

Mr Jan Jiri Stanek

Inspection report

Flat 19 Milford House 7 Oueen Anne Street London W1G8HN Tel:

Date of inspection visit: 1 April 2022 Date of publication: 13/04/2022

This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

Ratings

Overall rating for this location	Good	
Are services well-led?	Good	

Overall summary

This clinic is rated as Good overall. (Previous inspection October 2021 – Overall rating Good)

The key questions are rated as:

Are clinics well-led? - Good

We previously carried out an announced inspection at Mr Jan Jiri Stanek, Flat 19 Milford House, 7 Queen Anne Street, London, W1G 8HN on the 28 October 2021, where the service was rated Good overall and for all other key questions, with the exception of well-led which was rated requires improvement. During the last inspection on 28 October 2021, we identified a breach of Regulation 17 (Good Governance) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The full report of the previous inspection can be found by selecting all reports link for Mr Jan Jiri Stanek our website: www.cqc.org.uk.

We carried out a focused inspection of Mr Jan Jiri Stanek on the 1 April 2022, to review whether the service had made improvements in response to the breach of regulation we identified in October 2021.

Mr Jan Jiri Stanek is a private cosmetic clinic offering a range of cosmetic surgery and non-invasive treatments for adult patients. The clinic does not have any overnight beds; patients that required surgery or overnight beds are admitted to a private hospital.

The clinic was registered with CQC under the Health and Social Care Act 2008 in respect of some, but not all, of the services it provides. There are some exemptions from regulation by CQC which relate to particular types of regulated activities and clinics and these are set out in Schedule 1 and Schedule 2 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Mr Jan Jiri Stanek provides a range of non-surgical cosmetic interventions which are not within CQC scope of registration. For example, body contouring, dermal fillers, Botox (with the exception of treatment for a medical condition), chemical peels, and skin laser treatments. These types of arrangements are exempt by law from CQC regulation.

The clinic sought patient feedback on the quality of clinical care from patients through questionnaires and through the clinic's website. The provider submitted evidence to demonstrate that out of 20 recent reviews all had described the quality of the clinical care as good or very good.

Our key findings were:

• The provider had made improvements following the previous inspection and had embedded new systems to enhance good goverance, with both risk assessments and training being reviewed and completed.

Although we did not identify any breaches of Regulation, the areas where the provider **should** make improvements are:

• Review fire safety legislation and guidance in full to ensure this is adhered to.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Clinics and Integrated Care

Our inspection team

A CQC inspector carried out the inspection.

Background to Mr Jan Jiri Stanek

Dr Stanek is the registered provider for the clinic. The provider is registered to carry out the regulated activity of treatment of disease, disorder or injury at Flat 19, Milford House, 7 Queen Anne Street, London, W1G 8HN.

Mr Jan Jiri Stanek is a private cosmetic clinic offering a range of cosmetic surgery and non-invasive treatments for patients over the age of 18 years. The clinic does not have any overnight beds; patients that require surgery or overnight beds are admitted to a private hospital.

The service's staff consists of Mr Stanek (a cosmetic surgeon), a consultant physician, and a non-clinical administrator. There was also a practice nurse who was self-employed and carried out some procedures at the premises, which were not part of this inspection.

The consultant physician carried out some cosmetic procedures which were exempt from regulation by CQC which relate to particular types of regulated activities and clinics and these are set out in Schedule 1 and Schedule 2 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Mr Jan Jiri Stanek provides a range of non-surgical cosmetic interventions which are not within CQC scope of registration, for example body contouring, dermal fillers, Botox (with the exception of treatment for a medical condition), chemical peels, and skin laser treatments. Therefore, we did not inspect or report on these services.

The clinic's website states that it carries out minor surgery, however this is no longer carried out at Flat 19, Milford House, 7 Queen, Anne Street, London, W1G 8HN.

Patients could contact the clinic 24 hours a day via the provider website. Consultations were available face to face, on an 'as requested' basis from Monday to Friday, with the exception of Tuesdays when Dr Stanek worked at a hospital.

How we inspected this clinic

- Prior to the inspection information was requested from the provider.
- A site visit was carried out, where we spoke with staff, reviewed patients records and the clinic documents.

This was a focused inspection where we assessed whether the provider had made improvements since our previous inspection in 2021, and therefore we only looked at the well-led key question.



Are services well-led?

We rated well-led as Good because:

• The provider had embedded the new systems and could demonstrate that risk assessments and training had been reviewed and completed. In addition, they now collated and reviewed patient feedback annually.

Leadership capacity and capability.

- The provider was knowledgeable about issues and priorities relating to the quality and future of the service. They understood the challenges and were addressing them.
- The provider was visible and approachable. They worked closely with receptionist and practice nurse to make sure they were inclusive.
- The provider had considered succession planning.

Vision and strategy

- The provider had a vision and set of values to provide a high-quality service.
- Staff were aware of and understood the vision, values and strategy and their role in achieving them.

Culture

- Staff felt respected, supported and valued. They were proud to work for the clinic.
- The clinic focused on the needs of patients.
- The provider was aware of and had systems to ensure compliance with the requirements of the duty of candour.
- Staff told us they could raise concerns and were encouraged to do so. They had confidence that these would be addressed.
- There were positive relationships between staff and teams.

Governance arrangements.

- Staff were clear on their roles and accountabilities.
- At the previous inspection we found the provider did not have a system in place to ensure staff had completed the necessary training. At this inspection, all staff had completed the required training for their roles.
- The provider had reviewed policies and procedures to ensure they reflected practices.

Managing risks, issues and performance

- At the previous inspection we found risk assessments for infection control, and for The Control of Substances Hazardous to Health Regulations 2002 (COSHH) were only implemented at the time of the inspection and therefore had not been embedded. At this inspection, the provider explained they had a system in place to ensure infection control and COSHH risk assessments and arrangements were monitored to identify and address current and future risks, including risks to patient safety and areas which required further improvements. These systems had been embedded which enabled the provider to demonstrate sustainability.
- The provide had oversight of safety alerts, incidents, and complaints.
- The provider had a business continuity plan in place, should there be disruption to the clinic.
- A health and safety risk assessment had been completed and last reviewed in October 2021. However, during the inspection we observed there was no fire evacuation plan on display.



Are services well-led?

Appropriate and accurate information

- The clinic submitted data or notifications to external organisations as required.
- There were arrangements in line with data security standards for the availability, integrity and confidentiality of patient identifiable data, records and data management systems.
- The provider had an information governance policy in place.
- The clinic had a website; however, this was not up to date in terms of current information about staff.

Engagement with patients, the public, staff and external partners

- At the previous inspection, we found the clinic encouraged views and concerns from patients but did not have a system in place to collate and analyse feedback, or identify any patterns which they may need to respond to. At this inspection, the provider explained that they would review patient feedback annually. They had received 20 patient feedback forms, all of which were positive about the service.
- Staff were able to describe the systems in place to give feedback.
- Staff we spoke with reported that informal staff meetings were held, but these were not recorded.

Continuous improvement and innovation

• The provider had published work about cosmetic procedures.