

Go Global Vaccinations & Travel Health Clinic Limited

Go Global Vaccinations and Travel Health Clinic

Inspection report

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Overall summary

We carried out an announced comprehensive inspection on 5 September 2018 to ask the service the following key questions; Are services safe, effective, caring, responsive and well-led?

Our findings were:

Are services safe?

We found that this service was providing safe care in accordance with the relevant regulations.

Are services effective?

We found that this service was providing effective care in accordance with the relevant regulations.

Are services caring?

We found that this service was providing caring services in accordance with the relevant regulations.

Are services responsive?

We found that this service was providing responsive care in accordance with the relevant regulations.

Are services well-led?

We found that this service was providing well-led care in accordance with the relevant regulations.

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the service was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

The services are provided to clients privately and are not commissioned by the NHS.

The service is registered with the Care Quality Commission (CQC) under the Health and Social Care Act 2008 in respect of the services it provides. Go Global Vaccinations and Travel Health Clinic Ltd is registered with CQC to provide the regulated activities of treatment of disease, disorder or injury and diagnostic and screening procedures. The types of services provided are consultation and treatment services.

At the time of our inspection a registered manager was in place. A registered manager is a person who is registered with the Care Quality Commission to manage the service.

Summary of findings

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 received 26 completed CQC comment cards from clients who used the service. Feedback was positive about the service delivered at the clinic.

We were unable to speak with clients about their experience of the service they received. This was because, on the day of our visit, no one was receiving treatment regulated by us.

Our key findings were:

 Care and treatment was planned and delivered in a way that was intended to ensure

people's safety and welfare.

- The treatment room was well-organised and well-equipped.
- Clinicians regularly assessed clients according to appropriate guidance and standards, such as those issued by the National Institute for Health and Care Excellence.
- Staff were up to date with current guidelines.

- Staff maintained the necessary skills and competence to support the needs of clients.
- There were effective systems in place to check all equipment had been serviced regularly.
- The provider was aware of, and complied with, the requirements of the Duty of Candour.
- The provider had an effective system for ensuring the identity of clients who attended the service.
- Risks to clients were well-managed. For example, there
 were effective systems in place to reduce the risk and
 spread of infection.
- Clients were provided with information about their health and received advice and guidance to support them to live healthier lives.
- Information about how to complain was available and easy to understand.
- Systems and risk assessments were in place to deal with medical emergencies and staff were trained in basic life support.

The areas where the provider should make improvements are:

Review the emergency equipment required by the service.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

We found that this service was providing safe care in accordance with the relevant regulations.

- The service had systems, processes and risk assessments in place to keep staff and clients safe.
- Staff had the information they needed to provide safe care and treatment, and shared information as appropriate with other services.
- The service had a good track record on safety.
- The staffing levels were appropriate for the provision of care provided.
- We found the equipment and premises were well-maintained with a planned programme of maintenance.
- There was no prescribing of medicines and only vaccinations were held on the premises except for medicines to deal with a medical emergency.
- Staff had been trained in safeguarding vulnerable adults and children to an appropriate level. The lead for safeguarding had been trained to level three safeguarding.

Are services effective?

We found that this service was providing effective care in accordance with the relevant regulations.

- Staff had the skills, knowledge and experience to deliver effective care and treatment.
- Staff used current guidelines such as National Institute for Health and Care Excellence, to assess health needs.
- Clients received a comprehensive assessment of their health needs which included their medical history.
- Staff encouraged and supported clients to be involved in monitoring and managing their health.
- The clinic had a comprehensive programme of quality improvement activity and routinely reviewed the effectiveness of the care provided.

Are services caring?

We found that this service was providing caring services in accordance with the relevant regulations.

- We were unable to speak to clients directly on the day of inspection. However, we received 26 comment cards. Comments showed that clients were pleased with the care they had received at the clinic.
- The clinic treated clients courteously and ensured that their dignity was respected.
- The clinic involved clients fully in decisions about their care and provided comprehensive information about vaccines.
- Clients were provided with travel vaccination records and international certificates of vaccination.
- Information for clients, including available treatment packages and the associated costs, were available prior to appointments
- We found the staff we spoke to were knowledgeable and enthusiastic about their work.
- The clinic had a system for confirming the identification of clients at the start of every health assessment.

