

Inspection Summary Report

Infiniti Healthcare, Cardiff

Inspection date: 13 October 2022

Publication date: 13 January 2023



This summary document provides an overview of the outcome of the inspection



The clinic had suitable arrangements in place to provide safe and effective care to patients. Patient feedback about their experiences of attending the clinic was very positive.

We found staff at Infiniti Healthcare placed an emphasis on promoting the privacy and dignity of patients and on protecting their rights when visiting the clinic.

The clinical records were well organised and easy to understand. They were clear, accurate and legible. However, the fire arrangements at the clinic could be improved.

Effective governance arrangements were described and demonstrated. However, not all staff had completed all the mandatory training required.

Appropriate arrangements are now in place to deal with medical emergencies such as a cardiopulmonary event or other life-threatening emergencies.

Note the inspection findings relate to the point in time that the inspection was undertaken.



What we did

Full details on how we inspect the NHS and regulate independent healthcare providers in Wales can be found on our [website](#).

Healthcare Inspectorate Wales (HIW) completed an announced inspection of Infiniti Healthcare on 13 October 2022.

Our team for the inspection comprised of two HIW Healthcare Inspectors and a clinical peer reviewer. The team was led by a HIW Healthcare Inspector.

This summary version of the report is designed for members of the public.

A full report, which is designed for the setting, and describes all findings relating to the provision of high quality, safe and reliable care that is centred on individual patients can be found on our [website](#).





Quality of Patient Experience

Overall Summary

Infiniti Healthcare was committed to providing treatments to patients in an environment that was conducive to providing a high-quality service. Staff placed an emphasis on promoting the privacy and dignity of patients and on protecting patients' rights when visiting the clinic. The environment also promoted the patients' privacy and dignity.

The registered manager and consultants ensured patients were provided with detailed information pre and post treatment so they could make informed decisions about their treatment.

Senior staff were dedicated to ensuring patients received a quality experience and this was reflected in the patient feedback; with almost all patients rating the service they received as 'very good'.

There were good processes in place to enable patients to provide their views on the care they had received at the hospital.

What we found this service did well

- Treated patients with dignity and respect
- Providing patients with information about the care and treatment provided, including aftercare.

Where the service could improve

- Provide more health promotion information on how patients can maintain their general health.

Patients told us:

"Very happy with the care. Doctor was amazing and put my mind at ease."

"I was very satisfied with the care I received"

"Staff friendly and approachable and put at ease".

Delivery of Safe and Effective Care



Overall Summary

The clinic environment was well maintained and free from obvious hazards, it was also warm and welcoming. The general ambience in the waiting room was of a high standard and thought had been put into the layout.

All patients said that the clinic was clean and that COVID-19 infection control measures were being followed where appropriate.

The clinic had the right equipment and medical devices to meet the needs of patients. The equipment was maintained in a timely manner.

The clinical records were well organised and easy to understand. They were clear, accurate and legible. An electronic record system was used at the clinic and the records management system allowed for authorised staff to view records.

Non-compliance notices:

- The clinic did not have appropriate arrangements to deal with medical emergencies such as a cardiopulmonary event or other life-threatening emergencies
- The clinic had not maintained appropriate standards of fire precautions by not documenting fire drills and suitability of fire equipment including fire alarms and fire escape lighting. A fire risk assessment had not taken place as required in 2022.

What we found this service did well

- Having a welcoming environment for patients
- Maintaining a clean environment to minimise the risk of healthcare acquired infections.

Where the service could improve

- Ensure that the offer of chaperones is recorded on patient records
- Provide a range of clinical audits.



Quality of Management and Leadership

Overall Summary

We found the registered manager was patient focused and had appropriate skills and knowledge to deliver safe treatments to patients.

The clinic had a range of policies and procedures in place which were being reviewed and updated regularly.

The human resources (HR) system used, enabled staff to record training records, manage staff and ensure appropriate policies and procedures were stored.

What we found this service did well

- Having strong governance arrangements in place
- Following the correct processes for staff recruitment
- Providing staff with up-to-date policies and procedures to follow.

Where the service could improve

- Ensure that all staff are appropriately trained in relevant mandatory training
- Ensure that arrangements are in place for staff to report changes to circumstances that would affect their DBS status.

Next steps

Where we have identified improvements and immediate concerns during our inspection which require the service to take action, these are detailed in the appendices of the full inspection report.

When we identify concerns that pose an immediate risk to patient safety we ask the service to undertake urgent action. These concerns are outlined in the appendices and outline the action taken by the service to protect patient safety and approved by us. We also provide a detailed table of improvements identified during the inspection where we require the service to tell us about the actions they are taking to address these areas and improve the quality and safety of healthcare services. In addition, we outline concerns raised and acknowledge those resolved during the inspection.

At the appropriate time HIW asks the services to confirm action has been taken in line with management responses documented in the improvement plan. We also ask services to provide documented evidence of action taken and/or progress made.

