

The Wimpole Clinic Ltd

The Wimpole Clinic Ltd

Inspection report

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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 safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive to people's needs?

Good 

Are services well-led?

Good 

Summary of findings

Overall summary

This was the first time we rated this service.

We rated it as good because:

The service had enough staff to care for patients and keep them safe. Staff had training in key skills, understood how to protect patients from abuse, and managed safety well. The service controlled infection risk well. Staff assessed risks to patients and acted on them. They managed medicines well. Staff collected patient feedback and used it to improve the service.

Staff provided good care and treatment, gave patients enough time to reflect and ask questions, and gave them pain relief when they needed it. Managers monitored the effectiveness of the service and made sure staff were competent. Staff worked well together for the benefit of patients, advised them on their procedures and supported them to make decisions about their care. Key services were available six days a week.

Staff treated patients with compassion and kindness, respected their privacy and dignity, took account of their individual needs, and helped them understand their conditions. They provided emotional support to patients.

The service planned care to meet the needs of patients, took account of patients' individual needs, and made it easy for people to give feedback. People could access the service when they needed it.

Leaders ran services well using reliable information systems and supported staff to develop their skills. Staff felt respected, supported and valued. They were focused on the needs of patients receiving care. Staff were clear about their roles and accountabilities. The service engaged well with patients to manage services and all staff were committed to improving services continually.

However:

- There was a low response rate to formal patient feedback questionnaires given out by the clinic, although we saw more patients did leave feedback online.
- The service did not submit private patient episode data to the Private Healthcare Information Network (PHIN) as per Competition and Markets Authority (CMA).

Summary of findings

Our judgements about each of the main services

Service	Rating	Summary of each main service
Surgery	Good 	

Summary of findings

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Summary of this inspection

Background to The Wimpole Clinic Ltd

The Wimpole Clinic is operated by The Wimpole Clinic Limited. The service registered in August 2018, providing hair transplant surgeries. It is a private clinic in London. The clinic accepts self-referrals from patients living in London and internationally. The service does not provide services to NHS-funded patients or patients under the age of 18.

At the time of this inspection, there were a registered manager and a nominated individual.

The clinic provides cosmetic surgery and is registered to provide the following regulated activities: Surgical Procedures, Treatment of disease, disorder or injury, Diagnostic and screening procedures.

Activity (December 2020 to May 2021):

- The clinic carried out 411 hair transplant procedures.
- There were 2278 outpatient appointments, which were a mix of pre-operative face-to-face appointments and post-operative reviews.

There were two full-time employed surgeons and three part time working surgeons working under practising privileges at the clinic. The service employed one clinic director, one clinic manager, four hair technicians, as well as employing additional independent hair technicians as needed. The accountable officer for controlled drugs (CDs) was the nominated individual.

The service was inspected in 2013, registered under a different address. The inspection found that the service met the required standards.

How we carried out this inspection

We inspected this service using our comprehensive inspection methodology. We carried out the unannounced part of the inspection on 26 May 2021.

During the inspection, we visited the whole clinic, including the reception, waiting areas, procedure rooms and consultation room. We spoke with five staff on the day of inspection. We spoke with five patients and reviewed 10 sets of patient records.

You can find information about how we carry out our inspections on our website: <https://www.cqc.org.uk/what-we-do/how-we-do-our-job/what-we-do-inspection>.

Areas for improvement

Action the service SHOULD take to improve:

- The service should comply with the Competition and Markets Authority (CMA) legal requirement to submit private patient episode data to the Private Healthcare Information Network (PHIN).
- The service should continue their work developing an audit programme.
- The service should improve staff understanding of Duty of Candour.






Our findings

Overview of ratings

Our ratings for this location are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Surgery	Good	Good	Good	Good	Good	Good
Overall	Good	Good	Good	Good	Good	Good

Surgery

Safe	Good 
Effective	Good 
Caring	Good 
Responsive	Good 
Well-led	Good 

Are Surgery safe?

Good 

This was the first time we rated safe at this service.

We rated it as good.

Mandatory training

The service provided mandatory training in key skills to all staff and made sure everyone completed it.