Are services responsive to people's needs?

We found that this service was providing responsive care in accordance with the relevant regulations.

- The clinic proactively sought client feedback and identified and resolved any concerns that were identified.
- There was an accessible complaints system. Information was available to clients.
- The clinic had good facilities and was well-equipped to meet the needs of the clients.

Summary of findings

• The clinic could accommodate clients with a disability or impaired mobility. All clients were seen on the ground floor of the premises.

Are services well-led?

We found that this service was providing well-led care in accordance with the relevant regulations.

- The provider had a clear vision and strategy for the service and the service leaders had the knowledge, experience and skills to deliver high quality care and treatment.
- The clinic had access to numerous policies, and systems and processes were in place to identify and manage risks and to support good governance.
- The clinic actively engaged with staff and clients to support and promote improvement.
- Regular staff meetings took place and discussions with the clinical lead took place.
- The culture within the clinic was open and transparent.



Go Global Vaccinations and Travel Health Clinic

Detailed findings

Background to this inspection

We carried an announced comprehensive inspection at Go Global Vaccinations & Travel Health Clinic on 5 September 2018. Our inspection team was led by a CQC Lead inspector. The inspection team included a GP Nurse Advisor.

Go Global Vaccinations & Travel Health Clinic, based in Chandlers Ford, Hampshire, is managed and run by a qualified Travel Health Specialist who is an Associate Member of the Faculty of Travel Medicine. The specialist is a member of The British Global Travel Health Association, The International Society of Travel Medicine and The Royal Society of Tropical Medicine & Hygiene.

The travel health specialist is supported by a clinical lead who is a local GP. There are no other staff employed at this clinic.

The clinic is located at 110 Winchester Road, Chandlers Ford, Hampshire SO53 2GJ and is registered with the Care Quality Commission to provide the following regulated activities: Diagnostic and screening procedures and Treatment of disease, disorder or injury.

The clinic states that their aim is to give each individual traveller the vaccines, antimalarials and the most up-to date and relevant advice that is tailored to individual needs. The type of trip that is being undertaken, its' purpose, duration and health all determine what may or may not needed for the journey.

Go Global Vaccinations & Travel Health Clinic is a designated Yellow Fever Vaccination Centre and has been authorised by the National Travel Health Network and

Centre (NaTHNaC) (as the regulatory body for England, Wales and Northern Ireland), to administer yellow fever vaccine in accordance with International Health Regulations (2005).

Travel related products such as mosquito nets, insect repellents and medical first aid kits are also available to purchase at the clinic.

The core opening hours of the clinic are; Monday: 9:00am - 5:00pm, Wednesday: 9:00am - 5:00pm, Saturday: 9:00am - 5:00pm. Evening appointments available and consultation are by appointment only.

Prior to the inspection, we reviewed a range of information we hold about the service and the information provided from the pre-inspection information request.

During our visit:

- We spoke with the registered manager and the clinical lead GP.
- We looked at equipment and rooms used for providing treatment.
- We reviewed records and documents.

To get to the heart of clients' experiences of care and treatment, we always ask the following five questions:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

These questions therefore formed the framework for the areas we looked at during the inspection.

Are services safe?

Our findings

We found that this clinic was providing safe services in accordance with the relevant regulations.

Safety systems and processes

The provider had clear systems to keep clients safe and safeguarded from abuse.

- The provider had safety policies including adult safeguarding policies which were regularly reviewed.
 The service had access to a child safeguarding policy to safeguard any child that might attend the premises. The travel health specialist received safety information for the clinic as part of their refresher training. Policies were regularly reviewed. They outlined clearly who to go to for further guidance.
- The provider had a clinician trained to level three child safeguarding and vulnerable adults as the safeguarding lead.
- The travel health specialist received up-to-date safeguarding and safety training appropriate to their role. They knew how to identify and report concerns.
- The travel health specialist had completed checks of professional registration and had completed relevant Disclosure and Barring Service (DBS) checks. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable).
- There was an effective system to manage infection prevention and control. Daily checks for cleanliness were completed in each assessment room and which included equipment.
- An infection prevention compliance audit was undertaken by the travel health specialist to ensure compliance with infection prevention and control standards.
- There were systems for safely managing healthcare waste.
- The clinic ensured that facilities and equipment were safe and that equipment was maintained according to manufacturers' instructions.

