

**The Melbury Clinic  
& VeinCare Centre  
Award-Winning Clinic**



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

# ANNUAL REPORT 2019/20

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# Introduction

## **Mission Statement:**

*'To deliver excellence in healthcare and to put our patients at the centre of all that we do.'*

The Melbury Clinic Ltd is located on the A37, 6 miles from Yeovil and 15 miles from Dorchester.

It opened in January 2003 and was initially used by visiting clinicians and healthcare professionals to offer a range of medical, aesthetic and complimentary therapies.

Now, the Melbury Clinic and VeinCare Centre is dedicated primarily to the care of vein conditions using the latest diagnostic and treatment methods. It also holds a satellite clinic at Ringwood.

In addition, visiting clinicians provide aesthetic, occupational health and civil aviation authority medicals.

# The VeinCare Team



**Dr Haroun Gajraj, MS, BSc, FRCS**

**Director and founder of the VeinCare Centre**

Haroun has over 30 years' experience of treating people with varicose veins, thread veins and other vein complications such as phlebitis, varicose eczema and varicose ulcers. In addition to his clinical role he is responsible for all the medical activities in the Melbury Clinic. This includes participation in business meetings, staff meetings and chairing the Medical Advisory Committee. He is also the nominated individual with the Care Quality Commission.



**Jane Gajraj, BSc**

**Director**

Jane is the co-director of the Melbury Clinic. She participates in business meetings, staff meetings and is a member of the Medical Advisory Committee. In addition, she works closely with the Melbury Clinic Manager to maintain the environment.



**Maddie Groves, RN MSc**

**Operational Manager**

Maddie is the Operational Manager of the Melbury Clinic, having previously worked in the NHS for over 30 years. She is responsible for ensuring the clinic runs effectively and efficiently as well as maintaining high standards of care and cleanliness. In addition, she is required to both supervise and train staff and she works with Dr Gajraj to ensure that the clinicians practice within the regulatory framework of the Care Quality Commission. Maddie is also a member of the Medical Advisory Committee and she presents the governance agenda.



**Lisa Parsons**

**Office Administrator and Clinic Secretary**

Lisa works closely with the Manager providing both administrative and secretarial support. In addition, she is part of the management team and she attends regular business meetings, contributing to decisions that affect how the clinic operates. Lisa coordinates invoicing, payments and receipts, working closely with the bookkeeper. She is also the Fire Warden for the clinic.



**Natalie Pike**

**Senior Health Care Assistant**

Natalie is the Senior Health Care Assistant in our team who assist in the clinic. She provides support to patients during consultations as well as assisting in the treatment room during procedures. Natalie has completed training for short wave diathermy and now offers this treatment at the clinic. She is now expanding her role further and has undergone training for duplex ultrasound screening.



**Lucy Wicks**

**Health Care Assistant**

Lucy is a Health Care Assistant at the clinic and provides support to patients during consultations and assists for procedures in the treatment room. Alongside her clinical duties, Lucy leads on implementing the annual audit programme for the clinic. In addition, she has completed administration training and now provides cover for the clinic when the office administrator is away. Lucy has undergone training in the care and management of leg ulcers. This gives her the necessary skills and knowledge set to provide a leg ulcer service with Miss Catherine McGuinness.



**Sue Osborne**

**Health Care Assistant**

Sue is a Health Care Assistant and assists during procedures in the treatment room as well as supporting patients during consultations. She has extensive knowledge and transferable skills from her previous role as a Theatre Nurse in a busy General Hospital. These are very significant assets to the Melbury Clinic and VeinCare Team.

## Directors' Statements

### Haroun Gajraj:

*"I am delighted with the progress of the clinic in 2019. The clinic interior has been upgraded, new equipment has been purchased and operational policies and procedures have been refined. However, the most important asset in the clinic is our staff who have been recognised by the clinic's BVM Award for Customer Care. I am very proud to be part of the VeinCare team."*

### Jane Gajraj:

*"This year, 2019, has definitely been our 'Best Ever'. We have a team that works really well together and everyone takes pride in our clinic. Haroun and I detect a sense of 'ownership' – which pleases us greatly. Our HCA's are as diligent with the cleaning as they are with customer care. This is validated by our BVM Award for Customer Care. Our patients are usually delighted with the results of their procedures and are willing to put their experience on 'I want great care' and Google reviews."*



## Quality Services and Outcomes

The Melbury Clinic and VeinCare Centre strives to deliver the highest quality care and safety for all our patients. As an organisation we are regulated by the Care Quality Commission. The Care Quality Commission is the independent regulator of health and adult social care services in England. Its purpose is to make sure health and social care services provide people with safe, effective, compassionate high-quality care and it encourages care services to improve.