The service provided mandatory training in key skills to all staff, including independent hair technicians working there and made sure everyone completed it. All staff employed by the service had completed their mandatory training. Staff compliance with mandatory training was monitored by the clinic manager. Hair technicians we spoke with confirmed that any necessary training was organised for them.

Safeguarding

Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it.

Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it. All staff completed safeguarding adults and children training (levels one and two) as part of their mandatory training. Managerial level staff had completed level three children and adults safeguarding training. Staff we spoke with knew how to escalate safeguarding concerns and demonstrated awareness of safeguarding issues.

Cleanliness, infection control and hygiene

The service controlled infection risk well. The service used systems to identify and prevent surgical site infections. Staff used equipment and control measures to protect patients, themselves and others from infection. They kept equipment and the premises visibly clean.

Surgery

The service controlled infection risk well, including taking appropriate measures to reduce the risk of Covid-19 transmission. The service used systems to identify and prevent surgical site infections, with none occurring in the last 12 months. Staff used equipment and control measures to protect patients, themselves and others from infection. They kept equipment and the premises visibly clean. Staff only used disposable instruments for procedures. A cleaning company employed by the service cleaned the premises daily with regular scheduled deep cleaning. The hair technicians cleaned and sanitised medical equipment after each procedure. The common areas of the building, for example corridors were cleaned daily and fogged with disinfectants fortnightly. Cleaning schedules were in line with infection prevention and control policies and procedures.

Environment and equipment

The design, maintenance and use of facilities, premises and equipment kept people safe. Staff were trained to use them. Staff managed clinical waste well.

The design, maintenance and use of facilities, premises and equipment kept people safe. Staff were trained to use them. The clinic had the relevant emergency resuscitation equipment. We saw evidence equipment testing of all necessary items had taken place, with maintenance contracts to ensure continuity. Staff managed clinical waste well.

Assessing and responding to patient risk

Staff completed and updated risk assessments for each patient and removed or minimised risks. Staff identified and quickly acted upon patients at risk of deterioration.

Staff completed and updated risk assessments for each patient and removed or minimised most risks. This included completing risk assessments for those at risk of Covid-19. The service used a modified World Health Organisation (WHO) surgical safety checklist for patients throughout the perioperative journey, to prevent or avoid serious patient harm. However, the service had just recently started using a new form and therefore could not provide any audit data. Staff knew how to identify and quickly act upon patients at risk of deterioration. All staff had received the appropriate level of life support training for their role. In an emergency situation, staff would dial 999 for assistance and transfer to an NHS hospital.

Staffing

The service had enough staff with the right qualifications, skills, training and experience to keep patients safe from avoidable harm and to provide the right care and treatment. Managers regularly reviewed and adjusted staffing levels and skill mix.

The service had enough staff with the right qualifications, skills, training and experience to keep patients safe from avoidable harm and to provide the right care and treatment. Surgeons and managers regularly reviewed and adjusted staffing levels and skill mix of hair technicians, depending on the individual case.

Records

Staff kept detailed records of patients' care and treatment. Records were clear, up-to-date, stored securely and easily available to all staff providing care.

Surgery

Staff kept detailed records of patients' care and treatment. Records were clear, up to date, stored securely and easily available to all staff providing care. We sampled 10 sets of records and found them to be complete and legible.

Medicines

The service used systems and processes to safely prescribe, administer, record and store medicines.

The service used systems and processes to safely prescribe, administer, record and store medicines. There was a service level agreement (SLA) in place with local pharmacies for the supply of medicines. All drugs we checked were within date and stored appropriately. A spot check of the CD register confirmed levels were correct.

Incidents

The service managed patient safety incidents well. Staff knew how to recognise and report incidents and near misses. Managers would investigate incidents and share lessons learned with the whole team.

The service had a system to manage patient safety incidents. Staff we spoke with knew how to recognise and report incidents and near misses. However, not all staff were aware what the term 'Duty of Candour' (DoC) meant. The DoC is a regulatory duty that relates to openness and transparency and requires providers of health and social care services to notify patients (or other relevant persons) of certain 'notifiable safety incidents' and provide reasonable support to that person. Managers ensured actions from patient safety alerts were implemented and monitored.

Are Surgery effective?

This was the first time we rated effective at this service.

