

MASTA Travel Clinic – Richmond

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?

Good 

Are services well-led?

Good 

Overall summary

This service is rated as Good overall. (Previous inspection 9 October 2018.)

The key questions are rated as:

Are services safe? – Good

Are services effective? – Good

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – Good

We carried out an announced comprehensive inspection at MASTA (Medical Advisory Service for Travellers Abroad) Travel Clinic - Richmond on 26 November 2019 as part of our current inspection programme. We previously inspected this service on 9 October 2018 using our previous methodology, where we did not apply ratings.

MASTA Travel Clinic - Richmond provides travel health services to both adults and children travelling for business or leisure. The service is a designated yellow fever vaccination centre. Since October 2019 the service has also provided a yearly flu vaccination service.

The service also provides certain corporate healthcare services which are not regulated by CQC. 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. MASTA Travel Clinic – Richmond, services are provided to patients under arrangements made by their employer. These types of arrangements are exempt by law from CQC regulation. Therefore, at this service, we were only able to inspect the services which are not arranged for patients by their employers.

Services are available to any fee-paying patient. All services incur a consultation charge, and treatment and intervention charges vary, depending on the service provided. Information from the service indicates that, at the time of the inspection, an average of eight patients per day are seen.

The lead nurse based at the site 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 received 13 completed CQC comment cards, all of which were fully positive about the service. Patients commented that the nurse at the service was caring, informative and respectful. Other comments stated the service was efficient, the environment was clean and comfortable, and that the nurse worked well with child patients.

Our key findings were:

- The service provided care in a way that kept patients safe and protected them from avoidable harm.
- There was an open and transparent approach to safety and a system in place for recording, reporting and learning from significant events and incidents. The service had clear systems to manage risk so that safety incidents were less likely to happen. When incidents happened, the service learned from them and reviewed their processes to implement improvements.
- There were clearly defined and embedded systems, processes and practices to keep people safe and safeguarded from abuse, and for identifying and mitigating risks of health and safety.
- Patients received effective care and treatment that met their needs.
- The service organised and delivered services to meet patients' needs. Patients said that they could access care and treatment in a timely way.
- The service reviewed the effectiveness and appropriateness of the care it provided. It ensured that care and treatment was delivered according to evidence-based guidelines and best practice.
- Patients told us that staff treated them with kindness and respect and that they felt involved in discussions about their options.
- Patient satisfaction with the service was high.
- Staff had the appropriate skills, knowledge and experience to deliver effective care and treatment.
- The service took complaints and concerns seriously and responded to them appropriately to improve the quality of care.

Dr Rosie Benneyworth BM BS BMedSci MRCGP Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

The inspection was led by a CQC inspector who had access to advice from a specialist advisor.

Background to MASTA Travel Clinic - Richmond

MASTA (Medical Advisory Service for Travellers Abroad) Travel Clinic – Richmond is one of a number of travel clinics run by MASTA Limited and provides travel health services including vaccinations, medicines and advice on travel related issues to both adults and children travelling for business or leisure. The service is a designated yellow fever vaccination centre.

Services are available to any fee-paying patient. Pre-booked appointments are available and a walk-in service is also provided.

The service is based in a Flight Centre travel agent premises in the main high street of Richmond, South West London. The service operates from a single consultation room, with chairs outside the room for patients to sit whilst waiting for their consultation.

The service staff consists of one nurse who is the service's registered manager. The nurse is responsible for all clinical and administrative functions at the site. Direct support and managerial oversight is provided by a MASTA Limited regional manager, and there is an existing corporate management and governance structure.

The service has been open for four days per week since October 2019. Prior to this, the service was open for two days a week. Services are available at the following times:

- Tuesdays – 9.30am to 5.30pm;
- Wednesdays – 9.30am to 5.30pm;
- Thursdays – 10.00am to 6pm;
- Fridays – 10am to 6pm;
- One Saturday per month – 10am to 6pm (the service is closed on Friday these weeks).

The service is fully accessible for wheelchair users and is situated on the ground floor of the building. The service is situated approximately 100 metres from an overground rail and tube station, and approximately 150 metres from a paid car park.