The Melbury Clinic was last inspected on 15<sup>th</sup> January 2014 and was found to have met all the standards.

There are five key questions the Care Quality Commission asks of all service providers on inspection:

**Are they safe?**

Safe: are you protected from abuse and harm.

**Are they effective?**

Effective: your care, treatment and support achieves good outcomes, helps you to maintain quality of life and is based on best available evidence.

**Are they caring?**

Caring: staff involve and treat you with compassion, kindness, dignity and respect.

**Are they responsive to people's needs?**

Responsiveness: services are organised so that they meet your needs.

**Are they well led?**

Well led: the leadership, management and governance of the organisation make sure it is providing high quality care that is based around your individual needs, that it encourages learning and innovation and that it promotes an open and fair culture.

# Safe

## *Safe: Are you protected from abuse and harm?*

Patient safety is the avoidance of unintended or expected harm to people during the provision of healthcare.

Patients should be treated in a safe environment and protected from avoidable harm.

The Melbury Clinic and VeinCare Centre recognises that healthcare carries some risk, but whenever possible we must deliver harm free care for every patient, every time.

All staff accept and embrace the learning from incidents and know that it is important to report any incident, no matter how small.

### **Incident Reporting**

The staff at the Melbury Clinic and VeinCare Centre are encouraged to report any incident whether it results in harm or not. With regards to patient safety incidents, it is vital that incidents are recorded to ensure learning takes place. Learning means working out what has gone wrong and why, so that effective and sustainable actions are taken to reduce the risk of similar incidents occurring again.

All incidents are now graded as recommended by the National Reporting and Learning System. This has superseded the National Patient Safety Agency risk matrix, which was used by the Melbury Clinic and VeinCare Centre. By grading patient safety incidents or prevented incidents according to the impact or harm they cause patients means a consistent approach to incident reporting by all staff and enables the Melbury Clinic and VeinCare Centre to monitor and analyse the data.

The following table indicates the grading of incidents:

<b>CODE</b>	<b>Degree of harm (severity/actual impact on patient)</b>
No code	No harm
B	Low (minimal harm – patient required extra observation or minor treatment)
C	Moderate (short term harm – patient required further treatment or procedure)
D	Severe (permanent or long-term harm)
E	Death (caused by the patient safety incident)

The Melbury Clinic and VeinCare Centre foster a culture of openness and transparency, which means staff feel confident raising any concerns they may have with patient safety or any other untoward incident that may occur.

All reported incidents are reviewed by the Clinic Manager and appropriate actions put in place to either prevent recurrence or reduce the likelihood of the incident occurring again.

All incidents are reviewed and discussed at the monthly staff meeting as well as the Medical Advisory Committee.

### **Learning from Incidents**

The Melbury Clinic is committed to learning from incidents and improving the care and safety for our patients.

Examples:

1. A patient felt faint while a scan of the leg was performed. She safely sat on the chair but still felt unwell and became unresponsive and had to be lowered to the floor. The incident was discussed at the staff meeting and the following actions put in place:
  - The foot pedal for the couch to be positioned at the end of the couch to allow ease of access.
  - If patient feels faint, couch to be lowered immediately and patient to be laid on the couch.

2. At the start of the endovenous laser procedure the patient was laid on the couch. The couch was raised and pushed the oxygen cylinder off the wall causing it to fall to the floor. The incident was discussed fully with staff at the staff meeting and the following actions put in place:
  - Couch raised into position before patient enters treatment room and then lowered.
  - Checking that couch is in the correct position added to the WHO checklist.

## Risk Register

The Melbury Clinic has a live Risk Register.

Risks are identified in a variety of ways including:

- Incident forms
- MHRA safety alerts
- Risks identified by staff in the clinical environment

Risks are prioritised based on the likelihood of occurrence and impact in the event of occurrence. The residual risk is the level of risk remaining after taking into account the control in place.

The scoring of risks follows the recommendations from the National Patient Safety Agency.

