Announced Inspection Report: Independent Healthcare

Service: JDR Healthcare (Perth)
Service Provider: JDR Healthcare Ltd

31 October 2018
Healthcare Improvement Scotland is committed to equality. We have assessed the inspection function for likely impact on equality protected characteristics as defined by age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation (Equality Act 2010). You can request a copy of the equality impact assessment report from the Healthcare Improvement Scotland Equality and Diversity Advisor on 0141 225 6999 or email contactpublicinvolvement.his@nhs.net
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1 A summary of our inspection

The focus of our inspections is to ensure each service is person-centred, safe and well led. Therefore, we only evaluate the service against three key quality indicators which apply across all services. However, depending on the scope and nature of the service, we may look at additional quality indicators.

About our inspection

We carried out an announced inspection to JDR Healthcare (Perth) on Wednesday 31 October 2018. We spoke with a number of staff, clients and carers during the inspection. We received feedback from 12 clients who had used the service before our inspection. This was our first inspection to this service.

The inspection team was made up of one inspectors and one observer.

What we found and inspection grades awarded

For JDR Healthcare (Perth), the following grades have been applied to three key quality indicators.

<table>
<thead>
<tr>
<th>Key quality indicators inspected</th>
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<tbody>
<tr>
<td><strong>Domain 2</strong> – Impact on people experiencing care, carers and families</td>
</tr>
<tr>
<td>Quality indicator</td>
</tr>
<tr>
<td>2.1 - People’s experience of care and the involvement of carers and families</td>
</tr>
<tr>
<td><strong>Domain 5</strong> – Delivery of safe, effective, compassionate and person-centred care</td>
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<tr>
<td>5.1 - Safe delivery of care</td>
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</table>
The following additional quality indicator was inspected against during this inspection.

### Additional quality indicators inspected (ungraded)

<table>
<thead>
<tr>
<th>Domain 5 – Delivery of safe, effective, compassionate and person-centred care</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Quality indicator</strong></td>
</tr>
<tr>
<td>5.2 - Assessment and management of people experiencing care</td>
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</table>

Grades may change after this inspection due to other regulatory activity. For example, if we have to take enforcement action to improve the service or if we investigate and agree with a complaint someone makes about the service.

More information about grading can be found on our website at: [http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/ihc_inspection_guidance/inspection_methodology.aspx](http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/ihc_inspection_guidance/inspection_methodology.aspx)

**What action we expect JDR Healthcare Ltd to take after our inspection**

This inspection resulted in two recommendations. See Appendix 1 for a full list of the recommendations.

An improvement action plan has been developed by the provider and is available on the Healthcare Improvement Scotland website: [www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx](http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx)
We would like to thank JDR Healthcare (Perth) for its assistance during the inspection.
2 What we found during our inspection

Outcomes and impact

This section is where we report on how well the service meets people’s needs.

Domain 2 – Impact on people experiencing care, carers and families

High performing healthcare organisations deliver services that meet the needs and expectations of the people who use them.

Our findings

Quality indicator 2.1 - People’s experience of care and the involvement of carers and families

The family friendly and knowledgeable service met the travel health needs of clients of all ages. The service provides additional educational sessions to the local communities about keeping safe when abroad.

The service collected feedback verbally and through social media to identify its clients’ expectations in line with its participation strategy. The service treated clients aged from birth so it was family-friendly and flexible in accommodating appointments for families with children. Clients we spoke with told us that the service was very professional and knowledgeable:

- ‘Gave us lots of travelling health advice as well as showing us what the present government advised vaccinations were.’
- ‘Friendly, professional and flexible. Puts kids at ease with his calm manner, he distracts them with cartoons, he then swiftly does the injection and then distracts again with a sticker. He also takes the time to talk over the details of the vaccination with you as a parent and any required aftercare as well as any concerns you might have.’
- ‘I would not hesitate to refer pupils or staff to him and would highly recommend him for others to use for travel health care.’

