

Jenhams Clinic Ltd

Jenhams Clinic Ltd

Inspection report

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Overall summary

We carried out an announced comprehensive inspection on 20 February 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.

Jenhams Clinic provides independent travel health advice, travel and non-travel vaccinations, skin tag removal, ear irrigation and blood tests. People of all ages intending to travel abroad can seek advice regarding health risks and receive both information and necessary vaccinations and medicines. The clinic is also a registered Yellow Fever vaccination centre.

The service is provided by two nurses and a part-time nurse who specialises in skin tag removal. A GP works remotely to provide medical support to the service. The clinic staff hold Diplomas of Travel Medicine from the Royal College of Physicians and Surgeons and are members of the British Global and Travel Health Association.

The clinic is registered with the Care Quality Commission to provide the following regulated activities: Treatment of disease, disorder or injury. One of the nurses is the nominated individual who is also registered with Care Quality Commission as the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like

Summary of findings

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 feedback from 49 clients about the clinic. All replies were very positive. Comments included a great swift service, very informative and supportive, safe and hygienic environment. We also received a number of comments praising the clinic for the care their children received. Clients felt staff were friendly, knowledgeable and professional.

Our key findings were:

- Staff had the relevant skills, knowledge and experience to deliver the care and treatment offered by the service.
- The service was offered on a private, fee paying basis only.
- The clinic had good facilities, and was well equipped, to treat clients and meet their needs.
- Assessments of a client's treatment plan were thorough and followed national guidance.
- Clients received full and detailed explanations of any treatment options.
- The service had systems in place to identify, investigate and learn from incidents relating to the safety of clients and staff members.
- There were effective governance processes in place.
- There were processes in place to safeguard clients from abuse.
- There was an infection prevention and control policy; and procedures were in place to reduce the risk and spread of infection.
- The service encouraged and valued feedback from clients and staff.
- Feedback from clients was positive.
- The provider shared knowledge with the wider community through journals, attending education events and training and networking with other clinical professionals specialising in travel.

There were areas where the provider could make improvements and should:

- Consider formalising a risk assessment for the requirement of oxygen and the chemicals used for cleaning.
- Review the frequency of infection control audits.

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.

- There were systems in place for identifying, investigating and learning from incidents relating to the safety of clients and staff members.
- There were systems and processes in place to safeguard clients from abuse.
- The staffing levels were appropriate for the care and treatment provided by the clinic.
- Risk management processes were in place to manage and prevent harm.
- A fire risk assessment was carried out annually, and fire equipment was appropriately monitored and fit for use.
- The service had an infection control policy and procedures were in place to reduce the risk and spread of infection.
- Emergency medicines and equipment were easily accessible.

Are services effective?

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

- Staff had the relevant skills, knowledge and experience to deliver the care and treatment offered by the service.
- Client consent and relevant information was sought before their information was shared with other services.
- A clinical assessment and medical history was undertaken prior to recommending treatments.
- Staff demonstrated they understood the relevant consent and decision making requirements of legislation and guidance, including the Mental Capacity Act 2005 and Gillick competencies. (Gillick competence is a term used in medical law to decide whether a child (under 16 years of age) is able to consent to his or her own medical treatment.
- Staff received training appropriate to their role. We saw copies of training certificates including life support training.

Are services caring?

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

- Feedback from clients who used the service demonstrated a high level of satisfaction. Staff we spoke with were professional and friendly.
- We also saw that staff treated clients with dignity and respect.
- We were told by staff that clients were involved in decisions about their care and treatment.
- Information for clients about the services available was accessible and clearly stated the costs involved.

Are services responsive to people's needs?

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

- Clients could book appointments in person at the clinic, via the website or by telephoning direct.
- Clients said they found it easy to make an appointment.
- Clients received a personalised information in relation to their travel health. This detailed any additional health risks of travelling to their destinations, as well as the vaccination requirements.
- Longer consultations were available for families and those with complex travel or health needs.