### Risk Matrix

	Likelihood				
Consequence	1	2	3	4	5
	Rare	Unlikely	Possible	Likely	Almost certain
5 Catastrophic	5	10	15	20	25
4 Major	4	8	12	16	20
3 Moderate	3	6	9	12	15
2 Minor	2	4	6	8	10
1 Negligible	1	2	3	4	5

There are currently 30 risks being actively managed on the Risk Register.

The following table indicates the number of risks and their grade should it occur:

1 – 3	Low Risk	4
4 – 6	Moderate Risk	18
8 – 12	High Risk	10
15 – 25	Extreme Risk	2

### **MHRA Alerts**

Patient safety alerts are received in the organisation and reviewed by a senior member of staff.

Those relevant to the clinic are reviewed by the Operational Manager and the necessary actions taken. These are clearly recorded and disseminated to all staff and reviewed at the Medical Advisory Committee.

The number of MHRA alerts received during 2019 was 119 with 11 being relevant to the clinic.

### **Infection Prevention and Control**

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 requires all providers of a regulated service to be registered with the Care Quality Commission (CQC). In addition, it states that premises and equipment must be clean and that standards of hygiene are maintained and are appropriate for the purposes for which they are being used.

To ensure we comply the Melbury Clinic has an Infection Prevention and Control Assurance Framework is in place. In addition, an Infection Prevention and Control Statement is written annually. The following audits were carried out during 2019 in relation to Infection Prevention and Control:

- Room cleaning schedules audit
- Environmental walk and cleaning audit

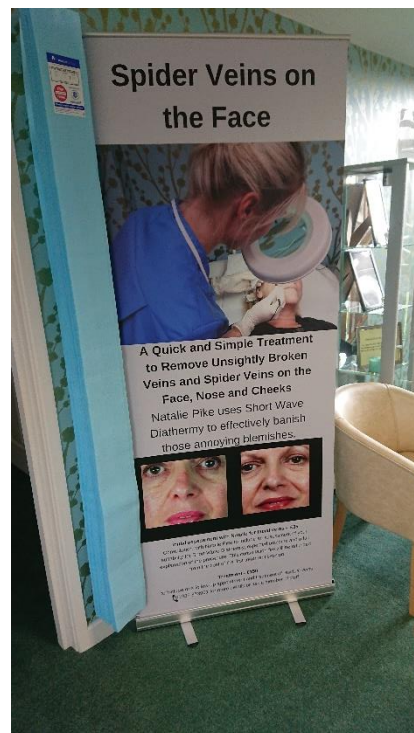
## Surgical Site Infections

Surgical site infections are one of the commonest complications following surgery. Although the risk of surgical site infection is very low with minimally invasive procedures, it is important that the number of infections are recorded as a high rate would indicate a probable breakdown in our infection control procedures.

***There were no recorded infections during 2019.***

## Shortwave Diathermy

Natalie Pike (Senior Healthcare Assistant) has been trained in assessing patients and treating facial thread veins with shortwave diathermy.



## Duplex Scan Screening

Natalie Pike (Senior Healthcare Assistant) is currently undertaking competency-based training to undertake duplex screening on patients. This will give patients the opportunity to have a screening scan to help inform their decision of attending for a full consultation and scan with a vascular consultant.

## **Dopplers**

Lucy Wicks (Healthcare Assistant) is currently undergoing competency-based training for taking and recording dopplers. This will be part of the **Leg Ulcer Service** that is planned for 2020.

## **Administration**

Lucy Wicks (Healthcare Assistant) has also undertaken enhanced administration training to ensure continuity of the service when the administrator is away.

## **Audits**

Audit in healthcare is a process used by healthcare professionals to assess, evaluate and improve care of patients in a systematic way. Audit measures current practice against a defined (desired) standard. It forms part of clinical governance, which aims to safeguard a high quality of clinical care for patients.

The Melbury Clinic has a planned audit programme throughout the year. The following year's audit programme is informed by the required improvements in practice, legislation as well as by incidents that have been raised.

## **Daily Operational Safety**

To maintain the safety and cleanliness of the clinic there are operational processes that are required to be completed on a daily, weekly, three and six monthly, and annual basis.

On a daily basis, staff are required to record both fridge and room temperatures to ensure the safe storage of medicines. In addition, they check the emergency equipment consisting of the Automated Electronic Defibrillator and oxygen cylinders. This ensures that they are ready to be used should an emergency occur.