The service website address is: www.masta-travel-health.com

How we inspected this service

We reviewed information about the service in advance of our inspection visit. This included:

- Data and other information we held about the service.
- Information relating to other MASTA Limited locations, for example policies and governance.
- Material we requested and received directly from the service ahead of the inspection.
- Information available on the service's website.
- Patient feedback and reviews accessible on various websites.

During the inspection visit we undertook a range of approaches. This included interviewing clinical and non-clinical staff, reviewing feedback from patients who had used the service, speaking with patients, reviewing documents, examining electronic systems, and assessing the building and equipment.

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?

We rated safe as Good because:

MASTA Travel Clinic - Richmond demonstrated they provided services in a way that consistently promoted and ensured patient safety.

Safety systems and processes

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

- The service carried out safety risk assessments and had appropriate related safety policies. These were regularly reviewed and updated with appropriate version control and governance. Staff received safety information and updates as part of their ongoing training and development.
- The service had an appropriate process for receiving, managing and responding to safety alerts, including those relating to patients, medicines and devices. Alerts were received, managed and actioned appropriately with evidence of effective oversight and management. We saw evidence of the 'e-clinic' system the service used to receive, manage and act upon alerts. The service received and acted upon alerts and information from agencies including the Medicines and Healthcare products Regulatory Authority (MHRA), Public Health England (PHE), and the Foreign and Commonwealth Office (FCO). We saw detailed information relating to overseas territories alerts which were managed appropriately.
- The service had systems to safeguard children and vulnerable adults from abuse. There were detailed policies and procedures which had been regularly reviewed, and these were accessible to all staff. We saw that safeguarding incidents including lessons learnt and actions were discussed by staff. Processes were managed at a corporate level with appropriate governance and oversight.
- All staff received up-to-date safeguarding and safety training appropriate to their role. The nurse had received mandatory safeguarding training and updates, most recently in July 2019. The nurse was trained to safeguarding level three.
- Staff took appropriate steps to protect patients from abuse, neglect, harassment, discrimination and breaches of their dignity and respect.
- The service had systems for managing child appointments, including identity verification and checking for parental authority. The service also carried

out checks to ensure those accompanying children had the legal authority to consent to treatment. Measures included requesting letters from parents if brought by another party, for example a nanny. Staff told us they would contact parents to check if they had any concerns.

- The service carried out staff checks at the time of recruitment and on an ongoing basis where appropriate. Disclosure and Barring Service (DBS) checks were undertaken for all staff. (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 (IPC). There was a detailed policy, and associated daily and weekly cleaning schedules and checklists were being used with actions documented. Staff were clear on their responsibilities to manage IPC. The service was visibly clean and tidy. There were appropriate handwashing facilities.
- Arrangements to manage the risks associated with legionella were in place (legionella is a term for a particular bacterium which can contaminate water systems in buildings). There were sufficient systems for safely managing healthcare waste.
- The service ensured that facilities and equipment were safe and that equipment was maintained according to manufacturers' instructions.

Risks to patients

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

- Staff understood their responsibilities to manage emergencies and to recognise those in need of urgent medical attention. They knew how to identify and manage patients with severe infections, for example sepsis.
- Staff demonstrated appropriate awareness of managing localised reactions to treatments.
- Staff knew what to do in a medical emergency and had completed training in emergency resuscitation and basic life support annually.
- The service operated an on-call system where staff could access guidance relating to any emergencies from a designated senior clinician.

Are services safe?

- Emergency medicines and oxygen were situated on-site, and there were two working defibrillators available within 100 metres of the site. These were regularly checked and maintained by the appropriate personnel and we saw records to support this. Staff had been trained to use defibrillators.
- Service policy included asking patients to wait after their vaccination appointment to ensure any adverse reactions could be identified and managed safely. Staff gave detailed examples of where they had managed adverse reactions.
- Appropriate insurance schedules were in place to cover all potential liabilities, including professional indemnity arrangements.

Information to deliver safe care and treatment

Staff had the information they needed to deliver safe care and treatment to patients.

