

Dr Frances Prenna Jones Clinic Limited

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



Overall summary

This service is rated as Good overall. Previous inspection 11 June 2019 – Good overall and Requires improvement for the safe key question.

The key questions are rated as:

Are services safe? – Good

We carried out an announced comprehensive inspection at Dr Frances Prenna Jones Clinic Limited on 11 June 2019. The overall rating for the service was good, the service was rated requires improvement for providing Safe services. The full comprehensive report on the 11 June 2019 inspection can be found by selecting the 'all reports' link for Dr Frances Prenna Jones

Clinic Limited on our website at www.cqc.org.uk.

This inspection was a desk-based review carried out on 29 September 2020 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified in our previous inspection on 11 June 2019. This report covers our findings in relation to those requirements and additional improvements made since our last inspection.

Dr Frances Prenna Jones Clinic Limited provides cosmetic surgery to adult patients. This service is 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 general exemptions from regulation by CQC which relate to particular types of service and these are set out in Schedule 2 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At Dr Frances Prenna Jones Clinic Limited, the cosmetic services provided include Botox and skin peels. These types of arrangements are exempt by law from CQC regulation.

The sole doctor is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

We are mindful of the impact of COVID-19 pandemic on our regulatory function. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so.

Our key findings were:

- The provider had put in place systems to monitor the oxygen and emergency equipment.
- The defibrillator had been calibrated and a programme of regular checks had been implemented.
- The service had carried out a risk assessment to determine the range of emergency medicines held.
- The pulse oximeter had been calibrated and a programme of regular checks had been implemented.
- Signed cleaning checklists and schedules had been established.
- The service had completed a Legionella risk assessment.

The areas where the provider **should** make improvements are:

Overall summary

- Review the process regarding Legionella risk assessments and ensure that a management plan has been established by a suitably competent person.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

Our inspection team was led by a CQC lead inspector

Background to Dr Frances Prenna Jones Clinic Limited

Dr Frances Prenna Jones is a private aesthetic cosmetic clinic based at 33 Shepherd Street, Mayfair, W1J 7HY. Dr Frances Prenna Jones provides anti-ageing treatments to adults. Not all of these treatments are required to be regulated by the Care Quality Commission (CQC). However, the service also carries out the removal of skin tags and prescribes medicines which fall within scope of CQC regulation. The practice website can be found at www.drfrancesprennajones.com

Dr Frances Prenna Jones provides services for three days a week between 9am and 7pm. The clinic only treats adults and appointments are booked by remotely based staff in advance by telephone, email or in person. They see approximately 60 patients per week.

Patient facilities are provided on the ground and first floor. There is no lift and no entrance ramp facilitating physical access. However, this is made clear both on the website and when patients make appointments. Dr Frances Prenna Jones is the sole practitioner at the practice.

How we inspected this service

We undertook a comprehensive inspection of Dr Frances Prenna Jones on 11 June 2019 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement for providing safe services and good overall

We undertook a follow up desk-based focused inspection of Dr Frances Prenna Jones on 29 September 2020. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

Are services safe?

When we inspected the practice in June 2019, we found that this service was not providing safe care in accordance with the relevant regulations. Specifically, we found:

- There was no system in place to monitor the oxygen and emergency equipment.
- The defibrillator had not been set up or checked to ensure that it was in good working order.
- There was no risk assessment carried out to determine the range of emergency medicines held.
- The pulse oximeter in place had not been calibrated despite being 18 months old.
- There was no evidence of completed cleaning checklists.
- There was no evidence of a completed Legionella risk assessment.

At this inspection in September 2020, we found improvements had been made.

The service had clear systems to keep people safe and safeguarded from abuse.

- The provider conducted safety risk assessments. It had appropriate safety policies, which were regularly reviewed and communicated to staff including locums. They outlined clearly who to go to for further guidance. Staff received safety information from the service as part of their induction and refresher training. The service had systems to safeguard children and vulnerable adults from abuse.
- At the June 2019 inspection we found that There was no handwashing poster displayed at the practice. Cleaning records provided were blank and the provider told us that they were

disposed of once completed.

At this inspection were provided with evidence of completed and signed cleaning records and the clinics cleaning schedule.

- At the June 2019 inspection we saw evidence of a water temperature gauge for monitoring Legionella risk but there was no evidence of a risk assessment having been carried out.

At this inspection the service provided evidence that they had purchased a Legionella Field Test Kit, which enabled the provider to conduct their own Legionella risk assessment. Annual checks are carried out to ensure Legionella pneumophila is not present in the water. They had also refurbished their bathrooms and all taps and pipes had been replaced.(A Legionella risk assessment is a report by a competent person giving details as to how to reduce the risk of the legionella bacterium spreading through water and other systems in the work place).

Risks to patients

There were systems to assess, monitor and manage risks to patient safety.

- At the June 2019 inspection we found that there was oxygen which was full and in date, although not monitored. When we looked at the defibrillator, we saw that it had not yet been set up or checked to ensure that it was in good working order. This was rectified on the day of inspection. We also found that the service did not carry all of the recommended emergency medicines and had no carried out a risk assessment for their omission.

At this inspection we found that a risk assessment has been made and reviewed annually. This included the range of medicines and emergency equipment which are on site. We were also provided evidence that the pulse oximeter, Oxygen and defibrillator located on site were calibrated and checked and logged on a weekly basis.