

# Advanced NPractitioners Consultancy & Health Care Ltd

## Lily House

### Inspection report

11 The Shrubberies  
George Lane  
South Woodford  
Essex  
E18 1BD

Tel: 020 8591 7300

Website:

[www.emergencytravelvaccinationclinic.co.uk](http://www.emergencytravelvaccinationclinic.co.uk)

Date of inspection visit: 05/07/2018

Date of publication: 15/08/2018

## Overall summary

We carried out an announced comprehensive inspection on 5th July 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.

Lily House is a Nurse led private health and travel clinic in South Woodford offering a range of services primarily including healthy lifestyle advice, travel advice and immunisations.

The Registered Manager is the owner of the business and the sole practitioner within it. 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.

On the day of the inspection we received 13 comment cards from clients of the clinic. All the cards were positive and most commented on the friendliness, efficiency and the professionalism of the staff. Several mentioned that they would recommend the clinic to a friend.

# Summary of findings

## **Our key findings were:**

- The clinic had clear systems to manage risk so that safety incidents were less likely to happen. When incidents did happen, the clinic learned from them and improved processes.
- Staff involved clients with their procedures and treated them with kindness, dignity and respect.
- Clients found it easy to get an appointment at a time that was convenient to them.
- There was a strong focus on continuous learning and improvement at all levels of the organisation.
- The clinic was well managed with supportive leadership.
- Policies and procedures had been thoroughly reviewed and applied.
- Staff were valued and appropriately trained for their roles.
- There was an increasing client demand for the clinic from an increasing geographical area.

There were areas where the service could make improvements and they should:

- Review the replacement of curtains in the consulting room on a more regular basis.

# 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 clinic had clear and comprehensive policies and employed well trained and competent staff. Medicines and patient information were all securely stored and used, and there was a clear line of responsibility.

The clinic was clean and tidy and there were clear processes for all risks, emergency scenarios or significant events.

### **Are services effective?**

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

The clinic demonstrated that staff were up to date with all current safety alerts and recent travel health knowledge. The clinic had yet to implement quality improvement activities such as clinical audits to improve outcomes for clients however, the clinic undertook several non-clinical audits and was starting to look into systems of clinical quality improvement.

The clinic gave co-ordinated and tailored care and treatment and aimed for best practice and increasing levels of disease prevention activity.

### **Are services caring?**

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

The clinic had received positive feedback through its own feedback surveys, and this was further evidenced by patient responses to CQC comment cards on the inspection. Clients felt that they were treated with respect and courtesy.

### **Are services responsive to people's needs?**

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

The clinic had been started to provide travel health services to the local population with the location being chosen as, at the time, no other specialist travel clinic, or nurse-led health clinic existed there or nearby.

It was found to be efficiently run and the owner was investing further in the clinic, particularly with regard to expanding the services that it could offer. For example blood tests, pregnancy testing, smoking cessation advice, women's health checks, etc.

No complaints had been received since the clinic started but we saw clear and concise policies and leaflets should they be needed.

### **Are services well-led?**

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

The clinic had competent and knowledgeable staff and there was a clearly laid out vision for the clinic.

The manager was demonstrably well trained and knowledgeable. The governance structure was clear.

# Lily House

## Detailed findings

### Background to this inspection

Lily House is the only location for Advanced NPractitioners Consultancy & Health Care Ltd and has been registered since 2016 to provide treatment of disease, disorder or injury, and diagnostic and screening procedures. This also includes travel advice, immunisations and health protection.

The clinic operates from a consulting room within Lily House in South Woodford, Essex. The premises are a managed suite of consulting rooms located within a three storey house in South Woodford. Rooms are rented by a variety of different practitioners, including Advanced NPractitioners Consultancy & Health Care, all offering a different range of private services.

The clinic has access to emergency equipment including a defibrillator, oxygen and emergency medications. Clients attend the clinic through the shared clinic reception area and use the shared waiting room until called for their appointment.

There is one director of Advanced NPractitioners Consultancy & Health Care Ltd who is also the sole clinical practitioner. The clinic shares two receptionist with the other practitioners located in the building.

The opening times of the clinic are as follows:

Monday, Wednesday and Friday - 8am until 6pm

Tuesday and Thursday - 8am until 7pm

Saturday – 8am until 5pm

The name and address of the registered provider is Advanced NPractitioners Consultancy & Health Care Ltd, 181 Keith Road, Barking, Essex, IG11 7TY.