Risks to patients

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

- The clinic had systems to deal with medical emergencies and staff were suitably trained in emergency procedures. The clinic did not have a defibrillator on the premises and had not risk assessed for this. However, the travel health specialist had up to date training for basic life support and anaphylaxis.
- The travel health specialist understood their responsibilities to manage emergencies on the premises and to recognise those in need of urgent medical attention.
- The clinic had up to date fire risk assessments and carried out regular fire drills.
- All electrical equipment was checked to ensure that equipment was safe to use and clinical equipment was checked to ensure it was working properly.

Information to deliver safe care and treatment

The travel health specialist had the information they needed to deliver safe care and treatment to clients.

- Clients completed a full health assessment questionnaire before attending their treatment.
- Assessments included areas such as checking for diabetes, heart health and nutrition.
- Assessments were recorded on the service's electronic system. We found the electronic client record system was only accessible to the travel health specialist and clinical lead GP which protected client confidentiality.
- We reviewed an anonymised report and found it contained relevant information recorded in a clear and structured manner.

Safe and appropriate use of medicines

- The arrangements for managing medicines, including emergency medicines, in the clinic minimised risks to client safety (including obtaining, prescribing, recording, handling, storing, security and disposal).
- Patient Group Directions had been adopted by the clinic to allow the specialist nurse to administer medicines in line with legislation.
- Vaccines were stored in properly maintained and temperature checked medical fridges and in date.
- The only emergency medicine found to be held on the premises was Adrenaline. (Adrenaline is most commonly used as a first line treatment for anaphylaxis). The provider had risk assessed the emergency medicines required and found this was adequate for their needs.

Are services safe?

• The arrangements for managing emergency medicines at the service kept clients safe (including obtaining, recording, handling, storing and security).

Track record on safety

The service had a good safety record.

- There were dynamic risk assessments in relation to safety issues.
- The service monitored and reviewed activity on a regular basis. This helped it to understand risks and gave a clear, accurate and current picture that led to safety improvements. We saw these were discussed at meetings.
- There was a system for receiving, reviewing and actioning safety alerts from external organisations such as the Medicines and Healthcare Products Regulatory Agency (MHRA).

Lessons learned and improvements made

The clinic learned and made improvements when things went wrong.

- There was an effective system and policy for recording and acting on significant events and incidents.
 Significant events were recorded on the service's computer system which all staff had received training to use. We were told by the service that they had not had any significant events in the last 12 months.
- The travel health specialist understood their duty to raise concerns and report incidents, managers supported them when they did so.
- The provider was aware of and complied with the requirements of the Duty of Candour.

Are services effective?

(for example, treatment is effective)

Our findings

We found that this service was providing effective services in accordance with the relevant regulations.

Effective needs assessment, care and treatment

The service had systems to keep clinicians up to date with current evidence-based practice. We saw that clinicians assessed needs and delivered care and treatment in line with current legislation, standards and guidance supported by clear clinical pathways and protocols.

- We saw no evidence of discrimination when making care and treatment decisions.
- Assessments and screening were monitored using information from a range of sources, in line with relevant and current evidence-based guidance and standards such as updates from PR-Med, the world-wide information re vaccination requirements. The clinic was also a member of the International Society of Travel Medicine which sent in email alerts and issued best practice guidelines. For example, there had been a recent update in the use of Rabies vaccinations and this had been incorporated in the patient group directions. (These are directives to who can supply and or administer specific medicines to patients without a doctor.)
- The clinic also provided comprehensive vaccination information on the clinics website.
- The service had systems in place to keep all clinical staff up to date with new guidance.
- Staff had access to best practice guidelines and used this information to deliver care and treatment that met clients' needs.
- The service was monitoring that these guidelines were adhered to through regular routine audits of client records and clinician performance.