- Individual patient records were written and managed in a way that kept patients safe. The care records we saw showed that information needed to deliver safe care and treatment was appropriately available and accessible for staff.
- The service had systems for sharing information with staff and other agencies, including patients' NHS GPs and public health services to enable them to deliver safe care and treatment.
- Staff requested patients bring information relating to previous vaccinations given.
- There was a system to retain medical records in line with Department of Health and Social Care (DHSC) guidance in the event that they cease trading.

Safe and appropriate use of medicines

The service had reliable systems for appropriate and safe handling of medicines.

- The systems and arrangements for managing medicines minimised risks to patients.
- Staff prescribed, administered or supplied medicines to patients and gave advice on medicines in line with legal requirements and current national guidance. There were sufficient processes in place for checking medicines, and staff kept accurate records of these.
- There were appropriate measures for verifying the identity of patients prior to providing medicines, including children and accompanying adults. This

included requesting letters from parents if brought by another party, for example a nanny. Staff told us they would contact parents to check if they had any concerns.

Track record on safety and incidents

The service had a good safety record.

- The service had devised and was using comprehensive risk assessments in relation to safety issues.
- The service monitored and reviewed activity, for example reviewing appointment outcomes. This helped with the identification and management of risks, and provision of a clear, accurate and current assessment leading to safety improvements.

Lessons learned and improvements made

The service learned and made improvements when things went wrong.

- There was a system for recording and acting on significant events. Staff understood their duty to raise concerns and report incidents and near misses and were supported by managers when doing so.
- There were appropriate systems for reviewing and investigating when things went wrong. The service learned and shared lessons, identified themes and took action to improve safety in the service. The service had experienced one significant event in the last 12 months, relating to medicine expiry dates. We saw evidence the service had managed the outcomes of this appropriately. The service received information relating to significant events at other MASTA Limited sites including outcomes, actions and learning points.
- The service was aware of and complied with the requirements of the Duty of Candour. The service encouraged a culture of openness and honesty, and had systems for appropriately managing notifiable safety incidents.
- The service acted on and learned from external safety events as well as patient and medicine safety alerts. The service had an effective and consistent approach to share alerts with staff.
- The service had implemented a plan of improvements following feedback received following the previous CQC inspection in October 2018. This included installing new

Are services safe?

heating and cooling equipment for the clinic room; increasing the range of vaccinations available; and improving the recording and sharing of patient information.

Are services effective?

We rated effective as Good because:

MASTA Travel Clinic - Richmond provided effective care that met with current evidence-based guidance and standards. There was a system for completing audits, collecting feedback and evidence of accurate, safe recording of information.

Effective needs assessment, care and treatment

The service had systems to keep clinicians up to date with current evidence-based practice. We saw evidence that clinicians assessed needs and delivered care and treatment in line with current legislation, standards and guidance which was relevant to their service.

- The service assessed needs and delivered care in line with relevant and current evidence-based guidance and standards, including from the National Travel Health Network and Centre (NaTHNaC), a service commissioned by Public Health England.
- A patient's initial consultation involved a detailed medical history being taken and details of their travel itinerary, including country and destination, time of year of travel, length of travel, type of accommodation, and any activities they intended to undertake (such as extreme sports or contact with animals).
- This information was entered into the provider's computer system, which produced a personalised report which included a comprehensive individualised travel risk assessment, health information related to patients' destinations, and a written immunisation plan tailored to their specific travel needs. The health brief also provided advice on how to manage potential health hazards and some illnesses that were not covered by vaccinations. This was created and fully discussed during the consultation and a copy was then emailed to the patient. If the patient did not have an email address printed copies could be provided.
- We saw no evidence of discrimination when making care and treatment decisions. The service's patient population was multi-ethnic in nature and the service provided evidence of meeting individuals' needs.
- The service had access to detailed clinical guidelines relating to vaccinations for use and discussion with patients during consultations. This was available in electronic and hard-copy form.

Monitoring care and treatment

The service was actively involved in quality improvement activity.

