

The Clinic Rooms

Inspection report

28 High Street
Standish
Wigan
WN6 0HL
Tel:

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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

Ratings

Overall rating for this location	Good	
Are services safe?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Good	

Overall summary

This service is rated as Good overall.

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 the Clinic Rooms, also known as Clear Ears, on 25 January 2023. The service was registered with the Care Quality Commission (CQC) in May 2022. We carried out this first rated inspection as part of our regulatory functions. The inspection was undertaken to check whether the service was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Our key findings were:

- The service had systems to assess, monitor and manage risks to patient safety.
- The service assessed need and delivered care in line with current legislation, standards and evidence-based guidance for ear microsuction.
- The service treated patients with kindness, respect and compassion.
- The service organised and delivered services to meet patients' needs. Patients were able to access services within an appropriate timescale.
- The way the service was led and managed promoted the delivery of high-quality, person-centred care.

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

Our inspection team

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

Background to The Clinic Rooms

The Clinic Rooms, also known as Clear Ears, is a stand-alone aural care service which specialises in cerumen (earwax) removal by micro-suction. Micro-suction is a technique for removing ear wax or debris using specialised magnification loupes (similar to the type dentists use). This allows the ear canal to be examined in detail. A very fine sterile suction device at low pressure is used to remove the wax. The service also identifies and removes foreign bodies from ears.

The service was founded by a registered nurse who is also the provider. The provider has a legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The Clinic Rooms is registered with the CQC to provide the regulated activity of treatment of disease, disorder or injury.

Services are provided on a fee-paying basis only. No NHS funded treatment is available. The service offers consultations and treatment to adults only.

The service is provided from:

The Clinic Rooms

28 High Street

Standish

Wigan

Lancashire

WN6 0HL

The building also includes a podiatry service which is not connected with the Clinic Rooms.

The clinic website is: www.clear-ears.com

The service is open every Monday, Tuesday, Thursday and Friday with core opening hours of 9am to 5pm. This service is not required to offer an out of hours service. Patients who need medical assistance out of corporate operating hours are requested to seek assistance from alternative services. The service is a nurse led clinic.

How we inspected this service

We carried out this inspection on 25 January 2023. Before visiting the location, we looked at a range of information that we hold about the service. During our visit, we interviewed staff, reviewed documents and clinical records, and made observations relating to the service and the location it was delivered from. We did not speak to patients on the day of the site visit.

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?

Safety systems and processes

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

- The provider conducted safety risk assessments for the areas of the clinic patients visited. There were appropriate safety policies. The provider had received up to date safeguarding and safety training appropriate to their role. They knew how to identify and report concerns.
- There was an effective system to manage infection prevention and control. We saw the policy included information for patients and staff and the use of personal protective equipment (PPE). Infection control audits were carried out regularly and actions were completed
- We saw there was a general cleaning schedule in place for the clinic room which listed the frequency of cleaning of equipment and areas of the service.
- There were systems for safely managing healthcare waste, including for sharps. Sharps bins were managed safely.
- The provider 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.

- Although the service did not see acutely unwell patients, 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.
- There were appropriate indemnity arrangements in place

Information to deliver safe care and treatment

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

- We reviewed a sample of records and saw patients' medical histories were taken.
- Individual care records were written and managed in a way that kept patients safe. The clinic used a variety of templates to ensure record keeping was consistent and auditable.

Safe and appropriate use of medicines

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

• The service did not store medicines on site.

Track record on safety and incidents

The service had a good safety record.

- There were comprehensive risk assessments in relation to safety issues.
- The service monitored and reviewed activity. This helped it to understand risks and gave a clear, accurate and current picture that led to safety improvements.

Lessons learned and improvements made

Are services safe?

The service learned and made improvements when things went wrong.

- There was a system for recording and acting on significant events. Since the practice had been registered there were no recorded incidents.
- The provider was aware of and complied with the requirements of the Duty of Candour. The provider encouraged a culture of openness and honesty. The service had systems in place for knowing about notifiable safety incidents.

Are services effective?

We rated effective as Good because:

Effective needs assessment, care and treatment

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

- We saw the provider assessed needs and delivered care in line with relevant and current evidence-based guidance and standards such as the National Institute for Health and Care Excellence (NICE) best practice guidelines.
- Patients' immediate and ongoing needs were fully assessed and recorded. This included a record of the treatment prior to the appointment, the aural (relating to the ear and hearing) history, presenting problem, findings, amount of wax removed and assessment of the tympanic membrane (eardrum). Clinicians had enough information to make or confirm a diagnosis, however patients were advised to see their own NHS GP if the patient's condition fell outside of the services scope.
- We saw no evidence of discrimination when making care and treatment decisions.

