

Brighton Skin Surgery

Inspection report

Mile Oak Medical Centre
Chalky Road
Brighton
BN41 2WF
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www.brightonskinsurgery.co.uk

Date of inspection visit: 14 July 2023
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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

Good 

Are services safe?

Good 

Overall summary

This service is rated as Good overall.

The key questions are rated as:

Are services safe? - Good

Are services effective? - Good (carried over from previous inspection)

Are services caring? - Good (carried over from previous inspection)

Are services responsive? - Good (carried over from previous inspection)

Are services well-led? - Good (carried over from previous inspection)

We carried out an announced comprehensive inspection of Brighton Skin Surgery on 17 June 2022. We identified breaches of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and issued a requirement notice. The service was rated as requires improvement for providing safe services. It was rated as good overall and good for providing effective, caring, responsive and well led services.

We carried out this inspection of Brighton Skin Surgery on 14 July 2023, to confirm that the service now met the legal requirements in relation to those breaches of regulation and to ensure sufficient improvements had been made. As a result of this inspection, the service is now rated as good for providing safe services. Our ratings of good for effective, caring, responsive and well led services are carried over from the previous inspection.

We carried out an announced visit to the service on 14 July 2023. We spoke to staff and reviewed documentary evidence during our site visit.

Brighton Skin Surgery provides an independent, doctor-led dermatology, minor surgery service. Procedures offered include skin tag, cyst, mole, wart and cherry or blood spot removal.

This service is registered with CQC under the Health and Social Care Act 2008 in respect of all of the services it provides.

Brighton Skin Surgery is registered with the Care Quality Commission to provide the following regulated activities: Treatment of disease, disorder or injury, Diagnostic and screening procedures and Surgical procedures.

The medical director is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the service is run.

We found that the service had made improvements since our previous inspection and was compliant with the requirement notice. In particular:

- The provider had developed monitoring processes to fully assure themselves that the premises they were leasing were safe and that health and safety requirements were met.
- Risks associated with Legionella, electrical and fire safety arrangements within the premises were appropriately assessed and managed.

Overall summary

- Appropriate records were held relating to staff immunisations, in line with current guidance.

The areas where the provider had made other improvements were:

- Information was provided for patients on the service's website about how to make a complaint.
- Policies were monitored to ensure their timely review.

The areas where the provider should make improvements are:

- Develop processes to record assurance checks undertaken to review health and safety monitoring arrangements.

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.

Background to Brighton Skin Surgery

Brighton Skin Surgery provides an independent, doctor-led dermatology minor surgery service. Procedures offered include skin tag, cyst, mole, wart and cherry or blood spot removal. The service is based within a local NHS GP practice, located on the outskirts of the city of Brighton and Hove.

The Registered Provider is Dr Avni Patel.

Brighton Skin Surgery is located at Mile Oak Medical Centre, Chalky Road, Brighton BN41 2WF.

The service's opening times are:

Monday to Friday: 9am to 5pm - enquiries only.

Fridays and occasional Tuesdays: minor surgery services by appointment.

Services are provided by the medical director, an experienced GP with a special interest in dermatology, who holds a Diploma in Dermatology. There are no other staff employed by the service.

The service is run from a minor surgical suite which is leased by the provider. The service utilises a reception and waiting area which is staffed and managed by the host GP practice. Access to the premises and the minor surgical suite are at street level to support patients with limited mobility.

Are services safe?

The service had systems to keep people safe.

- As the sole employee of the service, the medical director held all required evidence to support their suitability for their role and evidence of all required checks. The provider had an agreement with the host GP practice for them to supply reception staff support and staff to act as chaperones, when required.
- At our previous inspection, we reviewed processes for the monitoring of staff immunisations. The medical director held records of their own immunisation status in line with current guidance. However, the provider had not assured themselves that records held in relation to the immunisation status of reception staff were complete. At this inspection we found that the provider had assured themselves that the monitoring of all staff immunisations was in line with current guidance.
- At our previous inspection we found that the provider had not sought assurances that risks associated with fire safety and Legionella within the premises were appropriately monitored or managed. The provider was unable to demonstrate that a Legionella risk assessment or processes to mitigate risks associated with Legionella, were in place. (Legionella is a particular bacterium which can contaminate water systems in buildings). The provider had not sought assurances to confirm that a fire risk assessment of the premises was in place and told us they had not participated in a fire drill or any simulated evacuation of the premises.
- At this inspection we found that the provider had implemented improved processes to seek assurances that health and safety risks were appropriately managed. The provider told us they now met regularly with premises managers to review health and safety monitoring arrangements. We noted that these meetings had not been recorded. However, the provider was able to describe actions which had been completed and had a good understanding of health and safety processes implemented.
- The provider was able to demonstrate that a comprehensive assessment of the risks associated with Legionella bacteria had been carried out in September 2022. They had also assured themselves that resulting actions had been responded to in a timely manner.
- The provider was able to demonstrate that a fire risk assessment of the premises had been carried out in October 2022 and had assured themselves that all required remedial actions had been completed. There was appropriate fire-fighting equipment located within the premises, as well as emergency lighting and a fire alarm, which the provider had assured themselves were regularly serviced and maintained. The fire alarm was tested weekly. There was an electrical safety certificate for the premises. Fire alarm and fire extinguisher servicing had been undertaken in June 2023. The provider had undertaken fire safety training had participated in a fire drill since our previous inspection.
- The provider was able to demonstrate that there were documented risk assessments in place to manage risks associated with the premises and general environment.
- We found that equipment was maintained according to manufacturers' instructions. For example, the provider was able to demonstrate that electrical equipment had undergone portable appliance testing in June 2023.
- The provider was able to demonstrate that written health and safety and fire safety policies and procedures provided them with clear guidance and had been subject to review.