- The service conducted a range of audits to ensure diagnosis and treatment were in line with national guidelines and service protocol. For example, the service had completed a yellow fever vaccination audit for patients aged over 60 in the last 12 months.
- Patient satisfaction and infection control audits had been undertaken in addition to clinical audits in the last 12 months.

Effective staffing

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

- Records indicated that all staff were appropriately qualified. The service had a comprehensive induction programme for any staff joining the service.
- The nurse was registered with the Nursing and Midwifery Council (NMC) and was up to date with revalidation.
- The service understood the learning needs of staff and provided protected time and training to meet them. Records of skills, qualifications and training were sufficiently maintained and were up-to-date. The service could demonstrate that staff had undertaken role-specific training and relevant updates.
- The nurse had received an appraisal during the last 12 months.
- We saw evidence of an appropriate approach to manage staff if performance was poor.

Coordinating patient care and information sharing

Staff worked together, and worked well with other organisations, to deliver effective care and treatment.

- The provider did not directly inform patients' GPs of the treatment provided. Patients were given a copy of their vaccination report, which they could share with their GP if they wished. Staff told us that if they had reason to be concerned about a patient's suitability for vaccination, they would refer the patient to their GP, rather than providing treatment.
- Before providing treatment, staff requested knowledge of the patient's health, any relevant test results and their medicines history. We saw examples of patients being signposted to more suitable sources of treatment where this information was not available to ensure safe care and treatment.

Are services effective?

- Consultation and vaccine fees were displayed in the consultation room and on the provider's website. Patients were advised which vaccines were available free of charge from their own GP practice, including follow-up vaccinations.

Supporting patients to live healthier lives

Staff were consistent and proactive in empowering patients, and supporting them to manage their own health and maximise their independence.

- Staff were consistent and proactive in helping patients to sustain and improve their health while travelling, including by encouraging them to monitor and manage their health.
- The service provided travel health fact sheets and accompanying information with a range of advice to travellers on a full range of subjects including altitude, insect bites, food and water hygiene, and exposure to the sun.

Consent to care and treatment

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

- Staff demonstrated that they understood the requirements of legislation and guidance when considering consent and decision making.
- Staff supported patients to make decisions by providing transparent and clear information about treatment options and the risks and benefits of these, as well as costs of treatments and services.
- Staff supported patients to make decisions. Where appropriate, they assessed and recorded a patient's mental capacity to make a decision.
- Staff demonstrated understanding of the concept of Gillick competence in respect of the care and treatment of children under 16.

Are services caring?

We rated caring as Good because:

MASTA Travel Clinic - Richmond demonstrated that they ensured patients were involved in decisions about their treatment, that their needs were respected, and that services were provided in ways that were caring and supportive.

Kindness, respect and compassion

Staff treated patients with kindness, respect and compassion.

- Feedback from patients was positive about the way staff treated them. All 13 patient comment cards we received provided positive feedback (with the other two providing mixed feedback) in relation to how patients felt they were treated.
- The nurse could demonstrate positive feedback received as part of the organisation's 'customer delight' corporate approach to customer services.
- The nurse gave examples of positive engagement with patients in line with their interests and specific needs.
- Staff demonstrated they understood patients' personal, cultural, social and religious needs. They displayed an understanding and non-judgmental attitude to all patients.
- The service gave patients timely, comprehensive support and information.

Involvement in decisions about care and treatment

Staff helped patients to be involved in decisions about care and treatment.

- Interpretation services were available for patients who did not have English as a first language. Patients were informed about these services where appropriate.
- Staff communicated with patients in a way that they could understand. Staff knew how to access communication aids and easy read materials where needed.
- Staff helped patients be involved in decisions about their care and were aware of the Accessible Information Standard (a requirement to make sure that patients can access and understand the information they are given).
- Patients told us through comment cards, that they felt listened to and supported by staff and had sufficient time during consultations to make an informed decision about the choice of treatment available to them.
- The service provided clear and transparent pricing and fees information relating to services offered.

Privacy and Dignity

The service respected patients' privacy and dignity.

