

360 Health Ltd

London Vaccination Clinic- London Bridge

Inspection report

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Date of inspection visit: 16th December 2016

Date of publication: 10/03/2017

Overall summary

We carried out a focussed inspection on 15th December 2016 to ask the service the following key questions; Are services safe?

Our findings were:

Are services safe?

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

Background

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.

CQC inspected the service on 17th December 2015 and asked the provider to make improvements regarding the gaps in the systems and processes which operated to effectively prevent abuse of service users (safeguarding). We checked these areas as part of this focussed inspection and found this had been resolved.

London Vaccination Clinic at London Bridge provides a private travel vaccination service and advice on immunisation for travellers (both children and adults). The clinic operates from one room and has at least one member of clinical nursing staff present at a time. The clinic also employs a lead nurse and six members of nursing staff who rotate between different provider sites.

The clinic is open from 10:00am to 8:00pm, Monday to Friday, and from 10:00am to 16:00pm on Saturdays.

The Clinical Director 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.

Our key findings were:

- There were adequate systems and processes in place which operated to effectively prevent abuse of service users, including children.

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 adequate systems and processes in place which operated to effectively prevent abuse of service users, including children

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Detailed findings

Background to this inspection

We undertook a focussed inspection of The London Vaccination Clinic on 15 December 2016. This is because the service had been identified as not meeting one of the legal requirements and regulations associated with the Health and Social Care Act 2008 during our inspection of 17 December 2015. The regulatory requirements the provider needs to meet are set out in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We had found that one of these requirements had not been adhered to. Specifically:

- Not all staff had received the appropriate level of safeguarding training.

This inspection was carried out to check that improvements to meet legal requirements planned by the service after our comprehensive inspection on 17 December 2015 had been made. We inspected the practice against one of the five questions we ask about services: is the service safe.

The inspection was led by a CQC Pharmacist Specialist who had access to advice from a specialist advisor. We looked at records sent to us by the provider prior to the inspection and on the day of inspection.

Are services safe?

Our findings

We carried out a comprehensive inspection of The London Vaccination Clinic on 17 December 2015. The service was good overall but required improvement for providing safe services. Our inspection identified the breach of Regulation 13 (Safeguarding service users) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. A requirement notice was issued to the practice in respect of the following concern which impacted on the practice's ability to provide services that were safe. This concern was:

- We found that not all clinical staff who would treat children were adequately trained to level 3 in safeguarding children. In addition, we did not see evidence of Level 4 training or equivalent for the named lead member of clinical staff. This meant there were gaps in the systems and processes which operated to effectively prevent abuse of service users.

We carried out a focussed follow up inspection on 15 December 2016 and found that the service had taken the necessary action to ensure that patient safety was maintained.

Reliable safety systems and processes (including safeguarding)

The practice had clearly defined and embedded systems, processes and practices in place to keep patients safe and safeguarded from abuse, which included:

- Staff knew how to recognise signs of abuse in vulnerable adults and children. Staff were aware of their

responsibilities regarding information sharing, documentation of safeguarding concerns and how to contact relevant agencies in normal working hours and out of hours.

- Safeguarding arrangements reflected relevant legislation and local requirements. Policies were accessible to all staff. The policies clearly outlined who to contact for further guidance if staff had concerns about a patient's welfare. A Clinical Director was the designated safeguarding lead. She attended safeguarding meetings when possible and provided reports when required for other agencies. The practice had devised a protocol which ensured that any appropriate safeguarding concerns were escalated to the local authority multi-agency safeguarding hub, which had a Level 4 qualified person.
- Staff demonstrated they understood their responsibilities and all had received training on safeguarding children and vulnerable adults relevant to their role. Practice Nurses were trained to child protection or child safeguarding level 3. All other staff were trained to level 1.
- The practice provided evidence that all administrative staff had received a Disclosure and Barring Service (DBS) check and that those who acted as chaperones had been trained for the role. The practice supplied an updated copy of their chaperoning policy which stated that no member of staff would be allowed to chaperone without first having had a DBS check.