the clinic by one of their Global Medical Director's to ensure ongoing quality monitoring of the clinic and its performance.

Our judgement

We found effective systems were in place to assess and monitor the quality of service provision so that people who use services will benefit from safe quality care, treatment and support. Overall we found that DHI International UK Limited was meeting this essential standard.

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What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

Document purpose	Review of compliance report
Author	Care Quality Commission
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