- Staff demonstrated they recognised the importance of people's dignity and respect.
- Patients commented that all staff were respectful and ensured their dignity was maintained at all times.
- Staff had completed training in Equality and Diversity.
- The consultation room door clearly displayed an 'engaged' sign when a consultation was in progress, and conversations could not be overheard outside of the consultation room.
- All patient records were electronic and held securely. Staff complied with information governance requirements and gave medical information only to patients.

Are services responsive to people's needs?

We rated responsive as Good because:

MASTA Travel Clinic - Richmond ensured they responded to patients' needs for treatment and that they were able to deliver those services.

Responding to and meeting people's needs

The service organised and delivered services to meet patients' needs. It took account of patient needs and preferences.

- The service offered evening and some weekend appointments.
- The facilities and premises were appropriate for the services delivered.
- Interpreter services were available for those patients who did not have English as a first language.
- The service was a designated yellow fever vaccination centre; patients could receive all their required vaccinations from the same service location.
- After consultation, patients received a personalised travel health report, which detailed any additional health risks of travelling to their destinations as well as the vaccination requirements. The travel health report also included general tips and health advice for travellers and identified the prevalence of diseases in different territories.
- The provider had oversight of the national and worldwide supply of vaccinations and monitored where demand may exceed supply. There were contingencies to support service provision to patients in those circumstances.
- Reasonable adjustments had been made so that people in vulnerable circumstances could access and use services on an equal basis to others.
- The service was able to work flexible including rearranging appointments to take into account patient needs and preferences, for example when seeing a large family group together.

Timely access to the service

Patients were able to access care and treatment from the service within an appropriate timescale for their needs.

- Same day appointments were available on the days that the clinic operated. Patients could attend the provider's other locations in urgent circumstances.
- Waiting times, delays and cancellations were minimal and managed appropriately.
- Patient feedback indicated that patients were satisfied with how they could access care and treatment.

Listening and learning from concerns and complaints

The service took complaints and concerns seriously and responded to them appropriately to improve the quality of care.

- The service had received no complaints in the last two years.
- Information about how to make a complaint or raise concerns was on the service's website and from staff at the service.
- Staff treated patients who made complaints with concern and compassion.
- The service informed patients of any further action that may be available to them should they not be satisfied with the response to their complaint.
- The service demonstrated they would be able to learn from individual concerns, complaints and from analysis of any trends.
- Information was available about organisations patients could contact if they were not satisfied with the way the service dealt with their concerns. There were corporate systems and processes to investigate any complaints or feedback received; to identify trends; to discuss outcomes with staff; and implement learning to improve the service.

Are services well-led?

We rated well-led as Good because:

MASTA Travel Clinic - Richmond provided services which were well led and well organised, within a culture that was keen to promote high quality care in keeping with their systems and procedures.

Leadership capacity and capability

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

- MASTA Limited management staff and the nurse working at the site were knowledgeable about issues and priorities relating to the quality and future of services. They understood the challenges and were addressing them.
- The MASTA Limited head office was located in Leeds. Staff based at the head office were responsible for management and governance functions. We did not visit the head office as part of this inspection.
- Staff we spoke with informed us that leaders and managers at all levels were accessible and provided support as needed. They worked closely with staff to ensure they prioritised compassionate and inclusive leadership.

Vision and strategy

The service had a clear vision and credible strategy to deliver high quality care and promote good outcomes for patients.

- The service had a clear vision and strategy to deliver high quality care for patients. The MASTA Limited company values followed by all employees were known as I-CARE (Integrity, Customer first, Accountability, Respect and Excellence).
- Staff were aware of and understood the vision, values and strategy and their role in achieving them.
- MASTA Limited had appropriate business plans for all its services.
- Progress was monitored by head office staff against the delivery of the strategy.

Culture

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

- Staff we spoke with felt respected, supported and valued by the organisation's managers and leaders.

- The service focused on the needs of patients.
- Service staff and the organisation's managers acted upon behaviour and performance inconsistent with the vision and values.
- We saw that the service was open, honest and transparent in response to incidents and complaints. MASTA Limited was aware of and had systems to ensure compliance with the requirements of the duty of candour.
- Staff told us they could raise concerns and were encouraged to do so. They had confidence that these would be addressed suitably and with confidentiality where appropriate.
- There was a strong emphasis on the safety and well-being of all staff. We saw evidence of positive relationships between staff and managers.