Summary of findings

- The clinic was well equipped to treat clients and meet their needs and was accessible to those with mobility requirements.
 - Information about how to complain was available at the clinic and on their website.
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Are services well-led?

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

- The clinic had a clear vision and strategy to deliver high quality care. Staff understood the company vision and their responsibilities in relation to it.
 - There was a clear leadership structure and staff felt supported by management. The clinic had policies and procedures to govern activity.
 - The clinic encouraged a culture of openness and honesty.
 - Staff received inductions, performance reviews and received relevant training.
 - The clinic proactively sought feedback from staff and clients.
 - The clinic reflected on clinical actions taken and where necessary reviewed policies and procedures to ensure that clients received an improved service.
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Jenhams Clinic Ltd

Detailed findings

Background to this inspection

We carried out an announced comprehensive inspection of Jenhams Clinic Ltd on 20 February 2018. Jenhams Clinic provides independent travel health advice, travel and non-travel vaccinations, skin tag removal, ear irrigation and blood tests. People of all ages intending to travel abroad can seek advice regarding health risks and receive both information and necessary vaccinations and medicines. The clinic is also a registered Yellow Fever vaccination centre.

The clinic is run from 45 South Street, Dorking, Surrey, RH4 2JX.

Opening times are

Monday 9am-5.30pm

Tuesday 9.30am-5.30pm

Wednesday Closed

Thursday 9am-5.30pm

Friday 9.30am-4pm

Saturday 9am-1pm

The clinic is located in a converted building in the centre of Dorking. The building has wheelchair access and two consulting rooms, one accessible from the ground floor

and another up a small flight of steps. Where required the majority of treatments can be performed in the ground floor room if the client is unable to access the first floor room.

The inspection team was led by a CQC inspector and included a nurse specialist advisor.

Prior to the inspection we gathered and reviewed information from the provider. There was no information of concern. During our visit we:

- Spoke with the receptionist and both the travel nurses one of whom is the registered manager.
- Reviewed comment cards where clients shared their views and experiences of the service.
- Looked at documents the clinic used to carry out services, including policies and procedures.

To get to the heart of patients' 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 service was providing safe care in accordance with the relevant regulations.

Safety systems and processes

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

- The provider had policies in place for safeguarding children and vulnerable adults. Nursing staff had received training to an appropriate level in relation to protecting children and vulnerable adults and there was a nominated safeguarding lead within the service. There was clear contact information accessible to staff for local child and adult support teams. Staff demonstrated an understanding of how to identify and raise a safeguarding concern.
- We saw evidence that recruitment checks had been carried out prior to employment including proof of identity and a full employment history. The clinic carried out staff checks, including checks of professional registration where relevant. Disclosure and Barring Service (DBS) checks were undertaken. (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 a system to manage infection prevention and control. There was appropriate guidance and equipment available for the prevention and control of infection. All staff had received up-to-date training in infection control. The registered manager was the infection control lead. However, we noted there was no Control of Substances Hazardous to Health (COSHH) assessments for any cleaning chemicals used. (COSHH is the law that requires employers to control substances that are hazardous to health, so as to prevent ill health).
- The clinic ensured that facilities and equipment were safe and that equipment was maintained according to manufacturers' instructions. Electrical and clinical equipment had been tested within the past year.
- There were systems for safely managing healthcare waste. Clinical waste bins within clinic rooms had been clearly labelled. Sharps containers were available in each clinic room. These were labelled, dated and signed as required.

Risks to patients

- There were systems to assess, monitor and manage risks to client safety. With the exception of a risk assessment for oxygen.
- There was an effective induction system for staff tailored to their role.
- Staff had received basic life support training and anaphylaxis training which was annually updated.
- The clinic had access to although not responsibility for a defibrillator held outside of the clinic.
- The clinic ensured that adrenaline, used in the event of anaphylaxis (a serious allergic reaction that is rapid in onset and can be fatal if not responded to) was readily available.
- All nurses had appropriate professional indemnity cover in place.