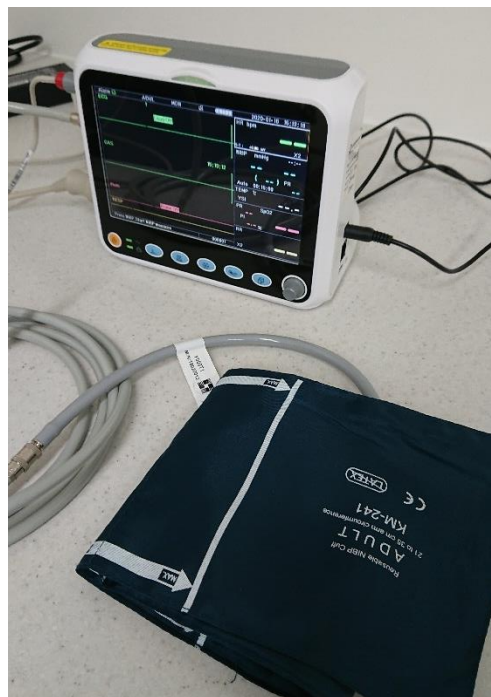
They are also required to undertake daily cleaning and complete the appropriate cleaning schedules.

The weekly, monthly and annual tasks are primarily related to maintaining a clean environment and ensuring our infection prevention and control is of the highest standard.

Annual PAT testing is required and undertaken for all electrical equipment both medical and non-medical.

### **Monitoring of Patients**

Monitoring of patients is carried out during endovenous laser procedures. This includes a continuous electrocardiogram tracing, as well as pulse and blood pressure, and oxygen saturation. During 2019 the patient monitor was replaced with a new compact model.



### **WHO Checklist**

The WHO checklist is the ‘gold standard’ in operating theatre safety and when used consistently has been shown to reduce errors and adverse events by encouraging communication and clarity.

The WHO checklist has been adapted to meet the needs of patients undergoing endovenous laser treatment in the treatment room.



## Effective

***Effective: Your care, treatment and support achieves good outcomes, helps you to maintain quality of life and is based on best available evidence.***

### **Pulmonary Embolism**

Pulmonary embolism is a serious complication of surgery of any sort. All pulmonary embolisms are recorded as adverse incidents. It is never possible to reduce the risk of pulmonary embolism to zero, but we undertake risk assessments on this for each patient.

During 2019 there was one report of a pulmonary embolism following treatment with bilateral endothermal ablation.

### **Deep Vein Thrombosis**

Deep vein thrombosis is a common complication of surgery of any sort. All deep vein thromboses are recorded.

During 2019 there were no recorded deep vein thromboses.

### **Post-Surgical Bleeding**

Bleeding after endovenous laser treatment is highly unlikely, however it could happen.

During 2019 there were no recorded post-surgical bleeds.

### **Never Events**

Never events are serious, largely preventable patient safety incidents that should not occur if existing national guidance or safety recommendations have been implemented by healthcare providers.

As the name suggests these events should never happen. If just one never event occurs, it may indicate serious failings in the safety management system

of the organisation and would require robust investigation and actions to avoid a repetition.

During 2019 there were zero Never Events.

### **NICE Guidance**

Varicose vein treatments at the Melbury Clinic and VeinCare Centre are carried out following clinical guideline (CG168) which is recommended by the National Institute for Health and Care Excellence (NICE).

The outcomes of vein treatments are judged according to NICE Quality Standard QS67.

# Caring

***Caring: Staff involve and treat you with compassion, kindness, dignity and respect.***

It is important that staff treat all patients with compassion, kindness, dignity and respect.

Our Mission Statement is:

***“Our mission is to deliver excellence in healthcare and to put our patients at the centre of all that we do.”***

## ***‘iwantgreatcare’***

‘iwantgreatcare’ is the world’s largest independent patient experience website. It allows both NHS and private healthcare patients to rate individual doctors and nursing staff on the care they provide. For the third year, Dr Haroun Gajraj has received the highest award possible receiving a Certificate of Excellence. This is an annual award made to clinicians who receive consistently outstanding patient feedback.

