

# Inspection report

## Spire Murrayfield Hospital Independent Health Care Service

122 Corstorphine Road  
Edinburgh EH12 6UD

**Inspected by:** Carol Moss  
**(Care Commission Officer)**

**Type of inspection:** Unannounced

**Inspection completed on:** 25 March 2009

**Service Number**

CS2003010681

**Service name**

Spire Murrayfield Hospital

**Service address**122 Corstorphine Road  
Edinburgh EH12 6UD**Provider Number**

SP2003002480

**Provider Name**

Spire Healthcare Ltd.

**Inspected By**Carol Moss  
Care Commission Officer**Inspection Type**

Unannounced

**Inspection Completed**

25 March 2009

**Period since last inspection**

1 month

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## **Introduction**

The Spire Murrayfield Hospital is situated close to Corstorphine, west of Edinburgh, on the A8. It is conveniently placed for road and rail links. The hospital is set in well kept grounds with its own parking.

The service is part of the UK wide private healthcare group Spire Healthcare.

The service offers a wide range of out-patient and medical/surgical in-patient services. The service consists of a main hospital building with further out-patient services offered on site at Beechwood House.

The hospital has 70 registered beds. The service has been registered with the Care Commission since 1 April 2002.

Spire Healthcare's philosophy of care includes:

"High quality service you'll appreciate

At Spire Healthcare our reputation is built on our ability to provide the service you want and need, resulting in excellent medical treatment you can rely on and personal care you'll appreciate. Our patients can be confident that their rights will be recognised and respected by all staff involved in their care regardless of their age, disability, race, religion, gender or sexual orientation."

Based on the findings of this inspection the service has been awarded the following grades:

Quality of Information - 4 - Good

Quality of Care and Support - 5 - Very Good

Quality of Staffing - 5 - Very Good

This inspection report and grades represent the Care Commission's assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. Please refer to the care services register on the Care Commission's website ([www.carecommission.com](http://www.carecommission.com)) for the most up-to-date grades for this service.

## **Basis of Report**

The report was written following an unannounced inspection visit carried out on the morning of 25 March 2009.

Before the Inspection

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Assessment Form

The service submitted a self-assessment form as requested by the Care Commission prior to its announced inspection visit. A further self assessment was not required for this inspection.

#### Views of service users

As this was an unannounced inspection visit, no Care Commission Care Standards questionnaires were sent out to service users or carers.

#### Regulation Support Assessment

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

#### During the inspection process

##### Staff at inspection

CCO Carol Moss carried out the inspection visit.

#### Evidence

During the visit the CCO met with a range of staff including the Head of Clinical Services, HR and Training Coordinator, Business Development Manager and the Nursing Services Manager

Evidence was gathered from a number of sources including:

Discussion with the above members of staff

Staff recruitment files

Recruitment procedures

Staff/consultant suggestions cards

Information relating to terms and conditions and pricing

A visit to the outpatients department

#### Inspection Focus Areas and links to Quality Themes and Statements for 2008/09

This inspection focused on the recommendations and areas for development made at the last inspection visit. Therefore, this report should be read in conjunction with the report for the announced inspection visit completed on the 27 February 2009.

Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at:

<http://www.carecommission.com/>

#### Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your

responsibilities is available at [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw)

### **Action taken on requirements since last Inspection**

There were no requirements made at the last inspection visit which was completed on the 27 February 2009. The two recommendations made are reported on under the relevant Quality Statement.

### **Comments on Self Assessment**

A completed self assessment document was submitted prior to the service's announced inspection visit. A further self assessment was not required for this inspection.

### **View of Service Users**

Two individuals that had used the service were spoken to by telephone prior to this inspection visit. Both felt able to contact the service/management of the service to discuss their care.

### **View of Carers**

No carers were spoken with during this inspection visit.

## **Quality Theme 0: Quality of Information**

**Overall CCO Theme Grading: 4 - Good**

**Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the information provided by the service.**

### **Service Strengths**

The CCO followed up on areas for development identified at the last inspection visit.

At the previous inspection visit, the service had informed the CCO of their intention to improve the pricing information so that it would be clearer to understand. The revised information had been developed. The Business Development Manager informed the CCO of training that staff had received in using this documentation. A member of staff that dealt with telephone enquires demonstrated that they were familiar with the revised information. Copies of the information were seen available in both standard and large print. The information could also be accessed from the service's website.

### **Areas for Development**

Due to this inspection being carried out so soon after the previous visit, the service did not have time to take forward the area for development identified at the last inspection under this Quality Statement. This was to consider including questionnaires for individuals who had attended out-patients only as part of their yearly satisfaction survey. This will be followed up at future visits.