Monitoring care and treatment

The clinic had a comprehensive programme of quality improvement activity and routinely reviewed the effectiveness and appropriateness of the care provided.

- All staff were actively involved in monitoring and improving quality and outcomes.
- Patient satisfaction audits were carried to demonstrate quality improvement and all relevant staff were involved to improve care and clients' outcomes.

Effective staffing

Staff had the skills, knowledge and experience to carry out their roles.

- The travel health specialist understood the learning needs required. We saw up to date records of skills, qualifications and training were maintained and held.
- Learning needs were identified through a system of meetings and discussions which were linked to organisational development needs.
- The travel health specialist was supported through one-to-one meetings, appraisals, coaching and mentoring, clinical supervision and facilitation. The travel health specialist was also a registered nurse and had recently completed their nurse revalidation. (Revalidation is a process that all nurses and midwives in the UK need to follow to maintain their registration with the Nursing and Midwifery Council to practise safely and effectively).

Coordinating patient care and information sharing

The travel health specialist worked together and with other health and social care professionals to deliver effective care and treatment.

• The service shared relevant information with the client's permission with other services. For example, when referring clients to secondary health care or informing the client's own GP of any concerns.

Supporting patients to live healthier lives

The travel health specialist was consistent and proactive in helping clients to live healthier lives.

- The aims and objectives of the service were to support clients to live healthier lives. This was done through a process of assessment and screening as well as the provision of individually tailored advice and support to assist clients.
- Client reports also included fact sheets and links to direct clients to more detailed information on aspects of their health and lifestyle should they require it.

Consent to care and treatment

The clinic obtained consent to care and treatment in line with legislation and guidance.

Are services effective?

(for example, treatment is effective)

- Clinicians understood the requirements of legislation and guidance when considering consent and decision making.
- We saw evidence of consent forms used to obtain written consent before undertaking procedures and specifically for sharing information with outside agencies, such as the client's GP.
- The clinic monitored the process for seeking consent appropriately. The process of seeking consent was demonstrated through records. We saw consent was recorded in the client's electronic record, in line with legislation and relevant national guidance.
- Information about fees for the service provided by the clinic was transparent and available online prior to clients booking an appointment. Additional fees, were discussed prior to procedures being undertaken.

Are services caring?

Our findings

We found that this service was providing effective services in accordance with the relevant regulations.

Kindness, respect and compassion

Comment cards completed showed that the clinic treated clients with kindness, respect and compassion.

- Staff understood clients' personal, cultural, social and religious needs.
- The clinic gave clients timely support and information.
- Staff were trained to provide motivational and emotional support to clients in an aim to support them to make healthier lifestyle choices and improve their health outcomes.

Involvement in decisions about care and treatment

The travel health specialist helped clients be involved in decisions about their care and were aware of the Accessible Information Standard (a requirement to make sure that clients and their carers can access and understand the information they are given).

- Staff had tools to help them communicate with clients in a way that they could understand, for example, communication aids and easy read materials were available if required.
- The clinic could arrange for an interpreter to be on-site if a client indicated the need for one at point of booking.

Privacy and Dignity

The clinic respected clients' privacy and dignity.

- Staff recognised the importance of clients' dignity and respect, and the clinic was aware of the requirements of General Data Protection Regulations (GDPR, 2018).
- All confidential information was stored securely on computers.
- We were told clients identified themselves to front of house staff by name only. Full confirmation of client identification was completed within the treatment room.
- Clients confirmed in the comment cards completed that they were treated with respect and dignity and given privacy always whilst in the clinic.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

We found that this service was providing responsive care in accordance with the relevant regulations.

Responding to and meeting people's needs

The clinic organised and delivered to meet clients' needs. It took account of client needs and preferences.

- The facilities and premises were appropriate for the services delivered. The treatment room was on the ground floor. There were adequate toilet facilities.
- · The clinic offered flexible opening hours and appointments to meet the needs of their clients.
- Clients were also provided with a range of additional information to increase their knowledge and awareness of their health and lifestyle choices.
- The travel health specialist reported the clinic ensured that adequate time was scheduled for client assessments and for staff to complete the necessary administration work which followed.