Information to deliver safe care and treatment

- Individual care records were written and managed in a way that kept clients safe. The care records we saw showed that information needed to deliver safe care and treatment was available to relevant staff in an accessible way. Paper records were stored in a locked filing cabinet in the treatment room.
- Clients accessing the service were asked to complete a travel risk assessment form prior to their consultation. This assessment included information about their travel plans including the country to be visited and the length of stay. In addition the form had a section to record personal medical history and included questions relating to medical conditions, vaccination history, regular medicines, and allergies.
- The clinic had systems for sharing information with staff and the clients GP to enable them to know what treatment and advice had been provided. The travel risk assessment form asked for the clients consent to send vaccination details to the clients GP.

Safe and appropriate use of medicines

- Medicines were stored securely in a treatment room. Vaccines were stored in a dedicated vaccine fridge which was monitored to ensure it maintained the correct temperature range for safe storage. Emergency medicines were readily available and in date.
- Some medicines and vaccines were supplied or administered to clients following a Patient Group Direction (PGD). PGDs were in date and signed by the

Are services safe?

authors, including a doctor who supported the service. Nurses working under the PGDs had signed to show they had read them and we saw during the inspection that these PGDs were referred to closely during consultations with clients.

- One of the nurses at the clinic was an independent prescriber and prescribed medicines or vaccines to be supplied through a Patient Specific Direction (PSD) where appropriate.

Track record on safety

The clinic had a good safety record.

- There were comprehensive policies and procedures in relation to safety issues.
- The clinic monitored and reviewed activity. This helped it to understand risks and gave a clear, accurate and current picture that led to safety improvements.
- The clinic had arrangements in place to receive and comply with patient safety alerts, recalls and rapid response reports issued through the Medicines and Healthcare products Regulatory Authority (MHRA).
- The building's five yearly electrical checks were up to date. All electrical and clinical equipment was checked and calibrated to ensure it was safe to use and was in good working order. For example the vaccine refrigerators had been tested and serviced in February 2018.

Lessons learned and improvements made

The clinic learned and made improvements when things went wrong.

- There was a system for recording and acting on significant events and incidents. Staff understood their duty to raise concerns and report incidents and near misses.
- There were adequate systems for reviewing and investigating when things went wrong. The clinic learned and shared lessons, identified themes and took action to improve safety in the clinic. For example, the clinic told us how they had reviewed their practice after several call from parents concerned about reaction from a vaccination given. The reactions were normal and had not presented a concern. However, the clinic checked that correct vaccination procedures were followed and audited the way in which post vaccination advice was given.
- There was a system for receiving and acting on safety alerts. The clinic learned from external safety events as well as patient and medicine safety alerts.

Are services effective?

(for example, treatment is effective)

Our findings

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

Effective needs assessment, care and treatment

The clinic had systems to keep the nurses up to date with current evidence-based practice. We saw that the nurses assessed needs and delivered treatment in line with current legislation, standards and best practice guidelines such as the National Travel Health Network and Centre (NaTHNaC) travel guidance.

Clients' needs were fully assessed. A travel risk assessment form was completed for each person prior to administration or supply of any medicines or vaccines. This included information regarding previous medical history, any allergies and whether the client was taking any medicines. This information was used to determine the most appropriate course of treatment.

We saw no evidence of discrimination when making treatment decisions.

The nurses advised clients what to do if they experienced side effects from the medicines and vaccines. Clients were also issued with additional health information when travelling.

Monitoring care and treatment

There was evidence of quality improvement initiatives including clinical audit. The provider had undertaken audits of the care and treatment interventions provided to clients. This included a Yellow Fever audit, an adverse reaction audit and a client satisfaction audit.

