

Your Travel Clinic

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 3 May 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 Your Travel Clinic on 16 October 2019 as part of our current inspection programme. We previously inspected this service on 3 May 2018 using our previous methodology, where we did not apply ratings.

Your Travel Clinic provides travel health services 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.

The sole GP 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 17 completed CQC comment cards, of which 15 were fully positive about the service and two provided mixed feedback. Patients commented that the staff were caring, the service was efficient, the environment was clean and comfortable, and that clear, detailed information was provided.

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 all 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 Your Travel Clinic

Your Travel Clinic was established in 2004 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.

The service is based in a fully accessible purpose-built property which contains multiple healthcare providers. This includes NHS GP services, dentists and hospital outpatient services. The service has been based at this site since 2012.

Patients are directed to the second floor of the building – which is accessible via lift or stairs – to the service’s reception and waiting area which is shared with an NHS GP practice. The service uses consultation rooms and administrative space within the building.

Information from the service indicates there are approximately 50 patient appointments per month. About 40% of these are patients who have visited the service at least once before.

The service staff consists of a GP (who is the registered manager) and a practice manager. Some administrative functions are carried out by staff from the neighbouring GP practice.

Services are available – by appointment only – at the following times:

- Mondays – 8am to 6.30pm;
- Tuesdays – 8am to 1pm;
- Thursdays and Fridays – 8.30am to 6.30pm;
- Every other Saturday – 10am to 1pm.

The service is fully accessible for wheelchair users. Two lifts are available. A tube station is approximately half a mile away.

The service website address is: www.yourtravelclinic.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.
- 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:

Your Travel Clinic 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. The service received and acted upon alerts and information from agencies including the Medicines and Healthcare products Regulatory Authority (MHRA), the British Medical Association (BMA), and the Foreign and Commonwealth Office (FCO).
- 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.
- All staff received up-to-date safeguarding and safety training appropriate to their role. The GP 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 ensuring children had their 'red book' for immunisation recording.
- 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).

- A chaperone service was available for all patients and this was promoted in all clinical rooms. All staff had received chaperone training.
- There was an effective system to manage infection prevention and control (IPC). There was a detailed policy, and associated cleaning schedules and checklists were being used with actions documented. Staff were clear on their responsibilities to manage IPC.
- 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 knew what to do in a medical emergency and had completed training in emergency resuscitation and basic life support annually.
- Emergency medicines and oxygen were situated on-site, and there was a working defibrillator available. These were regularly checked and maintained by the building management company, and we saw evidence of this.
- Staff understood their responsibilities to manage emergencies and to recognise those in need of urgent medical attention. Staff demonstrated they knew how to identify and manage patients with severe infections, including sepsis. All relevant staff had received sepsis training and had access to an appropriate sepsis decision/action tool.
- Service policy included asking patients to wait after their vaccination appointment to ensure any adverse reactions could be identified and managed safely.

Are services safe?

- 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.
- There were weekly meetings for staff to promote patient safety.
- 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 – including vaccines, emergency medicines and associated equipment – minimised risks to patients. The service kept prescription stationery securely and monitored its use.
- The service carried out regular medicines audits to ensure prescribing was in line with best practice guidelines for safe prescribing.
- The service was engaged in analysis and planning of risks and proposed actions relating to the UK's exit from the European Union. This included strategic planning relating to supply and storage of medicines.
- 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.

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 three significant incidents in the last 12 months and we saw these had been addressed and managed appropriately. For example, staff training was provided on appropriate vaccine storage, and data logging devices were acquired for use in all service vaccine storage fridges.
- 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 mechanism to share alerts with staff.

Are services effective?

We rated effective as Good because:

Your Travel Clinic 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 the National Institute for Health and Care Excellence (NICE) best practice guidelines.
- Patients' needs were fully assessed through the administration of a pre-appointment questionnaire.
- 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.
- Staff advised patients what to do if they became unwell or were involved in an incident such as an animal bite whilst travelling, and where to seek further help and support. Information was provided in the form of a travel 'health passport' booklet.

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 audit 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 GP was registered with the General Medical Council (GMC) 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.
- All staff had received appraisals 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.

- Patients received coordinated and person-centred care. Staff communicated effectively with other services when appropriate, for example by sharing information with patients' NHS GPs in line with GMC guidance.
- Before providing treatment, staff ensured they had adequate 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.
- All patients were asked for consent to share details of their consultation and any medicines prescribed with their registered GP on each occasion they used the service.
- Patient information was shared appropriately (this included when patients moved to other professional services), and the information needed to plan and deliver care and treatment was available to relevant staff in a timely and accessible way. There were clear and effective arrangements for following up on people who had been referred to other services.