We rated it as good.

Evidence-based care and treatment

The service provided care and treatment based on national guidance and evidence-based practice. Staff protected the rights of patients in their care.

The service provided care and treatment based on national guidance and evidence-based practice. Policies we sampled were regularly reviewed and included appropriate references to relevant national guidance, for example British Association of Hair Restoration Surgery. Managers were in the process of developing an audit programme for the service ensure that staff followed guidance.

Nutrition and hydration

Staff gave patients enough food and drink to meet their needs and improve their health.

Surgery

Staff gave patients enough food and drink to meet their needs. The clinic provided hot and cold beverages to all patients, and ensured patients remained hydrated during procedures. Patients were encouraged to bring their own lunch and were offered snacks.

Pain relief

Staff assessed and monitored patients regularly to see if they were in pain, and gave pain relief in a timely way.

Staff assessed and monitored patients regularly to see if they were in pain and gave pain relief in a timely way. The 10 sets of notes we reviewed showed patients had been given additional pain relief to ease pain. The patients we spoke with told us their pain post-operatively was well controlled.

Patient outcomes

Staff monitored the effectiveness of care and treatment. They used the findings to make improvements and achieved good outcomes for patients.

Staff monitored the effectiveness of care and treatment in some ways. The clinic did not follow the Competition and Markets Authority (CMA) legal requirement to submit private patient episode data to the Private Healthcare Information Network (PHIN). The Royal College of Surgeons does not require providers of hair transplant surgery to submit to Quality Patient Reported Outcome Measures (Q-PROMs). Surgeons checked their outcomes individually and managers told us they were in the process of developing a comprehensive audit programme for the service.

Competent staff

The service made sure staff were competent for their roles. Managers appraised staff's work performance and held supervision meetings with them to provide support and development.

The service made sure staff were competent for their roles. Managers appraised staff's work performance and held supervision meetings with them to provide support and development. The clinic worked with employed consultants and under a practising privileges arrangement. The granting of practising privileges is an established process whereby a medical practitioner is granted permission to work within an independent service. The service followed their policy on the granting and review of practising privileges and was able to demonstrate they ensured all medical staff worked within the scope of their practice, which was agreed at the time practising privileges were granted.

Multidisciplinary working

All those responsible for delivering care worked together as a team to benefit patients. They supported each other to provide good care.

Doctors and other healthcare professionals worked together as a team to benefit patients. They supported each other to provide good care. Staff told us they enjoyed working with their colleagues and were complimentary about the support they received from one another. The clinic asked every patient for their consent to share post-operative information with their GP. This was to ensure the GP was aware of the procedure and post-operative treatment recommended.

Seven-day services

Surgery

Key services were available six days a week to support timely patient care.

Key services were available six days a week to support timely patient care. Patients were able to contact staff at the clinic for support at any time. They were given a telephone number to call following their procedure, which was manned by a member of clinic staff 24 hours a day, seven days a week.

Health promotion

Staff gave patients practical support and advice to lead healthier lives.

Staff gave patients practical support and advice regarding their procedure and hair restorations in general. Patients were provided with materials they could read that outlined their procedure at the pre-assessment stage. On discharge, patients were provided with further information on how to look after themselves post-surgery.

Consent, Mental Capacity Act and Deprivation of Liberty Safeguards

Staff supported patients to make informed decisions about their care and treatment. They followed national guidance to gain patients' consent.

Staff supported patients to make informed decisions about their care and treatment. They followed national guidance to gain patients' consent, including in the case of remote consultations. Professional standards for cosmetic surgery state that surgeons who perform cosmetic surgery should ensure consent is obtained in a two-stage process, with a cooling-off period between the stages to allow the patient to reflect on the decision. All 10 records we checked had signed consent forms with witness signatures. The clinic did not routinely accept patients for admission that were deemed to lack capacity regarding treatment decisions. Staff received training on Mental Capacity Act 2005 (MCA) as part of their mandatory training.

Are Surgery caring?

This was the first time we rated caring at this service.

We rated it as good.

Compassionate care

Staff treated patients with compassion and kindness, respected their privacy and dignity, and took account of their individual needs.

