

Bridgeside Surgery

Inspection report

1 Western Road
Hailsham
East Sussex
BN27 3DG
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www.bridgesidesurgery.co.uk

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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

Requires improvement



Are services safe?

Inadequate



Are services effective?

Requires improvement



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection at Bridgeside Surgery on 11 March 2019 as part of our inspection programme. At a previous comprehensive inspection in January 2016 the practice was rated as good overall and in all key questions and population groups.

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

We have rated this practice as requires improvement overall.

We rated the practice as **inadequate** for providing safe services because:

- The practice did not have clear systems and processes to keep patients safe.
- The practice did not have appropriate systems in place for the safe management of medicines and medicines stationary.
- No environmental risk assessment had been carried out. Control of substances hazardous to health (COSHH) risk assessments had not been carried out and cleaning materials were not stored safely.
- Action to mitigate the risk of fire had not been carried out. Staff had not received fire training since 2017 and there was no record of fire drills since 2015.
- A risk assessment for staff in relation to the need for disclosure and barring service (DBS) checks did not take account of those staff with chaperoning duties.

We rated the practice as **requires improvement** for providing effective services because:

- The practice was unable to show that staff had the skills, knowledge and experience to carry out their roles. There were gaps in staff training, including in relation to the appropriate level of child safeguarding training for clinical staff.

We rated the practice as **requires improvement** for providing well-led services because:

- Leaders could not show that they had the capacity and skills to deliver high quality, sustainable care.
- The overall governance arrangements were ineffective.
- The practice did not have clear and effective processes for managing risks, issues and performance.

These areas affected all population groups so we rated all population groups as **requires improvement**.

We rated the practice as **good** for providing caring and responsive services because:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.

The areas where the provider **must** make improvements are:

- Ensure that care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.
- Ensure persons employed in the provision of the regulated activity receive the appropriate support, training, professional development, supervision and appraisal necessary to enable them to carry out the duties.

Details of our findings and the evidence supporting our ratings are set out in the evidence tables.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Population group ratings

Older people	Requires improvement 
People with long-term conditions	Requires improvement 
Families, children and young people	Requires improvement 
Working age people (including those recently retired and students)	Requires improvement 
People whose circumstances may make them vulnerable	Requires improvement 
People experiencing poor mental health (including people with dementia)	Requires improvement 

Our inspection team

Our inspection team was led by a CQC inspector and supported by a GP specialist adviser.

Background to Bridgeside Surgery

Bridgeside Surgery is based in Hailsham, East Sussex in a residential area. Further information about the practice can be found by visiting their website, .

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, family planning, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.

Bridgeside Surgery is located in the NHS Eastbourne, Hailsham and Seaford clinical commissioning group (CCG). The practice holds a contract to provide general medical services and at the time of our inspection there were approximately 6,200 patients on the practice list. The practice has a slightly higher than average number of children under the age of 18 and a higher than average number of patients over the age of 65. The practice is located in an area that is considered to be in the sixth most deprived centile nationally where one is considered to be the least deprived and 10 the most deprived. The practice has a higher than average proportion of patients who are unemployed and a higher proportion of patients with a long-term health condition when compared to national figures.

The practice is run by three GP partners (male and female). The GP partners are supported by a salaried GP (female), a paramedic practitioner (male), two practice nurses, three healthcare assistants and a phlebotomist (all female). A practice manager and deputy practice manager are in post along with a small team of clerical and reception staff.

The practice is open between 8.30am and 6.30pm Monday to Friday, telephones are open from 8.00am each morning. Extended hours appointments are offered on a Monday evening and Wednesday morning. Evening and weekend appointments were available through a local extended hours initiative and appointments could be pre-booked through the practice. When the practice is closed patients are advised to call NHS 111 where they will be given advice or directed to the most appropriate service for their medical needs.

The service is provided from the following location:

1 Western Road, Hailsham, East Sussex, BN27 3DG.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met: The registered person had systems or processes in place that were operating ineffectively in that they failed to enable the registered person to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk. In particular: There was no health and safety or control of substances hazardous to health risk assessments and the fire risk assessment did not sufficiently identify or mitigate all risks. A disclosure and barring service risk assessment did not take account of the chaperoning duties of some staff. The practice had not taken action to ensure they had oversight of the DBS check status of all staff. Meetings were not always held regularly within the practice and minutes of multidisciplinary meetings were not maintained so as to provide oversight of discussions.</p> <p>This was in breach of regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014</p>
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 18 HSCA (RA) Regulations 2014 Staffing</p> <p>How the regulation was not being met. The service provider had failed to ensure that persons employed in the provision of a regulated activity received such appropriate support, training, professional development as was necessary to enable them to carry out the duties they were employed to perform. In particular: There were gaps in training. GPs and nurses had not been trained to the appropriate level of child safeguarding training. Fire training had not been completed since 2017. Infection control for some clinical staff had not been updated in more than three years. Four clinical</p>

This section is primarily information for the provider

Requirement notices

staff had yet to do adult safeguarding training. Staff had not completed training in the Mental Capacity Act 2005 and deprivation of liberty safeguards, with the exception of one GP. There was no record of staff having completed moving and handling training.

This was in breach of regulation 18 (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

This section is primarily information for the provider

Enforcement actions

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these. We took enforcement action because the quality of healthcare required significant improvement.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment How the regulation was not being met. The provider had failed to ensure the proper and safe management of medicines. In particular: Medicines were stored in an unlocked cupboard in an unlocked room. There was no internal tracking of printer prescriptions within the practice and printer prescriptions were kept unlocked. Health and safety risk assessments of the environment were not carried out, including in relation to slips, trips and falls and the control of substances hazardous to health. The risk of fire had not been appropriately mitigated due to a lack of fire safety training and no recorded fire drills since 2015. This was in breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
Family planning services	
Maternity and midwifery services	
Surgical procedures	
Treatment of disease, disorder or injury	