Examples of feedback:

*‘I would unhesitatingly recommend Dr Gajraj and his team, they are incredibly professional and easy to speak to. I was treated with expertise, kindness and care by Dr Gajraj who went above and beyond to make sure I received the help I needed.’ Written by patient, 26<sup>th</sup> November 2019*

*‘I am always treated with courtesy and respect. The procedure is explained prior to the treatment. There is a calm atmosphere. The staff are very kind and efficient. The clinic is spotless.’ Written by patient, 21<sup>st</sup> November 2019*

*‘I have recently been treated by Dr Haroun Gajraj at the VeinCare Centre for extensive recurrent varicose veins. In my view the care, treatment, and interaction by the consultant, nurses and staff were all of an exceptionally high standard. The consultations left me reassured and with a full understanding of the proposed treatment and the reasons for it. The treatment was completed successfully in a relaxed environment with explanation and reassurance at each stage. I experienced no significant discomfort. The aftercare and follow up consultations have been thorough including treatment of residual veins. It was evident that the clinic attributes great importance to patient respect and dignity together with high standards of safety and cleanliness.’ Written by a patient, 5<sup>th</sup> April 2019*

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iWantGreatCare



2019

Certificate of Excellence

Awarded to

Dr Haroun Gajraj

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A blue ink signature of Jon Twinn.

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**Jon Twinn**  
Managing Director  
iWantGreatCare

[www.iwantgreatcare.org](http://www.iwantgreatcare.org)

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Dr Cathy McGuinness has also received her Certificate of Excellence.



## Blackmore Vale Magazine Business Awards

As an organisation we are passionate about delivering excellent customer care and this was recognised at the Blackmore Vale Magazine Business Awards 2019 when we won the category Customer Service Award.



## **Responsive**

***Responsiveness: Services are organised so that they meet your needs.***

As a private clinic it is essential that the service we provide is organised to meet the needs of our patients.

We have policies and procedures in place in relation to Equality and Diversity.

In addition, all patients are treated as individuals.

Appointments are made to meet the needs of the individual patient with regards to date and time. In addition, if required, additional time will be allocated for appointments should the patient require this.

### **Staffing**

Staff duty rosters are written to meet the needs of the clinic. All staff are flexible in their working patterns to ensure the clinic is adequately staffed for its activity.

### **Pain Scores**

A pain score measures a patient's pain intensity. They are a necessity to assist with better assessment of pain and subsequent pain relief. Patients are administered tumescence local anaesthetic prior to endovenous laser treatment. Throughout the course of the treatment their pain score is recorded by the circulating nurse. If at any time the patient feels their level of pain is not acceptable additional anaesthetic is administered.

Our aim is that no patient should feel anything more than maybe very mild discomfort.

## The VeinCare Centre Procedure Survey 2019

(71 sent / 41 responses received)

Did you receive sufficient information prior to your procedure to prepare?

Yes 41

No 0

If no, what could we have done better?

*Nothing at all. I was extremely well informed; therefore well prepared.*

During the procedure did you feel safe and well looked after?

Yes 40

No 1

If no, what could we have done better?

*The nurse on duty had a terrible cold and should not really have been working, I was concerned I would pick up her bugs. I was also very cold during the procedure as the air conditioning was on high.*

Did you feel your dignity and privacy were respected throughout your time at the Clinic?

Yes 41

No 0

If no, what could we have done better?

No responses yet for this question.

Was the aftercare advice sufficient and helpful?

Yes 39

No 1

If no, what could we have done better?

*I was not prepared for the severity of pain and numbness post procedure but may have been fault if my own. May not have read all the information given to me pre procedure! I know this can of course vary.*



Would you recommend The VeinCare Centre to your friends and family?

Yes 41

No 0

If no, please tell us why

No responses yet for this question.

Do you have any suggestions for how we could improve our service?

*I am extremely happy with all aspects of my care from the actual treatment itself, to the pre and post procedure info, from the interaction with staff to paper, phone and email communication.*

*I think you run and operate an excellent service.*

*Maybe to mention when the 12v current starts heating up the vein, to mention about the burning patients might smell.*

*No suggestions - completely satisfied with my treatment- thank you*

*I'm really pleased with the care I received and have already recommended the centre to two others. I'll need my other leg treated at some point and in a strange way I'm looking forward to it because of the wonderful care I received.*

*No. The level of care is exemplary*

*I was very content with the service I received.*

*Not sure how you could improve your service, I found my experience during my procedure informative, caring and totally professional and very pleased with the results so far. Thank you.*

*Maybe offer a small snack rather than asking patients to bring their own - perhaps a sandwich that could be ordered in advance? As a patient could be paying almost £5000 it would be nice not to have to worry about making food on the day of his/her procedure. Apart from this, everything excellent.*

*Better tea and coffee. Otherwise a very positive experience. Thank you.*

*The treatment met all my expectations and was highly professional in a pleasant and caring environment.*

*Nothing to improve upon!*

*None*

## POST PROCEDURE SURVEY ANALYSIS – 2019

Throughout 2019, we conducted surveys of all patients who underwent a treatment room procedure. The aim of the survey was to measure patient satisfaction with all aspects of our service from the information patients receive prior to the procedure, to the care and treatment the patient receives during and after the procedure.