Staff treated patients with compassion and kindness, respected their privacy and dignity, and took account of their individual needs. We observed interactions between staff and patients. Staff looked after patients in a kind and compassionate manner. We spoke to five patients who had undergone hair transplant surgery and all commended the service. One said they were "happy with the whole service", another stated that privacy was respected and the procedure felt "dignified". All patients we spoke with would recommend the service to friends and family. Patients were encouraged

Surgery

to give feedback via a patient satisfaction questionnaire with a franked and addressed return envelope. In the last 6 months, 16 patients had filled out feedback forms which has a scoring system from 1 to 10. An audit looking at the scores showed that the overall satisfaction with the quality of care scored 136 of 150, respect and dignity scored 130 of 150 and postoperative care scored 148 of 150. Staff told us additional patient feedback was often posted online on search engines or designated review websites. Any patients who were not happy with any aspect of their care was contacted by a member of the senior team to discuss what improvements could be made.

Emotional support

Staff provided emotional support to patients, families and carers to minimise their distress. They understood patients' personal, cultural and religious needs.

Staff provided emotional support to patients to minimise their distress. Mental health screening was part of the pre-operative assessment process, in order to identify psychologically vulnerable patients. Staff understood patients' personal, cultural and religious needs. Staff were able to give us examples of tailored support they offered different patients.

Understanding and involvement of patients and those close to them

Staff supported and involved patients, families and carers to understand their condition and make decisions about their care and treatment.

Staff supported and involved patients to understand their condition and make decisions about their care and treatment. Patient records showed discussion of potential risks and complications of surgery, as well as the benefits and alternatives available. A discussion around costs took place at the patient's initial contact with the clinic and the payable amount was emailed after an assessment of the patient was made by a surgeon. All five patients we spoke with felt well informed and involved as much as they wanted to be in decisions about their care and treatment. They assured us they did not feel pressured at any time to go ahead with the procedure and there had been no hidden or extra costs.

Are Surgery responsive?

This was the first time we rated responsive at this service.

We rated it as good.

Service delivery to meet the needs of local people

The service planned and provided care in a way that met the needs of people served.

The service planned and provided care in a way that met the needs of patients. The service offered a choice of procedures and choice of consultants, to best meet patient needs. This ensured patients had access to a flexible service with a good amount of choice and continuity of care.

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Meeting people's individual needs

The service was inclusive and took account of patients' individual needs and preferences. Staff made reasonable adjustments to help patients access services.

The service was inclusive and took account of patients' individual needs and preferences. Staff made reasonable adjustments to help patients access services. The clinic had step-free access, enabling disabled access. Patients attending for a consultation were given a copy of information leaflets and procedure guides for the services they were interested in. Information was also available on the company website. The service did not provide translators, but staff told us this had not been necessary so far. Staff received mandatory equality and diversity training.

Access and flow

People could access the service when they needed it and received the right care in a timely way.

People could access the service when they needed it and received care promptly. The service did not audit patient waiting times for surgery. This was because all procedures were elective, and patients were able to choose their preferred dates. The clinic reported no procedures had been cancelled for a non-clinical reason. Staff at the clinic called the patient 24 hours after the procedure to check in with them and confirm the follow-up appointment dates. Staff were able to describe how patient follow-up might be affected by Covid-19 and how they ensured patients still received good post-operative care.

Learning from complaints and concerns

It was easy for people to give feedback and raise concerns about care received. The service treated concerns and complaints seriously, investigated them and shared lessons learned with all staff. The service included patients in the investigation of their complaint.

It was easy for people to give feedback and raise concerns about care received. The service had a complaints policy and staff knew to treat concerns and complaints seriously. Leaders explained how they would always address any concerns immediately and aim to resolve them. The clinic did not receive any formal complaints within the last 12 months. The service aimed to acknowledge all complaints within two working days and provide a full response within 20 working days. Where this timeframe was not possible, a letter was sent to the complainant to inform them of the revised schedule. The most common concerns staff dealt with were about management of patient expectations.

Are Surgery well-led?

This was the first time we rated well-led at this service.

We rated it as good.

Leadership

Surgery

Leaders had the skills and abilities to run the service. They understood and managed the priorities and issues the service faced. They were visible and approachable in the service for patients and staff. They supported staff to develop their skills.