The inspection took place over one day on 5 July 2018. The inspection team consisted of a lead CQC inspector and a nurse specialist advisor.

The service sent information regarding the management of the clinic beforehand which was reviewed before the inspection. There were no concerns given to the Care Quality Commission from community groups, clients or other stakeholders before the inspection was undertaken.

On the day of the inspection the team interviewed the Registered Manager, undertook observations in the clinic and reviewed 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

### Safety systems and processes

All safety and safeguarding processes had a clear and clinic specific policy and were adhered to.

The manager was trained to the required safeguarding standard for adults and children, and was aware of the policy and her responsibilities as the safeguarding lead. All policies were accessible and had a date for review. When asked, the manager was able to identify an example of a safeguarding concern. The manager had not encountered any safeguarding concerns to date, but informed us she would escalate as required.

Children needed the signed consent of the parents for vaccinations and we were told that these would not be undertaken without signed parental consent.

The manager had received an enhanced Disclosure and Barring Services (DBS) check according to clinical policy. (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).

Staff within Lily House had been trained to undertake chaperone duties and all clients were made aware that they could request a chaperone. There were clear notices in the waiting room and in the consulting room advising of this as well.

The manager was correctly registered with the required regulatory bodies and confident with ongoing professional revalidation processes. Agency staff were not used and in the event of unavoidable absence, clinics were cancelled and re-booked.

The managing agents for Lily House had a comprehensive building risk assessment and undertook the relevant checks for the waterborne infection Legionella.

The consulting room was clean and tidy, including all storage areas, with evidence of frequent cleaning confirmed by a cleaning schedule and checklist. We did note, however, that the curtain around the examination couch had not been changed since March 2016.

There were regular meetings between the manager and the cleaners where infection control and cleaning regimes were discussed to ensure best practice was maintained.

There was an infection control protocol in place and the manager had received up to date training. Annual infection control audits were undertaken with the most recent one being carried out in April 2018.

Equipment, such as syringes, were single use and were all within their use by date.

The manager was up to date with her own immunisations, including MMR and HEP B.

### Risks to clients

Current staffing levels were sufficient for the demands of the clinic. However, the manager was looking to expand at some point in the near future whereby all sickness and absences could be covered by the staff themselves.

We were told about the emergency procedures regarding the safety of the building and also how to deal with any medical emergencies. The manager was aware of the location of emergency equipment and emergency medicines. All the medicines and equipment were appropriate, accessible and fit for use. The clinic also had its own stock of emergency drugs for anaphylaxis or severe allergic reactions. These were all in date and clearly marked.

The clinic had all the appropriate indemnity arrangements in place to cover all potential liabilities.

### Information to deliver safe care and treatment

All clients to the clinic had to undertake an initial assessment in order to ensure that their medical history and needs were completely understood and noted. All clients were required to present identification so as to verify parental authority where the client was a child. All notes and records were securely accessed and stored.

### Safe and appropriate use of medicines

The clinic kept an amount of vaccine stock, and was able to order other vaccines on demand. All were stored appropriately and securely in vaccine fridges that were constantly and consistently monitored for temperature. We saw evidence that the cold chain for all vaccines was adhered to at all times. In the event of a fridge malfunction or an issue with the cold chain, all staff were aware of the policy and procedures with regard to the vaccines.

We saw evidence that the manager was aware of all the national guidelines regarding safe administration of

## Are services safe?

medicines and adhered to all reporting requirements. All stock levels were evidenced to be checked weekly and all batch numbers recorded. We saw that all stock was rotated and expiry dates routinely checked.

All clients were made aware of the potential risks and side effects of each vaccine that they were offered.

### **Track record on safety**

There had been no significant incident for the clinic in the last 12 months but there were easily accessible processes and policies in place should there be the need to report any in the future. The manager was aware of what constituted a significant event and the need to report, discuss and action such incidents.

The clinic had thorough health and safety policies, which were all followed. These included a fire policy for the clinic

that outlined the evacuation procedure in detail for staff and clients. The evacuation procedure was practiced regularly and escape routes were clearly signposted and accessible to all people in the building.

All concerns or issues within the consulting room and building in general were communicated via electronic means or through person to person conversations. There was a good administration system in place that ensured that all such information was logged accordingly.

### **Lessons learned and improvements made**

The service was aware of and complied with the requirements of the Duty of Candour. The service encouraged a culture of openness and honesty. The service had systems in place for investigating and sharing outcomes of notifiable safety incidents.

