OQIC
h(W)Arolygiaeth Gofal Iechyd CymruHealthcare Inspectorate Wales

Inspection Summary Report

Albany Medical Centre, Newport Inspection date: 6 September 2023 Publication date: 7 December 2023



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



We found that the registered manager and staff at the clinic worked to provide a positive experience for patients to receive weight loss treatments.

There were clear lines of reporting and accountability in place and governance arrangements described and demonstrated were effective.

Staffing levels and skill mix were found to be appropriate to maintain patient safety within the clinic at the time of the inspection.

Overall, we found evidence that the service provided safe and effective care. Patients were seen in a timely manner and kept informed of any delays.

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 <u>website</u>.

Healthcare Inspectorate Wales (HIW) completed an announced inspection at Albany Medical Centre on 6 September 2023.

Our team, for the inspection comprised of two HIW Healthcare Inspectors and one Clinical Peer Reviewer.

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 <u>website</u>.



Quality of Patient Experience



Overall Summary

Feedback from patients who completed a HIW questionnaire showed they were very satisfied with the service they had received at the clinic.

From our observations during the inspection, staff treated patients with dignity and respect. We saw arrangements were in place to promote and protect patients' privacy and dignity. Arrangements were also in place for patients to provide their views on the services provided at the clinic and the results of those reviews were displayed.

Patients were seen in a timely manner and would be informed if there was a delay.

What we found this service did well

- Displaying information on how patients could help their health and wellbeing
- Patient feedback was positive.

Patients told us:

Patients provided us with the following comments:

"Very informed on procedure and during the procedure. Excellent after service has really impressed."

Delivery of Safe and Effective Care



Overall Summary

The clinic had suitable arrangements in place to provide safe and effective care to patients. These arrangements were supplemented by a range of up to date and relevant written policies and procedures.

There were generally good medication management processes in place and effective processes for checking the equipment used.

Evidence of available infection prevention and control and safeguarding arrangements at the clinic.

Some issues were identified during the inspection that were highlighted to management. These included additional entries on patients' medical records and receipt of goods by a clinician.

Where the service could improve

- Information supplied to patients about the medication provided
- Recording additional information about the patient medical records
- Informing patients in advance on the restrictions at the clinic for patients with mobility issues

What we found this service did well

- Having a no contact blood pressure cuff
- Safeguarding and IPC arrangements to ensure safety of the patients
- Maintenance of equipment

Quality of Management and Leadership



Overall Summary

Overall, we found that there were clear lines of reporting and accountability in place and governance arrangements described and demonstrated were effective.

Staff were clear and confident in their ability to deal with any concerns.

Mandatory training, appraisals and recruitment arrangements at the clinic were good and ensured that the relevant staff were employed and developed.

All policies and procedures viewed were up to date, with a review date and who was responsible for the review.

There were areas that required improvement in relation to the statement of purpose and patient guide.

Where the service could improve

- Reviewing the statement of purpose annually
- Including the relevant sections with information in the patient guide.

What we found this service did well

- All mandatory training and appraisals up to date
- In date policies and procedures
- Recruitment policies were followed when recruiting staff.

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 service 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.

