

28 Beaumont Street

Quality Report

28 Beaumont Street,
Oxford,
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Date of inspection visit: We have not revisited 28 Beaumont Street Surgery, as part of this review because it was able to demonstrate that it was meeting the standards without the need for a visit.
Date of publication: 28/02/2017

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 service

Good 

Are services effective?

Good 

Summary of findings

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Overall summary

Letter from the Chief Inspector of General Practice

In April 2016 we carried out a comprehensive inspection of 28 Beaumont Street. Shortfalls were identified relating to the effective delivery of healthcare services at this practice. As a result of this inspection, we asked the practice to make improvements to ensure that staff were aware of the principles and requirements of the Mental Capacity Act (2005) and the Gillick competencies.

We also found that the practice did not have an effective system for the recording and coding of patient care on the patient record system. The record system did not alert staff to vulnerable patients. This meant that information was not always readily available to all staff and delivery of care could be compromised. The practice had not undertaken a comprehensive fire risk assessment, and improvements were needed to monitor and record staff training provision.

The practice was rated as requiring improvement for effective services, and good for safe, caring, responsive and well led services. The practice had an overall rating of good.

We carried out a desk based inspection in November 2016 to ensure the practice had made improvements since our last inspection. The practice sent us evidence in the form of training certificates for three members of staff,

details of their fire risk assessment, and an updated staff training record document. In addition the practice also supplied a comprehensive assessment of the steps they had taken, to demonstrate that changes had been made.

We found the practice had made improvements since our last inspection in April 2016.

At this inspection we found that:

- The practice had provided training for members of the nursing and senior management team. This was to ensure that staff were able to understand and determine the principles of the Mental Capacity Act 2005, and Gillick competency.
- The practice had reviewed the recording and coding of patient care on the patient record system. As a result the practice had advised us that they were now auditing and monitoring this issue.
- The practice had instructed an independent company to assess the risk of fire in the practice and produce a comprehensive fire risk assessment.
- Actions from this risk assessment included regular fire drills and monthly audits of fire safety risks.
- Systems were now in place to reduce and minimise the risk of fire to both staff and patients.

Summary of findings

- The practice had supplied a copy of their training records, to demonstrate the steps taken to improve the previous training recording issues found.
- Systems were now in place to monitor training and ensure that effective care is made available to patients.

Following this desk based inspection we rated the practice as good for providing effective services. The

overall rating for the practice remains good. This report should be read in conjunction with the full inspection report of 5 April 2016. A copy of the full inspection report can be found at www.cqc.org.uk.

Professor Steve Field (CBE FRCP FFPH FRCGP)

Chief Inspector of General Practice

Summary of findings

The five questions we ask and what we found

We always ask the following five questions of services.

Are services effective?

Since our last inspection in April 2016, the practice was found to have undertaken work to address the previous issues found by:

- Providing training for members of the nursing and senior management team, to ensure they were able to understand and determine the principles of the Mental Capacity Act, and Gillick competencies.
- Reviewing the recording and coding of patient care on the patient record system.
- Auditing and monitoring the recording and coding of patient care on the patient record system.
- Instructing an independent company to assess the risk of fire in the practice.
- Producing a fire risk assessment, and providing examples that all staff members were now following this.
- Ensuring systems were now in place to reduce and minimise the risk of fire to both staff and patients.
- Supplying a copy of training records to show the improvements made to the monitoring and record keeping of staff training.
- Ensuring systems were now in place to monitor training and ensure that effective care is made available to patients

Good



28 Beaumont Street

Detailed findings

Our inspection team

Our inspection team was led by:

Our follow up desk top inspection was undertaken by a CQC Assistant Inspector.

Background to 28 Beaumont Street

28 Beaumont Street has a patient list of approximately 4900 patients. It is located in Oxford. The patient list had a much higher proportion of young adults than average, due to registering high numbers of university students and lower numbers of older patients. The local area had low instances of social and economic deprivation. There was some ethnic diversity, especially in the student population the practice served. The practice was located in a converted Victorian building and alterations had been made to ensure the ground floor was accessible for patients.

There are four GP partners at the practice, two of whom are male and two who are female. The practice also has an academic assistant GP. There are two female practice nurses, including a nurse practitioner, and one healthcare assistant who was also a phlebotomist. A number of administrative staff and a practice manager support the clinical team. There are a total of 21 GP sessions per week GPs and 1.07 whole time equivalent nurses. The practice phone lines are open between 8am and 6.30pm Monday to Friday and appointments were available from 8.30am to 6pm. Extended surgery hours are provided from 6.30pm to

8pm on Tuesdays and 8am to 10pm Saturday mornings. When the practice was closed patients could access out of hours GP services by calling the NHS 111 service. This was clearly displayed on the practice's website.

This is a training practice and there was one GP in training working at the practice. 28 Beaumont Street was inspected in 2013 and we did not rate the practice as this was inspected under a previous methodology.

