

Inspection Summary Report

The Weight Loss Doctor, Swansea

Inspection date: 20 July 2023

Publication date: 20 October 2023



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

Digital ISBN 978-1-83504-977-8
© Crown copyright 2023



There was clear evidence that staff at the clinic were passionate in providing a weight loss service to their patients in an environment that promoted a quality service.

Patients provided positive feedback about their experiences of using the services provided at the clinic.

The clinic was in a good state of repair, both internally and externally and was fit for purpose for all aspects of the treatments being provided.

Patient records were clear, legible and up to date but the setting needed a height measuring device and the scales had not been calibrated.

A clear governance structure with good management and leadership at the clinic was in place. Staff commented positively on the support that they received from the registered manager.

There was an appropriate number of staff employed at the clinic and the skill mix of staff was appropriate to meet patients' needs.



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 The Weight Loss Doctor, Swansea on 20 July 2023.

Our team for the inspection comprised of one HIW Senior Healthcare Inspector and a 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 [website](#).



Quality of Patient Experience



Overall Summary

Staff at the clinic were clearly passionate in their desire to provide a weight loss service to their patients in an environment that promoted a quality service. Treatment rooms were clean and tidy.

Patients provided positive feedback about their experiences of using services provided at the clinic.

The clinic ensured easy access to patients with mobility issues, although the bathroom facilities were not suitable for patients with mobility access requirements.

Staff at the clinic were committed to gaining feedback from patients. Whilst the feedback was analysed the results of the feedback were not publicised to the patients at the clinic.

Where the service could improve

- Provide information on health promotion
- Inform patients about the lack of access to disabled toilets
- Inform patients of the results of feedback.

What we found this service did well

- Provided a service where the patient feedback was positive
- Ensured patient care was the clinics top priority
- Treatment rooms were clean and tidy.

Patients told us:

“Very helpful staff, doctor explained treatment well, very nice and feel at ease coming to this clinic.”

“Excellent service, staff and care. Very helpful and informative doctor who is always available if needed. Would recommend.”

Delivery of Safe and Effective Care



Overall Summary

There were appropriate arrangements in place for emergency care with easy access to a fully stocked resuscitation equipment, which had been checked on a weekly basis.

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

It was evident that the clinic was in a good state of repair, both internally and externally and was fit for purpose for all aspects of the treatments being provided.

We saw that patient records were clear, legible and up to date but the setting needed a height measuring device and the scales had not been calibrated.

Where the service could improve

- Providing the correct equipment to ensure accurate measurements could be taken
- Collect qualitative information on weight loss.

What we found this service did well

- Appropriate arrangements for emergency care
- Good medication management processes
- Ensured the clinic was in a good state of repair.



Quality of Management and Leadership

Overall Summary

There was clear, good management and leadership at the clinic with staff commenting positively on the support that they received from the registered manager. We were told that there was an open and supportive culture at the clinic with a clear management structure within the organisation.

The clinic had a number of policies and procedure in place that were all in date. However, the procedures required a date due review and who was responsible for reviewing the policies and procedures.

We were told that any complaints would be dealt with promptly by the registered manager. There had not been any complaints at the clinic. Staff we spoke with were aware of the process to follow.

It was clear from our findings there was an appropriate number of staff employed at the clinic and the skill mix of staff was appropriate to meet patients' needs.

Workforce recruitment practices and procedures were being followed in line with regulations and standards.

Where the service could improve

- Review and update the statement of purpose and patient guide
- Ensure all policies and procedures have a date due review and person responsible.

What we found this service did well

- Clear management structure
- Staffing the clinic appropriately
- Following good recruitment practices.

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.