# Are services effective?

(for example, treatment is effective)

## Our findings

### Effective needs assessment, care and treatment

The manager was aware of relevant and current evidence based guidance and standards.

- The clinic had systems to keep staff up to date. The manager had access to guidelines from a variety of sources, and used this information to deliver care and treatment that met client's needs. We were told how these sources were used during discussions with clients who were travelling to several countries at a time.
- The clinic was a subscriber to a tropical medicine society in order to access new research articles and keep up to date with new advances in disease prevention.
- Client outcomes were monitored using personalised treatment programmes, in-depth information and after care advice.
- Medical alerts would be seen by the manager. These would include any potential or actual shortages of supply for a particular vaccine.

### Monitoring care and treatment

Due to the recent commencement of business, the clinic had yet to implement a full programme of clinical audit or monitoring of trends. However, audits/quality improvement measures were planned for the upcoming year now that there was an increasing number of clients attending the clinic. The manager had overall clinical governance for the travel clinic.

### Effective staffing

The manager had the skills, knowledge and experience to carry out her role. For example, she had received training in immunisation and travel health.

- Up to date records of skills, qualifications and training were maintained.
- The clinic had plans in procedures in place to provide support to staff as and when recruited. There was an appraisal system in place.
- The manager had current registrations with the required regulatory bodies and had also received training in

basic life support, anaphylaxis, infection control, safeguarding vulnerable adults and mental capacity within the last 12 months. Anaphylaxis is a severe allergic reaction which needs immediate medical treatment.

### Coordinating patient care and information sharing

The manager worked to deliver effective care and treatment.

- We saw records that showed that treatment to clients was appropriately assessed, planned and delivered.
- Clients received specific care options appropriate to their needs.
- The clinic co-ordinated care where applicable in order to ensure that the vaccinations were relevant to the needs of the client and also in line with their underlying medical needs.
- We were told that where relevant, and after consent had been obtained, details of treatment were shared with the clients own GP.

### Supporting clients to live healthier lives

The manager ensured that all the treatment and advice offered was in accordance to national guidelines and that all health advice was aimed towards ensuring that the clients were safe and aware of the best practice and prevention advice.

### Consent to care and treatment

The clinic operated a practice of implied consent, after the procedures and advice had been given to the client. This consent was registered on the client record.

The manager supported the clients with regard to the immunisations on offer and advised the client if they could obtain the vaccine free at an NHS service, rather than pay to have the vaccine privately at the clinic.

Clients were supported to make decisions. Where appropriate, the manager assessed and recorded a client's mental capacity to make a decision.

The charges for the treatments available were clearly advertised in the clinic, on all literature given to the clients, and on the website.

# Are services caring?

## Our findings

### **Kindness, respect and compassion**

We read from the comment cards that clients were treated with kindness, patience and respect.

- The manager was aware of, and understood, clients' personal, cultural, social and religious needs.
- The clinic gave the clients tailored and considered advice.
- All 13 Care Quality Commission comment cards that were received were positive regarding the service experienced. The adjectives most commonly used to describe the clinic were that it was friendly, helpful, informative and efficient.
- The clinic collected their own feedback and comments and we saw that these were all positive with all respondents stating that they with dignity and respect.
- The environment was conducive to supporting people's privacy. There was a well-appointed consulting room and we saw that staff supported clients' privacy.
- The manager took time to interact with clients and we saw from the comment cards that she had treated them, and those close to them, in a respectful, appropriate and considerate manner.

### **Involvement in decisions about care and treatment**

The manager ensured that clients were involved in the treatment that they were offered. She was aware of the Accessible Information Standard (a requirement to make sure that people and their carers, where applicable, can access and understand the information that they are given).

- Interpretation services were available for clients that did not have English as a first language.
- Clients were communicated with in a way that they could understand, and a range of communication aids and easy read materials were available.
- The manager ensured that all clients were fully aware of the advice and treatment options and encouraged them to ask questions and ensure that they wanted to proceed with the vaccinations.

### **Privacy and Dignity**

Client privacy and dignity was respected and promoted.

- The manager recognised the importance of client dignity and respect.
- The clinic complied with the Data Protection Act 1998.

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

### Responding to and meeting people's needs

The clinic organised and delivered services to meet a specific patient need.