Vaccinations and information sessions were provided to schools in the Perthshire, Fife and Edinburgh areas to teach pupils about looking after themselves abroad.

Clients were given comprehensive information on vaccinations and general travel health advice on topics such as what to eat, drink and avoid when abroad. Aftercare information included side effects and emergency contact details for
the service, as well as national and international support to access when abroad.

The service’s complaints procedure highlighted that clients could complain directly to Healthcare Improvement Scotland at any time and was available on the service’s website. While no complaints had been received, a system to record and respond to complaints was in place.

**What needs to improve**
The service had started to further develop its community engagement activities and collecting feedback from clients and organisations that used it, such as GP surgeries. However, the impact of this engagement had not been measured at the time of our inspection. We will follow this up at future inspections.

- No requirements.
- No recommendations
Service delivery

This section is where we report on how safe the service is.

Domain 5 – Delivery of safe, effective, compassionate and person-centred care

High performing healthcare organisations are focused on safety and learning to take forward improvements, and put in place appropriate controls to manage risks. They provide care that is respectful and responsive to people’s individual needs, preferences and values delivered through appropriate clinical and operational planning, processes and procedures.

Our findings

Quality indicator 5.1 - Safe delivery of care

Good governance systems helped to provide safe care in this small clinic. Clinical risk was identified before treatment. Further development of the service’s safeguarding policy is required.

The service had good governance systems in place to make sure the care delivered was safe. The clinic room was clean and well maintained. Appropriate infection control processes were in place, single-use equipment was used and a contract was in place for clinical waste removal. A medical emergency kit and oxygen was available in the clinic room and the service completed advanced life saving training yearly.

An appropriate medication policy was in place and we saw a safe system of medicine procurement, storage, prescribing and administration. We saw evidence of appropriate fire and electrical safety checks for the premises.

The service proactively promoted safety and reduced risk. For example, monthly clinical audits on accidents and incidents, complaints and adverse reactions were completed. Emergency equipment was checked monthly to make sure it was in good working order. Monthly stock checks recorded vaccine batch numbers and expiry dates. All policies were reviewed every year to make sure they were in line with best practice. New policies, such as duty of candour were developed when required.

The service was aware of notification processes for medicine adverse events and completed mandatory reporting of yellow fever vaccinations.
What needs to improve
The service’s safeguarding policy provided limited information about how it would protect children or vulnerable adults at risk of harm or abuse. A clear protocol for reporting adult or child protection concerns should be further developed (recommendation a).

■ No requirements.

Recommendation a
■ We recommend that the service should update its safeguarding policy in line with the National Guidance for Child Protection in Scotland 2014.

Our findings

Quality indicator 5.2 - Assessment and management of people experiencing care

Comprehensive client assessments were clearly documented in patient care records. Good audit systems helped to make sure records were fully completed. Additional consent should be recorded for sharing information.

Clients received a phone consultation before attending the clinic. An appointment reminder system included follow-up appointments for booster vaccinations. We reviewed a sample of recent client files and found that all clients had completed the pre-travel questionnaire and consent to treatment was recorded. The client files were clear and simple. Travel details, allergies and current medication were recorded and risks of treatment discussed. To check whether files were completed correctly, the service audited five files every month and improvement actions were recorded.

A system was in place to make sure all personal data was stored securely and the service had updated its recording keeping policy in line with the new data protection regulations.

What needs to improve
The service did not record client consent for sharing information with GPs (recommendation b).

■ No requirements.
Recommendation b

- We recommend that the service should record consent to share information in the client care record.
Vision and leadership

This section is where we report on how well the service is led.

Domain 9 – Quality improvement-focused leadership

High performing healthcare organisations are focused on quality improvement. The leaders and managers in the organisation drive the delivery of high quality, safe, person-centred care by supporting and promoting an open and fair culture of continuous learning and improvement.

Our findings

Quality indicator 9.4 - Leadership of improvement and change

The service was knowledgeable in the area of travel health. Good links with national organisations helped management staff keep up to date with best practice. The service provided travel health training to other organisations.