The service was led by the clinic director, medical director and clinic manager. They had the skills and abilities to run the service. They understood and managed the priorities and issues the service faced. The clinic director and the clinic manager were visible and approachable in the service for patients and staff. Staff we spoke to were incredibly positive about the leadership of the clinic. They supported staff to develop their skills and feel appreciated in their roles.

Vision and strategy

The service had a vision for what it wanted to achieve and a strategy to turn it into action.

The service had a vision for what it wanted to achieve and a strategy to turn it into action. The clinic's vision was to become the gold standard for hair transplant surgery by providing high quality services while accepting more complicated cases than other providers. Managers planned to increase patient numbers whilst maintaining high quality services.

Culture

Staff felt respected, supported and valued. They were focused on the needs of patients receiving care. The service promoted equality and diversity in daily work. The service had an open culture where patients and staff could raise concerns without fear.

Staff felt respected, supported and valued. They were focused on the needs of patients receiving care. Staff we met were welcoming, friendly and helpful. It was evident they were happy in their roles. Staff we spoke to told us the culture of the service was like being a family and they genuinely enjoyed coming to work. The service provided opportunities for career development and training. We saw professional development and training was discussed in staff appraisals. The service had an open culture where patients and staff could raise concerns without fear. Managers and surgeons were approachable and supportive. The service had an equality and diversity policy.

Governance

Leaders operated effective governance processes. Staff at all levels were clear about their roles and accountabilities and had regular opportunities to meet, discuss and learn from the performance of the service

Leaders operated effective governance processes throughout the service. Staff at all levels were clear about their roles and accountabilities and had regular opportunities to meet, discuss and learn from the performance of the service. There were regular staff meetings and the medical advisory committee (MAC) meetings. Clinical issues, patient feedback, staffing, complaints and incidents were discussed and reviewed at relevant meetings, including the MAC.

Managing risks, issues and performance

Leaders and teams used systems to manage performance effectively. They identified and escalated relevant risks and issues and identified actions to reduce their impact. They had plans to cope with unexpected events.

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Leaders and teams used systems to manage performance effectively. They identified and escalated relevant risks and issues and identified actions to reduce their impact. The clinic had a risk register which recorded specific local risks to the service. All recorded risks were graded according to severity and controls were documented, with actions required before the next review date. All actions were assigned to a responsible individual. Risks were regularly reviewed. The service had plans to cope with unexpected events, including adverse reactions during procedures. There was a risk management policy and the service undertook risk assessments. The service was in the process of developing an annual audit programme and had recently undertaken a patient feedback audit.

Managing information

The service collected reliable data and analysed it. Staff could find the data they needed, in easily accessible formats, to understand performance, make decisions and improvements. The information systems were integrated and secure.

The service collected reliable data and analysed it. Staff could find the data they needed, in easily accessible formats, to understand performance, make decisions and improvements. All initial patient contact was recorded on a computerised system. All notes from the day of treatment were recorded on paper patient notes, which were tailored to each specific treatment. Once treatment was completed, these notes were scanned onto the patient record and the hard copy was stored appropriately. The information systems were integrated and secure. All staff had received information governance training. Data or notifications were consistently submitted to external organisations as required.

Engagement

Leaders and staff actively and openly engaged with patients, staff and the public to plan and manage services.

Leaders and staff actively and openly engaged with patients and staff to plan and manage services. All patients were asked to complete a provider feedback questionnaire about their experience. Patients were also encouraged to provide feedback via search engines, review websites, social media account and email. This feedback was audited, shared with staff and used to drive improvement. There was a group on a virtual messaging platform that all staff were part of to aid better staff communication and engagement.

Learning, continuous improvement and innovation

All staff were committed to continually learning and improving services. They had a good understanding of quality improvement methods and the skills to use them.

All staff were committed to continually learning and improving services. The clinic employed very experienced surgeons and hair technicians which enabled them to accept patients who had been rejected by other services due to a more complicated or lengthy procedure, for example female, transgender or Afro-Caribbean patients. Hair technicians with special interest and experience in certain types of hair transplants were assigned to the appropriate patients.