### **CCO Grading**

5 - Very Good

### **Number of Requirements**

0

### **Number of Recommendations**

0

**Statement 3: We ensure our consent to care and treatment practice reflects Best Practice Statements (BPS) and current legislation (where appropriate Scottish legislation)**

### **Service Strengths**

The recommendation made at the previous inspection under this Quality Statement was followed up. This was to review and update the service's present consent form to reflect good practice guidance.

### **Areas for Development**

It was acknowledged that there had been limited time since the last inspection to address

this recommendation. However, initial planning was seen to have been implemented with this item added to the Medical Advisory Committee Agenda to be discussed at their meeting on 20 April 2009. This recommendation is carried forward. See recommendation 1.

**CCO Grading**

3 - Adequate

**Number of Requirements**

0

**Number of Recommendations**

1

## **Quality Theme 1: Quality of Care and Support**

**Overall CCO Theme Grading: 5 - Very Good**

**Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.**

### **Service Strengths**

The area for development identified by the service and other recent developments following service user and carer feedback were followed up.

Recent developments following patient feedback included changes to the presentation of food and providing overnight accommodation for patients pre-operatively at a hotel rate.

The service continued to ensure that patients and relatives/carers were able to park close to the hospital and outpatients by providing separate staff parking areas. The results of this were seen by the CCO and had been confirmed by relatives spoken with at previous visits as extremely helpful.

The use of staff suggestions cards had been implemented.

### **Areas for Development**

At the previous inspection the service were planning to introduce in-patient questionnaires for all in-patients. The questionnaires had been developed and the CCO was informed that printing of these was being undertaken and it was planned that these would be introduced in approximately six weeks time.

The CCO identified no additional areas for development during this inspection.

### **CCO Grading**

5 - Very Good

### **Number of Requirements**

0

### **Number of Recommendations**

0

**Statement 2: We ensure that the care, support and treatment received by service users across all aspects of our service provision, is supported by evidence based practice and up to date policies and procedures. These reflect current legislation (where appropriate Scottish legislation).**

### **Service Strengths**

The recommendation made at the previous inspection under this Quality Statement was followed up. This was that the service reviews its 'Infection Prevention and Annual Plan' to

ensure that it achieves compliance with NHS QIS Healthcare Associated Infection Standards.

### **Areas for Development**

It was acknowledged that there had been limited time since the last inspection to address this recommendation.

The Head of Clinical Services informed the CCO that this was being taken to their national infection control lead for advice on how they could meet Scottish recommendations. This recommendation is carried forward. See recommendation 2.

### **CCO Grading**

5 - Very Good

### **Number of Requirements**

0

### **Number of Recommendations**

1

**Quality Theme 2: Quality of Environment**

**Overall CCO Theme Grading: 0 - Not Assessed**

### **Quality Theme 3: Quality of Staffing**

**Overall CCO Theme Grading: 5 - Very Good**

**Statement 2: We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.**

#### **Service Strengths**

Not all aspects of this Quality Statement were examined. The CCO reviewed recruitment procedures.

Recruitment had previously been managed centrally. This was now managed locally. The recruitment records of two recently appointed staff were reviewed. A checklist was used to ensure that all aspects of safe recruitment were completed prior to commencing employment. Documentation within the recruitment records evidenced that Spire Healthcare's safe recruitment procedures were followed.

#### **Areas for Development**

The 'Healthcare Clearance for TB, Hepatitis B, Hepatitis C and HIV for New Healthcare Workers with Direct contact with Patients' guidance was discussed with the Head of Clinical Services.

#### **CCO Grading**

5 - Very Good

#### **Number of Requirements**

0

#### **Number of Recommendations**

0

**Quality Theme 4: Quality of Management and Leadership**

**Overall CCO Theme Grading: 0 - Not Assessed**

**Regulations / Principles**

**National Care Standards**

**Enforcement**

There has been no enforcement action against this service since the last inspection.

**Other Information**

No other issues were identified at this inspection visit.

**Requirements**

There were no requirements made at this inspection visit.

**Recommendations**

1. The service should review and update its present consent form to reflect current good practice guidance. This takes account of National Care Standards, independent hospitals, Standard 11 - Deciding on your treatment.
2. It is recommended that the service reviews its 'Infection Prevention and Annual Plan' to ensure that it achieves compliance with HAI Standards. This takes account of National Care Standards, independent hospitals, Standard 13 - Prevention of infection.

**Carol Moss**

**Care Commission Officer**