Monitoring care and treatment

The service was actively involved in quality improvement activity

- The service used information about care and treatment to make improvements. Clinical records including treatment plans were template-based which allowed the service to review, audit and make improvements when necessary.
- Patients were advised about possible side effects such as tinnitus (a sensation or awareness of sound that is not caused by a real external sound source) and/or dizziness and were asked to come back to the service if they experienced any complications. However, there were no examples of instances where this had occurred.
- We also saw there were plans in place for non-clinical audits included hand hygiene, equipment safety and environmental cleaning.

Effective staffing

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

- All staff were appropriately qualified.
- Relevant professionals were registered with the Nursing and Midwifery Council (NMC) and were up to date with revalidation.
- The provider, a registered nurse, was qualified as a nurse prescriber and had received specific training and could demonstrate how they stayed up to date.

Coordinating patient care and information sharing

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

- Patients received coordinated and person-centred care. Staff referred to, and communicated effectively with, other services when appropriate. For example, where the service was unable or not the appropriate service to treat the patient, they were signposted to other services which may be more suitable such as their GP.
- The service monitored the process for seeking consent appropriately.

Supporting patients to live healthier lives

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Are services effective?

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

- Where appropriate, staff gave people advice so they could self-care. Various patient information leaflets were available for patients to take. These included educational information about various ear conditions and standard ear care advice.
- Where patients needs could not be met by the service, staff redirected them to the appropriate service for their needs.

Consent to care and treatment

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

- Staff understood the requirements of legislation and guidance when considering consent and decision making.
- Staff supported patients to make decisions. Where appropriate, they assessed and recorded a patient's mental capacity to make a decision.

Are services caring?

We rated caring as Good because:

Kindness, respect and compassion

Staff treated patients with kindness, respect and compassion.

- Feedback from patients was positive about the way staff treat people.
- Staff understood patients' personal, cultural, social and religious needs. They displayed an understanding and non-judgmental attitude to all patients.
- The service gave patients timely support and information.

Involvement in decisions about care and treatment

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

- Patients feedback indicated 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.
- For patients with learning disabilities or complex social needs family, carers or social workers were appropriately involved.

Privacy and Dignity

The service respected patients' privacy and dignity.

- Staff recognised the importance of people's dignity and respect.
- Staff knew that if patients wanted to discuss sensitive issues or appeared distressed, they could offer them a private room to discuss their needs.

Are services responsive to people's needs?

We rated responsive as Good because:

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 understood the needs of their patients and improved services in response to those needs. Appointments were 40 minutes long which was sufficient time for the treatment to be carried out.
- The Clinic Rooms was open every Monday, Tuesday, Thursday and Friday with core opening hours of 9am to 5pm.
- The facilities and premises were appropriate for the services delivered. For example, the service was situated on the ground floor of a modernised converted building and there was wheelchair and ramp access.
- Reasonable adjustments had been made so that people in vulnerable circumstances could access and use services on an equal basis to others.

Timely access to the service

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

- From the feedback we reviewed, patients reported timely access to initial assessment, diagnosis and treatment.
- All appointments were pre-booked. We found the service had an efficient appointment system in place to respond to patients' needs.

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.

- Information about how to make a complaint or raise concerns was available.
- There was a complaint policy and procedure. The service would inform patients of any further action that may be available to them should they not be satisfied with the response to their complaint.
- All patient satisfaction was overwhelmingly positive. As a result, there had been no complaints relating to the service provided.

Are services well-led?

We rated well-led as Good because:

Leadership capacity and capability;

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

- Through conversations, evidence collected during the inspection and a review of correspondence it was evident the leadership of the service had the capacity and skills to deliver high-quality, sustainable care.
- The provider was knowledgeable about issues and priorities relating to the quality and future of services. They understood national and local challenges, including challenges within the aural care sector, specifically the significant increase in services offering microsuction treatment.

Vision and strategy

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

• There was a clear vision and set of values. The service had a realistic strategy and supporting business plans to achieve priorities.

Culture

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

- The service focused on the needs of patients.
- The provider was aware of and had systems to ensure compliance with the requirements of the duty of candour.

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 service had established proper policies, procedures and activities to ensure safety and assured themselves that they were operating as intended.
- There were robust arrangements in line with data security standards for the availability, integrity and confidentiality of patient identifiable data, records and data management systems.

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.

Appropriate and accurate information

The service acted on appropriate and accurate information.

Are services well-led?

• Quality and operational information was used to ensure and improve performance. Performance information was combined with the views of patients.

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 monitored online comments and reviews. For example, the service had received 214 reviews online, all reviews were positive. 210 five star (maximum score) and four four star reviews. Whilst these reviews were unverified, they do give a good indication of high quality service.
- We also saw written compliments about the high standards of care and treatment.
- The service was transparent, collaborative and open about performance.

Continuous improvement and innovation

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

- The provider took every opportunity to access learning relevant to their role and the services provided.
- The provider worked collaboratively with their peer group. These were a group of practitioners who shared good practice and innovation with each other from across the country.