Timely access to the service

 Delays and cancellations were minimal and managed appropriately.

• The core opening hours of the clinic are; Monday: 9:00am - 5:00pm, Wednesday: 9:00am - 5:00pm, Saturday: 9:00am - 5:00pm. Evening appointments available and consultation are by appointment only.

Listening and learning from concerns and complaints

The clinic took complaints and concerns seriously and told us that they would respond to them appropriately to improve the quality of care.

- The complaints policy and procedures were in line with recognised guidance. The travel health specialist was aware of how to handle formal and informal complaints from clients.
- Information about how to make a complaint or raise concerns was available to clients.
- The clinic learned lessons from individual concerns and complaints, and from analysis of trends. It acted as a result to improve the quality of care. The clinic told us that they had not had any complaints in the last 12 months.
- We reviewed the complaints system and noted there was an effective system in place which ensured there was a clear response with learning disseminated to staff about the complaint.
- The provider was aware of and complied with the requirements of the Duty of Candour.

Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action?)

Our findings

We found that this service was providing well-led care in accordance with the relevant regulations.

Leadership capacity and capability;

Leaders had the capacity and skills to deliver high-quality, sustainable care.

- The travel health specialist at the service had the experience, capability and integrity to deliver the service's strategy and address risks to it.
- They were knowledgeable about issues and priorities relating to the quality and future of services. They understood the challenges and were addressing them.

Vision and strategy

The provider had a clear vision and credible strategy to deliver high quality, sustainable care.

- There was a clear vision and set of values. The provider had a realistic strategy and supporting business plans to achieve priorities.
- The provider planned its services to meet the needs of their clients.
- The provider monitored progress against delivery of the strategy.

Culture

The clinic had a culture of high-quality sustainable care.

- Openness, honesty and transparency were demonstrated. The provider was aware of and had systems to ensure compliance with the requirements of the duty of candour.
- The management of the clinic was focused on achieving high standards of clinical excellence.
- There was a strong emphasis on the safety and well-being of all persons coming into the clinic.

Governance arrangements

There were clear responsibilities, roles and systems of accountability to support good governance and management.

• Structures, processes and systems to support good governance and management were clearly set out, understood and effective.

- The clinic had a number of policies and procedures in place to govern activity and these were available to all.
 All the policies and procedures we saw had been reviewed and reflected current good practice guidance.
- Systems were in place for monitoring the quality of the service and making improvements. This included having a system of key performance indicators, carrying out regular audits, carrying out risk assessments, including report writing and content, and quality checks and actively seeking feedback from clients.
- A range of meetings were held, including clinical meetings between the travel health specialist and GP clinical lead.

Managing risks, issues and performance

There were clear and effective processes for managing risks, issues and performance.

- There was an effective, process to identify, understand, monitor and address current and future risks including risks to client safety.
- Risk assessments we saw were comprehensive and had been reviewed.
- There were a variety of daily, weekly, monthly, quarterly and annual checks in place to monitor the performance of the service.
- The provider had plans in place to deal with major incidents.
- There was clear evidence of action to change practice to improve quality.

Appropriate and accurate information

The clinic acted on appropriate and accurate information.

- There were robust arrangements in line with data security standards for the availability, integrity and confidentiality of client identifiable data, records and data management systems.
- Quality and operational information was used to ensure and improve performance. Performance information was combined with the views of clients.
- Quality and sustainability were discussed in relevant meetings where issues such as safeguarding, significant events and complaints could be discussed.

Engagement with patients, the public, staff and external partners

The service encouraged and valued feedback from clients, the public and staff.

Are services well-led?

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action?)

• After treatment, clients were asked to complete a survey about the service they had received. This was constantly monitored and action was taken if feedback indicated that the quality of the service could be improved.

Continuous improvement and innovation

There were systems and processes for learning, continuous improvement and innovation.

- There was a focus on continuous learning and improvement at all levels within the clinic.
- The organisation made use of internal reviews of audits, incidents and complaints, and consistently sought ways to improve the service.