Governance arrangements

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

- MASTA Limited had an overarching governance framework. This included oversight of safety alerts, incidents and complaints. The framework encompassed all MASTA Limited travel health clinics to ensure a consistent and corporate approach, along with a culture of shared learning.
- Structures, processes and systems to support good governance and management were clearly set out, understood and effective. This was being strengthened, with two regional area managers in post to implement a six-monthly plan of support, oversight and governance. This included clinic visits, telephone reviews of clinics, management meetings and information sharing.
- Policies and procedures were developed and reviewed at an organisational level. These were cascaded to and implemented within to the network of MASTA Limited clinics. Staff had access to these and used them to support service delivery.
- There was suitable oversight for emergency medicines and equipment. There was appropriate consideration for how to deal with medical emergencies.
- The provider had an operational implementation plan which covered a range of areas. This included health and safety, infection prevention and control, incidents, and complaints.

Are services well-led?

- A range of meetings were held every quarter, which included discussion of incidents and complaints. Conference calls were arranged if changes or incidents requiring discussion or action occurred between meetings.

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 patient safety. MASTA Limited meetings were held every quarter at which risks, incidents and complaints were discussed.
- MASTA Limited had processes to manage current and future performance of services both locally and as an organisation. Regular meetings were held to discuss performance.
- There were arrangements in place for identifying, recording and managing risk both locally and across the wider organisation. For example, staff undertook a variety of weekly and monthly checks to monitor the safety of the clinic.
- There were suitable processes to manage current and future performance of the service. Staff performance could be demonstrated through audits of their consultations.
- The provider used information technology (IT) systems to monitor and improve the quality of care. For example, each vaccine name and batch number were automatically available on the IT system and were populated by the system onto each patient record once it had been administered.
- Data and notifications were submitted to external organisations as required. For example, an annual audit was undertaken as part of the yellow fever vaccine licence.
- MASTA Limited had oversight of the national and worldwide supply of vaccinations and monitored where demand may exceed supply. There were arrangements to support service provision in these circumstances.
- There were plans in place to respond to and manage major incidents. There was a corporate business continuity plan which included contingencies to manage any disruptions to the service.

- Appointments for each MASTA Limited clinic were held on the intranet, so customer services staff could contact patients and rearrange appointments if necessary.

Appropriate and accurate information

The service acted on appropriate and accurate information.

- There were comprehensive arrangements in line with data security standards for the availability, integrity and confidentiality of patient identifiable data, records and data management systems. For example, the provider was registered with the Information Commissioner's Office (ICO) and had its own information governance policies. All staff had signed a confidentiality agreement as part of their employment contract.
- Relevant information was used appropriately to monitor and improve performance. This included the views of patients. The information used to monitor performance and the delivery of quality care was accurate and sufficiently detailed.
- The service used performance information which was reported and monitored. Any areas of concern were discussed with staff, who were held to account as appropriate.
- The service submitted data or notifications to external organisations as required.

Engagement with patients, the public, staff and external partners

The service involved patients, the public, staff and external partners to support high-quality sustainable services.

- The service encouraged and valued feedback from patients and staff. After each consultation the patient was asked to complete a 'customer delight' satisfaction survey. Results were collated and analysed to identify any themes or areas for improvement.
- Feedback from service staff was gathered via meetings and informal discussions. Staff told us they felt engaged and listened to.
- The service was transparent, collaborative and open about performance.

Continuous improvement and innovation

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

Are services well-led?

- There was a focus on continuous learning and improvement.
- The service made use of internal and external reviews of incidents and complaints. Learning was shared and used to make improvements.
- Leaders and managers encouraged staff to take time to review individual and team objectives, processes and performance.
- MASTA Limited used reviews of incidents and complaints to improve processes where necessary and share learning across all sites.
- MASTA Limited was continually working to improve and innovate. For example, a new medical database was in the testing stage at the time of our inspection. The aim of this was to improve the capture of reporting and information.