Effective staffing

Staff had the skills, knowledge and experience required to carry out their roles. For example, staff had received specific training and updates in travel health and could demonstrate how they stayed up to date. Staff told us they had access to the training they required.

- Staff whose role included provision of Yellow Fever immunisation had the necessary specific training to do so.
- All the staff providing clinical services were registered nurses, who had received specialist training in travel health. We saw records and qualifications to confirm

this. This included both nurses having a diploma of Travel Medicine from the Royal College of Physicians and Surgeons, immunisation training and specialist travel vaccination training.

- All nurses were supported to undertake revalidation. Revalidation is the process that all nurses and midwives in the UK need to follow to maintain their registration with the Nursing and Midwifery Council (NMC), which allows them to practise.
- There was an induction programme for newly appointed staff. This included supervised practice and competency assessments.
- All staff were up to date with their mandatory training. This included basic life support, fire safety, infection control, safeguarding vulnerable adults and children and information governance.

Coordinating patient care and information sharing

The provider shared relevant information with other services. For example, when client consent was given the clinic informed the clients GP when vaccinations have been administered, in order to update medical records to facilitate continuity of care.

Outside of client consultation the service worked with other travel and health organisations to ensure they had the most up to date information.

Supporting patients to live healthier lives

Clients were assessed and given individually tailored advice. For example, the clinic provided information on a number of infectious diseases, travellers' health guides and an individually travel advice provided to each clients following consultation.

The clinic stocked a wide range of travel health related items, such as mosquito nets and repellents, water purification tablets and first aid kits. Staff also advised on and supplied more specialist medical kits and supplies for expeditions to remote locations.

Consent to care and treatment

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

- Staff understood the relevant consent and decision-making requirements of legislation and

Are services effective?

(for example, treatment is effective)

guidance, including the Mental Capacity Act 2005. When providing care and treatment for children and young people, staff carried out assessments of capacity to consent in line with relevant guidance.

- Written and verbal information was given to clients using the service. This included information on medicines and vaccines including risks and benefits prior to administration. Travel risk assessment forms included a section for clients to sign their consent.

Are services caring?

Our findings

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

Kindness, respect and compassion

- Staff treated clients with respect and professionalism. We observed staff to be respectful and courteous to clients, treating them with kindness and compassion.
- Staff understood clients' personal, cultural, social and religious needs. The clinic gave clients timely support and information.
- We received 49 Care Quality Commission comment cards. All of these were positive about the service experienced. Clients described the service as being excellent, efficient, respectful, and of a high standard. Comments about staff were also positive feedback and remarked on all staff being courteous, professional and helpful.

Involvement in decisions about care and treatment

- Staff helped clients be involved in decisions about their care. Treatment was fully explained, including the cost of treatment, and clients reported that appointments were available quickly and that they were given good advice.
- Written and verbal information and advice was given to clients about health treatments available to them.
- Information leaflets were available to clients.

Privacy and Dignity

- Staff recognised the importance of client's dignity and respect. Consultations took place behind closed doors and staff knocked when they needed to enter. We noted that conversations in consultation rooms could not be overheard.
- Clients were collected from the waiting area by the nurses and were kept informed should there be a delay to their appointment.
- CQC comment cards supported the view that the service treated clients with respect.
- All client records were kept in secured filing cabinets within an alarmed building. Staff complied with information governance and clinical staff gave medical information to clients only.

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 services to meet clients' needs.

- The facilities and premises were appropriate for the services delivered. The clinic had a waiting area and two clinical rooms, one of which could be accessed by clients with limited mobility. There were also toilet facilities, however, these were accessed via a small flight of stairs.
- Equipment and materials needed for consultation, assessment and treatment were available at the time of clients attending for their appointments.
- Information was available on the service website, informing people about the services available and the costs involved as well as providing a booking portal for appointments.
- The service provided care for both adults and children. People were able to drop into the service for advice and information.
- The clinic was a registered Yellow Fever centre and complied with the code of practice. All staff had attended training for the administration of Yellow Fever.