The service had embedded factors of quality improvement in practice, including carrying out regular audits. Continuous professional development and training was completed every year to help keep skills and knowledge up to date.

The service had developed a partnership with another travel clinic to access peer advice and support when needed. This allowed best practice to be shared between the services and they planned to peer-review both service’s processes as part of continuous quality improvement.

Formal links with travel medicine-specific organisations helped keep the service up to date with legislation and best practice. The service could also ask for advice from these organisations, for example about drug interactions. Membership of professional bodies, such as the Royal College of Nursing and The International Society of Travel Medicine helped make sure that management staff had knowledge of current good practice. They also actively engaged with a network of national organisations, such as Health Protection Scotland and the Malaria Consortium to help support the service to deliver good quality care.

To support continuous learning, the service was involved in teaching travel health in partnership with a travel health training company. It also taught travel health for the Royal College of Physicians and Surgeons of Glasgow foundation and diploma course.
Local GP practices contacted the service regularly for travel health advice for their own patients.

- No requirements.
- No recommendations.
Appendix 1 – Requirements and recommendations

The actions that Healthcare Improvement Scotland expects the independent healthcare service to take are called requirements and recommendations.

- **Requirement:** A requirement is a statement which sets out what is required of an independent healthcare provider to comply with the National Health Services (Scotland) Act 1978, regulations or a condition of registration. Where there are breaches of the Act, regulations, or conditions, a requirement must be made. Requirements are enforceable at the discretion of Healthcare Improvement Scotland.

- **Recommendation:** A recommendation is a statement that sets out actions the service should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.

### Domain 2 – Impact on people experiencing care, carers and families

<table>
<thead>
<tr>
<th>Requirements</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recommendation</td>
<td>We recommend that the service should update its safeguarding policy in line with the National Guidance for Child Protection in Scotland 2014 (see page 10).</td>
</tr>
</tbody>
</table>

Health and Social Care Standards: My support, my life. I have confidence in the people who support and care for me. Statement 3.20

### Domain 5 – Delivery of safe, effective, compassionate and person-centred care

<table>
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<tr>
<th>Requirements</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recommendation</td>
<td>We recommend that the service should record consent to share information in the client care record (see page 11).</td>
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</tbody>
</table>

Health and Social Care Standards: My support, my life. I am fully involved in all decisions about my care and support. Statement 2.14
Appendix 2 – About our inspections

Our quality of care approach and the quality framework allows us to provide external assurance of the quality of healthcare provided in Scotland.

Our inspectors use this approach to check independent healthcare services regularly to make sure that they are complying with necessary standards and regulations. Inspections may be announced or unannounced.

We follow a number of stages to inspect independent healthcare services.

Before inspections

Independent healthcare services submit an annual return and self-evaluation to us.

We review this information and produce a service risk assessment to determine the risk level of the service. This helps us to decide the focus and frequency of inspection.

During inspections

We use inspection tools to help us assess the service.

Inspections will be a mix of physical inspection and discussions with staff, people experiencing care and, where appropriate, carers and families.

We give feedback to the service at the end of the inspection.

After inspections

We publish reports for services and people experiencing care, carers and families based on what we find during inspections. Independent healthcare services use our reports to make improvements and find out what other services are doing well. Our reports are available on our website at: www.healthcareimprovementscotland.org

We require independent healthcare services to develop and then update an improvement action plan to address the requirements and recommendations we make.

We check progress against the improvement action plan.

More information about our approach can be found on our website: www.healthcareimprovementscotland.org/our_work/governance_and_assurance/quality_of_care_approach.aspx
Complaints

If you would like to raise a concern or complaint about an independent healthcare service, you can complain directly to us at any time. However, we do suggest you contact the service directly in the first instance.

Our contact details are:

Healthcare Improvement Scotland
Gyle Square
1 South Gyle Crescent
Edinburgh
EH12 9EB

Telephone: 0131 623 4300

Email: comments.his@nhs.net