

Beaumont Park Surgery

Inspection report

The Surgery, Hepscott Drive Beaumont Park Whitley Bay NE25 9XJ Tel: 01912514548 www.beaumontparkmedicalgroup.co.uk

Date of inspection visit: 04 May 2023 Date of publication: 02/08/2023

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?	Requires Improvement	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive to people's needs?	Good	
Are services well-led?	Good	

Overall summary

We carried out a short-notice, focused inspection at Beaumont Park Surgery on 4th May 2023. The practice remains rated good overall.

We previously inspected the practice on 8 December 2016. At that time, the practice was rated good overall and for each of the five key questions.

This inspection included an on-site inspection and looked at the key question is the service safe. We have rated the practice as requires improvement for safe. This was in line with our published methodology to limit ratings at the key question level where we have identified a breach of regulations. Overall, the practice remains rated good.

Safe - requires Improvement.

Effective - not inspected, rating of good carried forward from previous inspection. Caring - not inspected, rating of good carried forward from previous inspection. Responsive - not inspected, rating of good carried forward from previous inspection. Well-led -- not inspected, rating of good carried forward from previous inspection.

The full reports for previous inspections can be found by selecting the 'all reports' link for Beaumont Park Surgery on our website at www.cqc.org.uk

Why we carried out this inspection

This was an urgent focused inspection. We have carried out this inspection because we received information of concern relating to infection control issues at the practice.

How we carried out the inspection

This inspection was carried out by 2 CQC inspectors who visited the practice after a short-notice announcement.

This included:

- Observing the practice.
- Reviewing evidence of policies and documents in line with the 'Safe' domain.

Our findings

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 found that:

- At this inspection we found that the practice did not have an infection prevention and control lead in place.
- We found that there was a lack of infection control audit activity being carried out.

Overall summary

- There was limited information surrounding staff vaccinations; both pre-employment and once employment had commenced. For example, Covid-19 and Flu vaccinations.
- There was evidence that cleaning logs had recently been put in place and were now being used.
- Not all staff had received appropriate safeguarding training at the time of the inspection. Staff were also unsure who the safeguarding lead at the practice was.
- The emergency equipment was located in various places around the practice. Whilst a member of staff was checking the equipment was working, no system was in place for it to be checked in their absence. Other members of staff were unaware a system for administration staff to carry out checks on the defibrillator had been introduced.
- The waiting room and public spaces were clean and free from clutter.
- Staff who hadn't been subject to a Disclosure and Barring Service (DBS) check had not been risk assessed to support this.

We found 1 breach of regulation. The provider **must:**

• Ensure care and treatment is provided in a safe way to patients.

In addition, the provider **should:**

- Review and improve processes and awareness around significant event reporting and the sharing of lessons learned as a result.
- Review and improve processes for the checking of emergency medicines and equipment, including formalising arrangements for this to carry on in the absence of designated people.
- Complete a risk assessment to support the decision not to carry out a Disclosure and Barring Service (DBS) check for any member of staff.

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Our inspection team

Our inspection team was led by a CQC lead inspector and a second CQC inspector who visited the practice and spoke with the practice manager, paramedic and nursing staff. Staff were also given the opportunity to forward any comments or concerns to inspectors after we had left the practice.

Background to Beaumont Park Surgery

Beaumont Park Surgery is registered with the Care Quality Commission to provide primary care services. It is a medium sized practice providing care and treatment to patients of all ages, based on a General Medical Services (GMS) contract agreement for general practice. The practice is situated in Whitley Bay and is part of the NHS North Tyneside Integrated Care Board (ICB)).

The practice provides services to approximately 6,505 patients from one location, Beaumont Park Surgery, Hepscott Drive, Whitley Bay, NE25 9XJ. We visited this location as a part of the inspection. The practice had a mostly white British population. Nationally reported data showed that 1.6% of the population were Asian and 1.1% were from other non-white ethnic groups.

The practice is located in a purpose built purpose-built building, with all treatment and consultation rooms on the ground floor.

The practice provides a range of services and clinics, including services for patients with asthma, heart disease and diabetes. There are 3 GP partners (all female), 3 nurses (all female), a paramedic practitioner (female) and 4 Health Care Assistants (all female).

The practice is open: Monday- Friday, 8am-6pm. Extended Access is provided by Tyne Health during the hours of Monday-Friday 4pm-8pm, Saturday 9am-5pm, and Sunday 11am-3pm.

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment
Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 12 HSCA (RA) Regulations 2014 Safe Care and Treatment Care and treatment must be provided in a safe way for
	service users How the regulation was not being met:
	The registered persons had not done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:
	 Some members of staff had not completed safeguarding training to the required level for their role. In addition, some staff were not aware who the designated safeguarding lead was in the practice. There was only limited assessment of the risk of, and preventing, detecting and controlling the spread of, infections, including those that are health care associated. Infection control audits had been drawn up, but not completed and the practice did not have an infection control lead in place. The vaccination status of staff was unclear, as the provider was not maintaining an accurate record of such in line with guidance. This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.