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Robert Forman  
Centre For Reproductive Medicine  
Park Lorne, 111 Park Road  
London  
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3rd April 2008

**CARE STANDARDS ACT 2000 AS AMENDED BY THE HEALTH AND SOCIAL CARE  
ACT 2003 – STATUTORY INSPECTION – CENTRE FOR REPRODUCTIVE MEDICINE –  
PARK LORNE, 111 PARK ROAD, LONDON, NW8 7JL**

Dear Mr. Forman

Following the receipt of self-assessment documentation, and subsequent analysis of the information provided therein, I am pleased to inform you that a statutory inspection of Centre For Reproductive Medicine will not currently be required during the 2008/9 fiscal year.

Please note that if during the subsequent year the Commission is informed of other matters of concern, it may be necessary to reconsider whether an inspection visit, either announced or unannounced, is required.

The Healthcare Commission will publish a statement concerning the risk assessment process this year with regards to your establishment, on our web site. This will inform the public of our conclusions regarding compliance with regulations and standards at Centre For Reproductive Medicine. We enclose a copy of this statement for your information.

If you would like to discuss the above or require any further information please do not hesitate to contact me.

Yours sincerely

A handwritten signature in blue ink, appearing to be "CW".

Susan Walker  
Lead Assessor

Handwritten initials "PP" in blue ink.

## Regulatory Assessment Statement 2007/2008

**Centre for Reproductive Medicine**  
Park Lorne  
111 Park Road  
London  
NW8 7JL

### Introduction

The Care Standards Act 2000 sets out those Independent healthcare providers in England that must be registered with the Healthcare Commission. To register, they need to demonstrate compliance with the Care Standards Act 2000 and associated regulations. The Healthcare Commission tests providers' compliance by assessing each registered establishment against a set of *National Minimum Standards*, which were published by the Government and set out the minimum standards for different types of independent health services.

### Background

The Centre for Reproductive Medicine is registered with the Healthcare Commission to provide in vitro fertilisation (IVF). The centre is also registered with the Human Fertilisation and Embryology Authority (HEFA). The centre provides all aspects of infertility diagnosis, treatment and laboratory services. The centre is situated near Regents Park in Central London.

### Registration Categories

This registration is granted within the following categories only

Description	Service Category
Prescribed techniques or prescribed technology: establishments providing in vitro fertilisation	Independent Hospital

### Conditions of registration

This registration is subject to the following conditions. Each condition is inspected for compliance. The judgement is described as Compliant, Insufficient Assurance, Not Met or Not Inspected.

Condition of Registration:
Treatment is for persons aged 18 years and over only.

### Assessments

The Healthcare Commission only carries out on site inspections to make assessments of standards where we do not have sufficient evidence that the required level of performance is being achieved. The Healthcare Commission is required to inspect establishments at least

once every five years and this report reflects the assessment of the establishment or agency at a given point in time.

This establishment has been assessed as not needing an inspection during the period 1 April 2007 to 31 March 2008.

We have reviewed a range of information during the year, including the last inspection report and other information we have received from and about the establishment. From this information we did not identify any risks to suggest that the provider was not meeting the National Minimum Standards, consequently there is no need for the establishment to be further checked through an inspection. The establishment will continue to provide further information to us during this period so that we can continue to be assured that there are no identified risks to their compliance with the National Minimum Standards. If at any time we are not assured that the National Minimum Standards are met, we may decide to carry out an inspection of the establishment to check their compliance.

Below are examples of the information we have reviewed in arriving at our decision not to inspect this establishment in 07/08.

Where the Healthcare Commission has carried out on-site inspections, these are available on our web site. This service was last subject to an on-site inspection on 12 December 2005.

Information reviewed	What this tells us
<p><b>Self-Assessment</b></p>	<p><input checked="" type="checkbox"/> The first stage in the annual assessment process is for registered providers to complete a comprehensive self-assessment against all the National Minimum Standards that relate to their service. We ask providers to describe what systems and evidence they have to assure themselves they are complying with these. We look at their responses and judge whether we feel confident that the systems and evidence they have is sufficient to demonstrate compliance. Where we find gaps we may ask the provider to submit more evidence to us, where no such evidence can be provided we may undertake an inspection to check for ourselves.</p>
<p><b>Previous year's report</b></p>	<p><input type="checkbox"/> Not applicable as no previous report</p> <p><input checked="" type="checkbox"/> We look back to the assessment process for last year. Where issues were identified with the provider's performance we will, this year, look at the evidence they submit about these, in some detail. We are looking to see if the same problems seem to continue. Where this is the case we may inspect to decide whether more formal action is required to bring about improvement..</p>
<p><b>Action Plan</b></p>	<p><input checked="" type="checkbox"/> Not applicable as no previous action plans requested</p> <p><input type="checkbox"/> Wherever we write a report about a provider's performance, that contains requirements, we ask the provider to develop an action plan setting out how the requirements will be met. We will look at this during the annual assessment process to see how progress is being made. Where a provider was asked to write an action plan but failed to do so, we will assess whether the issues they were asked to cover should be inspected instead. This will not always be the case and sometimes providers will address the issues in the Self Assessment form making the action plan, itself, less important.</p>

<p><b>Previous 12 month history of notifications</b></p>	<input checked="" type="checkbox"/>	<p>Regulations 8,11,14,28,29,30,31,32 and 41 require the registered provider to notify the Commission of certain events. Most events that must be notified through the provisions of these regulations are in connection with the registration of an establishment or agency, to ensure that the business is operated and managed so that it does not compromise the health, safety and welfare of patients. These notifications may include events such as a patient death or a serious untoward incident. The notifications are reviewed at the time we receive them and the Healthcare Commission may have already taken action. However, during the annual assessment process we review these notifications again, looking for trends or patterns that may require us to ask for further information or carry out an inspection.</p>
<p><b>Registered provider visit reports</b></p>	<input type="checkbox"/>	<p>Regulation 26 of the Private and Voluntary Healthcare [England] Regulations 2001 requires any registered provider, who is not in day-to-day charge of the establishment, to make visits to the establishment on an unannounced basis, once every 6 months. The regulations set out areas that they must review and these include discussing the quality of care with patients, reviewing complaints and discussing the management of the establishment with the staff. The provider is then required to compile a report regarding the visit and submit this to the Healthcare Commission. These reports are reviewed at the time we receive them and the Healthcare Commission may have already followed issues up. However, during the annual assessment process we review these reports again, looking for trends or patterns that may require inspection. Failure to submit these reports may also be a cause for inspection.</p>
<p><b>Concerning Information &amp; Local intelligence</b></p>	<input type="checkbox"/>	<p>Whilst the Healthcare Commission is not a complaints handling or arbitration service, we welcome any feedback from patients and the public on the performance of providers as they found it. This may include information about complaints raised with the provider or general concerns about things they saw or experienced. This information is reviewed at the time we receive it and the Healthcare Commission may have already taken action. However, during the annual assessment process we review this information again, looking for trends or patterns that may require inspection.</p>

The Healthcare Commission exists to promote improvement in health and healthcare. We have a statutory duty to assess the performance of healthcare organisations, award annual performance ratings for the NHS and coordinate reviews of healthcare by others. In doing so, we aim to reduce the regulatory burden on healthcare organisations and align assessments of the healthcare provided by the NHS and the independent (private and voluntary) sector. The Healthcare Commission's full name is the Commission for Healthcare Audit and Inspection.

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