### **Results:**

71 surveys were emailed to patients a few days after their procedure, and we received 41 responses, all anonymous.

We were very pleased with the results, with patients being 100% satisfied with the information they received prior to the procedure, the dignity and privacy received throughout their time at the clinic, and 100% of patients would recommend the VeinCare Centre to friends and family.

97.6% of patients felt safe and well looked after during the procedure, with 1 patient commenting that the nurse on duty was unwell, and that she felt cold during the procedure.

97.5% of patients were satisfied with the aftercare advice, with 1 patient commenting that they were not prepared for the severity of pain and numbness post procedure, although they admit they may not have read the pre procedure information thoroughly.

Of the 13 free form comments we received, 10 were very positive, with 3 negative comments relating to the burning smell that might be present during a laser procedure, the unavailability of a snack after the procedure, and requesting better tea and coffee.

### **Actions:**

All results of the survey will be discussed formally at a staff meeting.

After discussion in-house, it was agreed to improve the tea and coffee provisions post procedure, although provision of snacks such as sandwiches was not felt to be feasible as we are a very small organisation and food preparation facilities are not adequate to provide snacks other than pre-packaged biscuits.

Dr Gajraj has reviewed all the comments with regards to the procedure itself and is planning to produce a 'frequently asked questions' section on our website to provide further information about the procedure, likely events and what patients can expect.

### **Conclusion:**

Overall, the VeinCare Centre was delighted with the response to the survey, with a 58% response rate and generally very positive feedback.

The surveys will continue into 2020, with further analysis planned for January 2021.

## Environmental Improvements

We continually look at ways to improve the environment both for staff and patients and to ensure we meet both infection prevention and control requirements as well as those of the Care Quality Commission.

In 2019 new clinical sinks and taps were installed to replace the obsolete swan-neck taps. In addition, washable flooring was laid in the downstairs consulting room and treatment room annex.



In addition, new carpeting was laid in the waiting area, landing, stairs and administration office.



## Well Led

***Well led: The leadership, management and governance of the organisation make sure it is providing high quality care that is based around your individual needs, that it encourages learning and innovation and that it promotes an open and fair culture.***

### Charitable Donations

During 2019 donations were made of out of date consumables to Monkey Work, the ape and monkey sanctuary and rescue centre in Dorset.



### Staff Training

In order to provide safe clinical care of a high standard to our patients all staff are required to undertake annual mandatory training which includes the following:

- Basic Life Support
- Intermediate Life Support (Clinical staff only)
- Infection Prevention and Control
- Documentation and Record Keeping
- Lone Worker
- Moving and Handling
- Sepsis Awareness
- Local Fire, Health and Safety
- Laser Safety
- Complaints Handling

In addition, there is also training that is required both every two years and every third.

Training and development is important for all our staff to ensure they have the knowledge and skills to give high quality care, but also to enable them to develop within their role.

Clinical staff attended the **British Association of Sclerotherapy Conference** in May, which gave them the opportunity to gain new knowledge in relation to veins and vein care and observe other professionals in practice.

### **Staff Meetings**

Staff meetings are held monthly with a standing agenda which includes governance matters such as incidents, audit and infection control. In addition, the Risk Register is reviewed every 3 months.

Staff are actively encouraged to use this forum to learn and suggest ways of improving practice within the Melbury Clinic.