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.

Are services effective?

- 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 a bespoke travel health booklet with a range of advice to travellers on a full range of subjects including climate, food and drink, avoiding contact with animals and sexual health.
- 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:

Your Travel Clinic 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 generally positive about the way staff treated them. For example, 15 out of the 17 comments cards we received provided positive feedback (with the other two providing mixed feedback) in relation to how patients felt they were treated.
- The GP at the service provided evidence of positive feedback received from patients submitted as part of GP revalidation in August 2018.
- 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.
- The service had access to a fully-functioning hearing loop. Staff were aware of how to access and use it.

- 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 could demonstrate 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 knew that if patients wished to discuss sensitive issues or appeared distressed they could offer them the use of a private room to discuss their needs. Staff would be made aware by reception staff if a patient was distressed by an electronic instant messaging system and provide additional support if needed.
- The reception computer screens were not visible to patients and staff did not leave personal information where other patients could have access to it.
- Patients' electronic care records were securely stored and accessed electronically.

Are services responsive to people's needs?

We rated responsive as Good because:

Your Travel Clinic 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 early morning, evening and 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.
- The service facilities and premises were appropriate for the services delivered.
- 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.

- Appointments were often available on the same day, including telephone advice where needed.
- Waiting times, delays and cancellations were minimal and managed appropriately.
- The service provided time critical treatments post-exposure such as rabies vaccinations. The service

also directed patients to other local NHS services providing the treatment for free. Patients could also start their post exposure treatment programme with the service and were provided with all the information needed to continue their treatment elsewhere if required.

- 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.

- Information about how to make a complaint or raise concerns was available in the form of a complaints leaflet, information in the waiting area and on the service's website.
- 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 learned lessons from individual concerns, complaints and from analysis of trends. It acted as a result to improve the quality of care.
- Information was available about organisations patients could contact if they were not satisfied with the way the service dealt with their concerns.
- The service had not received any complaints in the last 12 months. There were 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:

Your Travel Clinic 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.

- The GP and practice manager were knowledgeable about issues and priorities relating to the quality and future of services. They understood the challenges and were addressing them.
- The GP and practice manager focussed on providing quality and sustainability to support effective care, and worked with staff and others to achieve this.

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.
- The service developed its vision, values and strategy by including all staff.

Culture

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

- Staff we spoke with felt respected, supported and valued.
- The service focused on the needs of patients.
- The service had a system to act upon behaviour and performance inconsistent with the vision and values.
- Openness, honesty and transparency were values demonstrated by staff, for example for managing incidents and complaints.
- The service 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 all staff working at the service.

Governance arrangements

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

- There were structures, processes and systems to support effective governance and management and these were clearly set out.
- The service used information such as key performance indicators and outcome data to effectively support good governance.
- There was suitable oversight for emergency medicines and equipment.
- There was appropriate consideration for how to deal with medical emergencies.
- Staff demonstrated awareness of their own and others' roles, accountabilities and responsibilities.
- There were proper policies, procedures and activities to ensure safety, and staff were assured that these were operating as intended.

Managing risks, issues and performance

There were clear and effective processes for managing risks, issues and performance.

- There were effective processes to identify, understand, monitor and address current and future risks which included risks to patient safety.
- The service had processes to manage current and future performance.
- Leaders and managers had oversight of safety alerts, incidents, and complaints.
- Clinical and other audit had a positive impact on quality of care and outcomes for patients. There was evidence of action to change services to improve quality.
- The service had appropriate plans for managing major incidents.

Appropriate and accurate information

The service acted on appropriate and accurate information.

Are services well-led?

- 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 regular meetings to share information and to promote quality care and patient safety. Quality and sustainability were discussed in relevant meetings where all staff had sufficient access to information.
- There were sufficient arrangements in line with data security standards for the availability, integrity and confidentiality of patient identifiable data, records and data management systems.

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 heard views and concerns from patients and staff, and acted on them to shape services and culture.
- The service collected and reviewed patient feedback about the services provided which was positive.
- The service was transparent, collaborative and open about performance.
- The service engaged with local GP practices by sending out information relating to travel health.

Continuous improvement and innovation

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

- There was a focus on continuous learning and improvement.
- Learning was shared between staff through one-to-one feedback, in staff meetings, and through regular communications and correspondence.
- The service made use of incident reviews and shared learning to help make improvements.