The practice delivers its services from: 28 Beaumont Street, Oxford, Oxfordshire, OX1 2NP

Why we carried out this inspection

We carried out a comprehensive inspection on 5 April 2016 and published a report setting out our judgements. The practice was overall rated as good. However, it was found to be requires improvement in the effective domain. This was due to issues surrounding staff awareness of the principles and requirements, of the Mental Capacity Act 2005, and Gillick competency. In addition, the practice did not have an effective system for monitoring training and the record keeping related to this monitoring. Furthermore, the practice was unable to produce a comprehensive fire risk assessment. Finally, we also found that the practice needed to review the recording and coding of patient care on the patient record system.

We carried out a focussed desk based inspection of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service.

Detailed findings

This report should be read in conjunction with the full inspection report. A copy of the full inspection report can be found at www.cqc.org.uk.

How we carried out this inspection

We undertook a focused desk based inspection of 28 Beaumont Street surgery 15 November 2016. This was carried out to check that the practice had resolved the issues which had been found during our previous inspection in April 2016. We asked the provider to send evidence of the changes they had made to comply with the standards they were not meeting previously.

To complete this desk based inspection we:

- Reviewed evidence that the practice provided to demonstrate the improvements made.

Because this was a focused follow up inspection we looked at one of the five key questions we always ask:

- Is it effective?

We have not revisited 28 Beaumont Street Surgery as part of this review because the practice was able to provide evidence requested, without the need for an inspection visit.

This report should be read in conjunction with the full inspection report of CQC visit on 5 April 2016. A copy of the full inspection report can be found at www.cqc.org.uk.

Are services effective?

(for example, treatment is effective)

Our findings

When we inspected the practice in April 2016, we found staff were unaware of the principles and requirements of the Mental Capacity Act 2005, and the Gillick competency. We found that staff had received training in areas such as safeguarding, infection prevention and control, fire safety, health and safety and confidentiality. However, the practice did not have an effective system for monitoring staff training, and the record keeping related to this. We also found that the practice did not have a comprehensive fire risk assessment in place. Finally, we found that there were issues with coding on the patient records system, which made it difficult to manage and monitor patients with long term conditions.

Following publication of our report of the inspection, the practice contacted us and provided evidence of the changes they had implemented. The practice supplied a wide range of supporting evidence including: training certificates, a comprehensive fire risk assessment, and a copy of staff training records. In addition the practice had a supplied a further supporting document, to demonstrate the steps they had taken to improve their coding system and the quality of patient care provided.

We undertook a desk based inspection in November 2016 of the evidence provided, to ensure that improvements had been completed. From our desk based inspection we found:

Consent to care and treatment

- The practice had provided external training for nursing staff, to help improve their understanding of the Mental Capacity Act 2005 and Gillick competency. In total two members of the nursing staff were identified by the practice, based on our previous inspection, as requiring additional training. The practice also provided training in this area for one member of the administration and leadership team, to further support learning and development within the practice.
- The training covered topics such as consent in children, and the Gillick competence and Fraser guidelines. In addition the practice was able to provide evidence of this training taking place, by supplying training

certificates. The practice also advised us, that senior management took steps to ensure that, knowledge gained from this course was thoroughly understood by staff.

Management, monitoring and improving outcomes for people

- The practice had reviewed its system for the recording and coding of patient care on the patient record system. This included a review of patients' care plans held digitally, the management of patients' long term conditions and all new patients living in care homes. We saw evidence which demonstrate quality improvements the practice had implemented.
- The practice provided additional training and support to both their nurses and healthcare assistants on coding records accurately, such as when taking blood.
- The practice was now using an updated computer system which enabled them to audit digital care plans and this was being carried out on a monthly basis.

Effective staffing

- The practice had reviewed their process for recording and monitoring staff training, and provided a copy of the current staff training recording system. The recording system included details of mandatory, and ongoing professional development training. Completion dates of training were in place and areas where staff still needed to complete or update their training were easily identifiable to enable the practice to plan future training for staff. The practice manager presented the training record at a monthly partners meeting, for discussion and review.
- Policies and procedures regarding staff training had been reviewed. As a result, the practice manager now reviewed and updated staff training records on a minimum of a quarterly basis, in order to schedule mandatory training for all staff. The practice manager also met with staff during their appraisal to discuss and identify any training needs staff might have.
- Since the last inspection an independent company had undertaken a comprehensive fire risk assessment for the practice. This included preventative measures staff

Are services effective? (for example, treatment is effective)

could take to reduce the risk of fire. The assessment further identified potential fire risks and hazards within the practice, and provided recommendations on how to address such risks.

- The practice had advised us that they had taken steps to address a majority of the issues from the fire risk

assessment. In addition, the practice fire warden conducts monthly audits into the day to day fire risks within the practice. Fire drills are carried out periodically (twice a year), and as a result, all staff are aware of the fire evacuation procedures.