### **Appraisal**

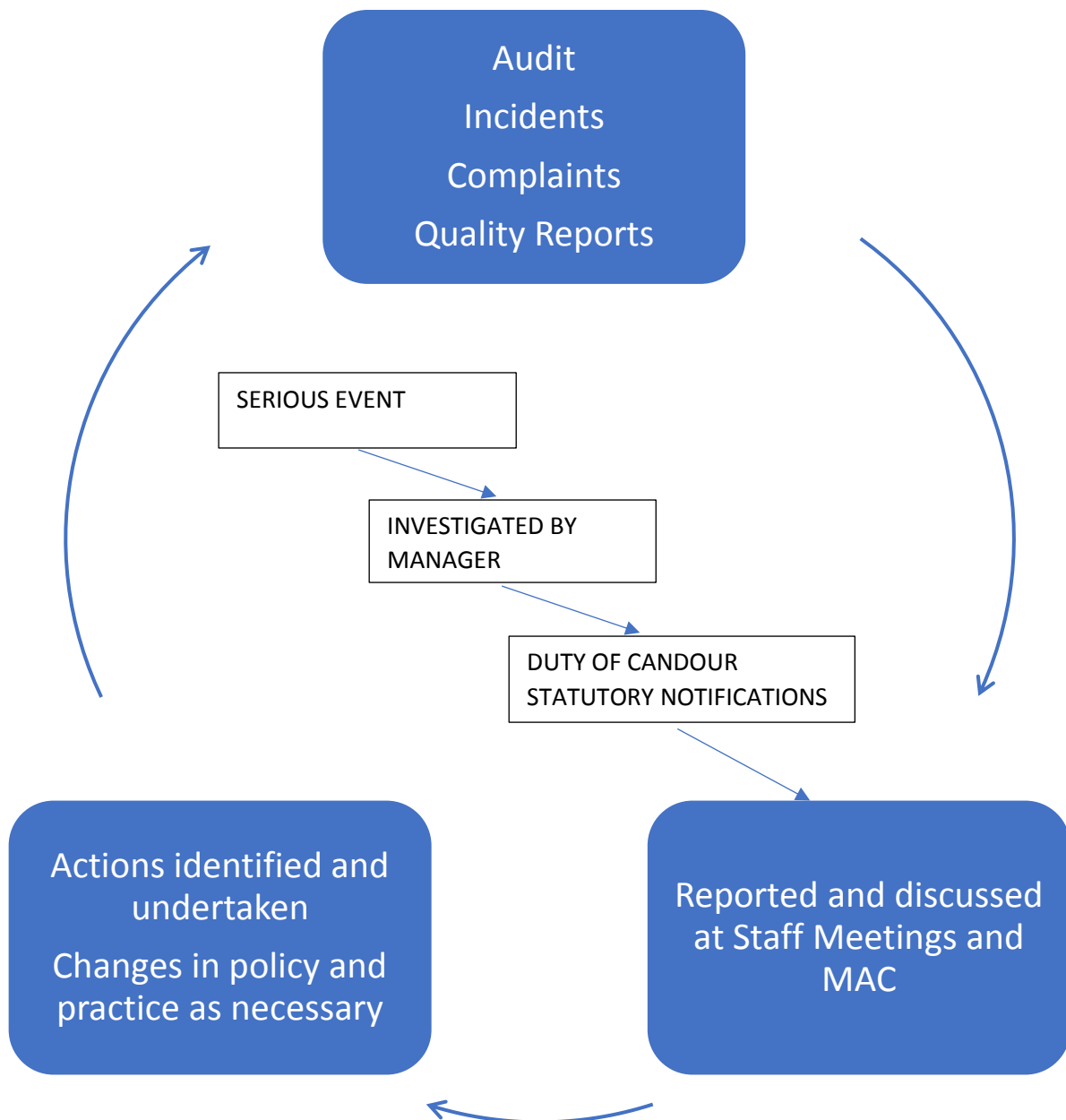
All staff participate in an annual appraisal, to review the previous year and agree learning and development objectives for the forthcoming year.

### **Clinical Governance**

Clinical Governance is a systematic approach to maintaining and improving the quality of patient care within a health system. As an organisation we are accountable for continuously improving the quality of our service and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish.

The Melbury Clinic demonstrates this in its incident reporting, audit programme and training and development of staff. It has a clear clinical governance process (see overleaf).

## MELBURY CLINIC GOVERNANCE PROCESS (2019)



## **Medical Advisory Committee**

The Medical Advisory Committee at the Melbury Clinic currently consists of five members. The role of the Committee is to provide support to the Melbury Clinic in providing a safe, secure clinical environment for the benefit of both patients and staff. Meetings are held quarterly with a standing agenda.

## **Designated Body**

The Melbury Clinic became a Designated Body in 2018. During 2019 returns were submitted to NHS England including its Annual Organisation Audit. In addition, the clinic was visited by the General Medical Council liaison advisor from which we received very positive feedback.