- The clinic understood that the local population required tailored and accessible travel advice and vaccinations that many NHS GP services were not providing.
- The clinic also supplied some non-travel vaccinations in order to allow clients the full range of immunisations for preventable diseases that were not always provided by local GP practices.
- The facilities and premises were managed by a third party but were appropriate for the services delivered.
- Appointment times were scheduled to ensure clients' needs and preferences (where appropriate) were met. The service made reasonable adjustments to the environment or treatment options to enable clients to receive care and treatment.
- The service took into account the needs of different clients on the grounds of age, disability, sex, gender reassignment, race, religion or belief, sexual orientation, pregnancy and maternity.
- There was evidence that the service gathered the views of clients when planning and delivering services. We saw client survey results which showed clients were extremely happy with the services provided.

### Timely access to the service

Clients were able to access treatment from the clinic within an acceptable timescale for their needs.

- Clients had good access to an initial consultation and then the follow on treatment where applicable, as the clinic had varying opening times including availability at weekends which they could book at their convenience.
- Appointments could be made through the reception desk as well as via the website.

### Listening and learning from concerns and complaints

The clinic took complaints and concerns seriously and responded to them appropriately.

- Information about how to make a complaint or raise concerns was available.
- There was a complaints policy easily accessible in the clinic.
- The clinic had received no complaints in the last year, but we saw that the complaints policy and procedures were in line with recognised guidance and that any complaints would be dealt with in a timely and appropriate manner.

# Are services well-led?

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

## Our findings

### Leadership capacity and capability;

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

- The manager had the experience to deliver the treatment that was offered and to address and manage any risks associated to it.
- The manager had the capacity to deal with the increasing demand on the service.
- The manager was knowledgeable about issues and priorities relating to the quality and future of the service. She understood the challenges and was able to address them.
- Clinic specific policies were implemented and were easily accessible. These were updated and reviewed regularly.
- There were appropriate arrangements for identifying, recording and managing risks through specific documentation.

### Vision and strategy

The manager had a clear vision and strategy to deliver high quality treatment and advice to clients.

- There was a clear vision and set of values. The vision of the manager was the provision of an excellent, efficient immunisation service to the general public.
- The clinic has a business plan which included realistic targets and objectives and demonstrated sound financial management
- The clinic encouraged an holistic care approach where appropriate advice and immunisation was delivered according to national guidance, but where the physical, psychological and social aspects of the care of each client was also considered.
- The manager understood and practiced the values of professionalism and efficiency.

### Culture

The clinic had a culture of high quality care.

- The manager acted on behaviour and performance consistent with the vision and values in an open and honest manner. The manager was aware of, and had systems in place to ensure she complied with the requirements of the duty of candour.
- There was a culture of equality and diversity, and all clients felt they were treated equally and respectfully.

- The clinic operated safely, with particular consideration given to potential emergency scenarios and how they would be dealt with.
- Clients were encouraged to be involved in their own care and were given the appropriate choices and options in the clinic in order to make an informed decision

### Governance arrangements

- There were clear systems of accountability to support good governance and management.
- The clinic was managed well, with governance systems to support an effective and safe service.
- There was a registered manager in post who understood their responsibilities.
- There was continuous review of policies and objectives

### Managing risks, issues and performance

There was a clear and effective process for managing risks, issues and performance.

- Risks were managed and monitored, although due to the recent opening of the clinic, there was no programme of second cycle clinical audit. This was planned to take place during 2018.
- There were financial management processes in place to keep an oversight of the performance and sustainability of the clinic for the future.
- The clinic was able to deal with incidents. The manager had been trained and was aware of what to do – for example for spillages or a client being unwell. This was in addition to training in fire evacuation and life support.

### Appropriate and accurate information

The clinic acted on appropriate and accurate information.

- The manager kept up to date with all medicine alerts.
- We saw examples of up to date business objectives.
- There were arrangements in place to deal with data security and the integrity and confidentiality of patient identifiable data, records and data management systems.

### Engagement with clients, the public, staff and external partners

The manager involved the clients in their current, and on-going treatment.

- There were feedback processes and the clinic used its own feedback form to measure client opinions.

# Are services well-led?

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

- There was a transparent and collaborative approach by the manager.
- We saw evidence to show that the manager attended local learning events to ensure her skills and knowledge were up to date.
- There was a focus on continuous learning and improvement.
- Learning was shared where applicable.
- The manager made time available for revalidation, training and career development.
- There was a vision to improve and increase the service offering, including plans to offer other services such as blood tests, pregnancy testing, smoking cessation advice, women's health checks, etc.

## **Continuous improvement and innovation**

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