Timely access to the service

- The service was open Monday and Thursday 9am to 5.30pm, Tuesday 9.30am to 5.30pm, Friday 9.30am to 4pm and Saturday 9am to 1pm. The website contained details of current opening times. We also noted the clinic provided some flexibility around opening times and could arrange consultation earlier or later in the day if a person was unable to access the service during the normal opening hours. Walk in appointments were also available.
- Clients who needed a course of injections were given future appointments to suit the client.
- Staff informed us they had given a talk at a local school for parents and students attending an overseas school trip.
- Clients were able to book appointments over the telephone, in person or from a portal on the providers website.

Listening and learning from concerns and complaints

There was a complaints system in place. The service had a complaints policy which detailed how and the time frame in which the service responded to complaints. The policy included details of other agencies to contact if a client was not satisfied with the outcome of the service's investigation into their complaints.

No complaints had been received by the clinic in the past two years. The clinic sought client feedback via an internal client survey. We noted that results had been recorded which were all positive. However, there had been one comment about the temperature in the waiting area. In response to this the clinic had installed air conditioning.

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;

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

- There was a registered manager in post who understood their responsibilities.
- The nursing team had the experience, capacity and skills to deliver the clinic strategy and address risks to it.
- Staff were knowledgeable about issues and priorities relating to the quality and future of services offered. For example, staff were aware of national vaccine shortages and what action to take regarding this.
- There were effective processes for planning the future of the clinic.

Vision and strategy

The provider had a clear vision to provide a high quality service that put caring and client safety at its heart. The provider was opening a further travel clinic in the Claygate area.

Culture

Candour, openness, honesty and transparency and challenges to poor practice were evident.

- Staff we spoke with were proud to work in the clinic and said they felt respected, supported and valued.
- The clinic focused on the needs of clients and ensured that staff had the correct knowledge and training to do this.
- Staff were encouraged to attend training, seminars and speak with other colleagues in the travel profession.
- The provider had a whistleblowing policy and staff we spoke with were aware of this policy.

Governance arrangements

Staff were clear on their roles and accountabilities including safeguarding and infection prevention and control.

The provider had established proper policies, procedures to ensure safety and assured themselves that they were operating as intended. Policies we reviewed were all relevant and up to date. The provider was the first point of contact for staff regarding any issues.

Managing risks, issues and performance

There was process to identify, understand, monitor and address current and future risks including risks to client safety. We noted that steps were taken in response to any issues found.

- The provider and staff had oversight of MHRA alerts, incidents, and complaints.
- Clinical audit had a positive impact on quality of care and outcomes for clients. There was clear evidence of action to change practice to improve quality. For example, the provider had worked with a local school who was organising an overseas trip. The clinic had conducted an audit after several calls from parents concerned about reaction from a vaccination given. The reactions were normal and had not presented a concern. However, the clinic had conducted an audit on its techniques in giving vaccines and improved how information in relation to possible reactions was given.

Appropriate and accurate information

- The clinic used information technology systems to monitor and improve the quality of care.
- Client records were securely stored on the information technology system only accessible via staff log-in.

Engagement with patients, the public, staff and external partners

- The clinic involved clients, staff and external partners to promote and support high-quality sustainable services.
- Clients were encouraged to provide feedback. The clinic had received numerous compliments and positive feedback in relation to the caring attitude and knowledge of staff members.
- Nurses regularly engaged with external partners, including neighbouring GP surgeries, other travel clinics and networked with clinicians within the travel industry.

Continuous improvement and innovation

Are services well-led?

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

- Staff were encouraged to continually develop and improve their knowledge. There was access to national resources and up to date travel guidance to ensure that advice and treatment given to clients who use the service was up to date.
- There was evidence of improvement to the service clients received as a result of feedback.
- The nurses supported local schools and gave advice in relation to overseas school trips and health advice.