## **Laser Safety**

The use of a laser is necessary for the majority of patients requiring treatment for varicose veins.

All staff undergo annual laser safety training. In addition, a laser risk register is kept and advice can be sought from the Laser Protection Advisor.

A new laser was purchased during 2019 and all staff were trained on its safe use.



## **National Institute for Clinical Excellence (NICE)**

The National Institute for Clinical Excellence is an executive non-departmental public body of the Department of Health, which publishes guidelines in four areas:



- The use of health technologies with the National Health Service
- Clinical practice, guidance on the appropriate treatment and care of people with specific diseases and conditions
- Guidance for public sector workers on health promotion and ill-health avoidance
- Guidance for social care services and users

These appraisals are based primarily on evidence-based evaluations of efficacy, safety and cost-effectiveness.

Haroun Gajraj has been nominated as a specialist advisor to NICE in relation to treatment of varicose veins.

## Visiting Clinicians

The Melbury Clinic has clinicians with practising privileges who offer a range of services.

### **Cathy McGuinness, Consultant Vascular Surgeon**



Miss McGuinness is a consultant vascular surgeon with over 30 years' experience. She has a special interest in minimally invasive vein treatments, thrombosis, lymphoedema, leg ulceration and thread veins.

She visits both the Melbury Clinic and the Ringwood Health Clinic to undertake consultations and treatments.

Qualified at St. George's Hospital, London 1987  
Surgical training on South East Rotation  
Research at St Thomas' Hospital and MS Thesis on resolution of deep vein thrombosis  
Appointed Senior Lecturer and Consultant Surgeon at St. Thomas' Hospital 1999

#### **Awards include**

Lea Thomas Fellowship from Royal College of Surgeons of England, Research Fellowship from Special Trustees for St. Thomas' Hospital,  
British Journal of Surgery Research Bursary and Pump-Priming Award from Royal College of Surgeons

#### **Teaching and Training**

Director of regular local anaesthetic venous surgical training courses in Surrey  
Lecturer for Physician Associate Diploma course at University of Surrey  
Proctor for Aquilant

#### **Previous Teaching Training Posts**

Foundation Training Programme Director at Royal Surrey County Hospital  
Specialist Advisor to NICE's Interventional Procedure Programme  
Course director for St. Thomas' FRCS course  
Educational Supervisor  
Specialty Lead for Surgical Simulation for KSS Deanery  
Trust Lead for VTE  
ATLS instructor

**Publications** including chapters in Essential Vascular Surgery, Corson and Williamson: Surgery, Oxford Textbook of Surgery, Comprehensive Vascular and Endovascular surgery and The New Aird's Companion in Surgical Studies

## Dr Ian Strawford



**Clinical Director of Skin Excellence Clinics in Wells, Plymouth and the Melbury Clinic, Dr Ian Strawford is a full member of the British College of Aesthetic Medicine and a member of The Association of Surgeons and Primary Care. He has developed an excellent professional reputation as a trainer of other medical professionals and is a highly-regarded Key Opinion**

**Leader within the industry.**

Through his experience over many years as a GP and Cosmetic Doctor, Dr Ian Strawford has found that most people are looking for an honest relationship with their Doctor based on trust and the need to feel understood by them. Dr Strawford is passionate about and committed to the provision of safe and meticulous care of the highest quality, in order to achieve the best outcomes for patients.

Dedicated to remaining at the forefront of his field and updating knowledge and technical skills of the highest standards, Dr Strawford is regularly invited to speak and train at a number of national and international conferences. He also writes articles, records informative videos and is planning a book in the future.

### **Dr Pam Collins**

Dr Collins is an independent Occupational Health Physician who holds a weekly clinic at the Melbury clinic. She has a broad experience having worked for the NHS, emergency services and manufacturing industry. Most of her work is now acting as a network doctor for national providers who do not have a practitioner in this area. She also acts as an HSE Appointed Doctor.

### **Dr Mark Groom**

Mark Groom is a specialist occupational physician with a particular interest in aviation medicine. He is a CAA-authorized aeromedical examiner. He has been running an aviation medicine practice for pilots and air traffic controllers at the Melbury Clinic since 2003. He also sees patients for occupational medical assessments, whether referred by their employer or for occupational pension scheme assessments and appeals. He is a medical referee for the Maritime and Coastguard Agency and a Civil Service Pension Scheme independent medical appeal chair.