

The Beaumont Practice

Inspection report

Hornsey Rise Health Centre
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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 to people's needs?

Good



Are services well-led?

Requires Improvement



Overall summary

We carried out an announced comprehensive inspection at The Beaumont Practice between 27th -30th April 2021. Overall, the practice is rated as requires improvement.

Why we carried out this inspection

We carried out an inspection as the provider had changed their registration from a sole practitioner to a partnership and so this was the provider's first inspection under their current registration.

How we carried out the inspection

Throughout the pandemic CQC has continued to regulate and respond to risk. However, taking into account the circumstances arising as a result of the pandemic, and in order to reduce risk, we have conducted our inspections differently.

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site. This was with consent from the provider and in line with all data protection and information governance requirements.

This included:

- Conducting staff interviews using video conferencing
- Completing clinical searches on the practice's patient records system and discussing findings with the provider
- Reviewing patient records to identify issues and clarify actions taken by the provider
- Requesting evidence from the provider
- A short site visit

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 have rated this practice as requires improvement overall.

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

- The practice had not provided care and treatment in a way that kept patients safe. In particular, we found there was unsafe and inappropriate management and monitoring of patients prescribed high-risk medicines and drug safety alerts were not being appropriately actioned. Because of the safety concerns we identified, we served a warning notice under Section 29 of the Health and Social Care Act 2008, as the provider was failing to comply with the relevant requirements of Regulation 12, (1), Safe care and treatment, of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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

Overall summary

- We were not assured patients prescribed high-risk medicines for long-term conditions and mental health conditions had received all necessary blood tests within appropriate timescales prior to prescribing as per national guidelines. The uptake for cervical screening was also below the national target of 80%.

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

- The practice did not have clear and effective governance processes for managing and monitoring patients being prescribed high risk medicines and actioning drug safety alerts.

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.

For the effective domain, we rated older people; people whose circumstances may make them vulnerable and families, children and young people as **good**. We rated people with long-term conditions and people experiencing poor mental health as **requires improvement** because of unsafe prescribing of high-risk medicines. We rated working age people as **requires improvement** because the cervical screening uptake rate was below the national target.

For the responsive domain, we rated all population groups as **good**.

We found two breaches of regulations. The provider **must**:

- Ensure that care and treatment is provided in a safe way (Please see the specific details on action required at the end of this report).
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care. (Please see the specific details on action required at the end of this report).

The provider **should**:

- Ensure the outstanding actions set out in the fire risk assessment are completed.
- Continue with efforts to improve the uptake of cervical screening and childhood immunisations.
- Continue with efforts to improve GP patient survey results data.

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

Our inspection team

Our inspection team was led by a CQC lead inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to The Beaumont Practice

The Beaumont Practice operates from the Hornsey Rise Health Centre, Hornsey Rise, London N19 3YU. It shares the purpose-built premises, which is managed by the local trust, with other healthcare providers. There are good local bus services.

The practice provides NHS services through a General Medical Services (GMS) contract to approximately 3000 patients. It is part of the NHS Islington Clinical Commissioning Group (CCG) which is made up of 33 general practices. The practice is registered with the CQC to carry out the following regulated activities:

- Diagnostic and screening procedures;
- Treatment of disease, disorder or injury; and
- Maternity and midwifery services.

The patient profile for the practice has an above average working age population, between the ages of 20 and 49 and fewer than average older patients, aged over 65. The locality has a higher than average deprivation level. Over a third of the practice area population is of a black and minority ethnic background.

The practice's clinical team is led by a female GP partner, supported by a female salaried GP. The clinical team is complemented by a female practice nurse and a male healthcare assistant. The administrative team is comprised of a finance manager, who is also a non-clinical partner, practice manager and administrative staff.

GP appointments are available daily between 9.30am-12.30pm and 4.30pm-7.30pm. The nurse works Thursdays 9am-5pm. Healthcare assistant appointments are available Wednesday 9am-4pm and Friday mornings between 9.15am-11.45am.

Routine appointments with GPs can be booked up to six weeks in advance. Appointments in the morning are 10 minutes long; those in the afternoon are 15 minutes. Double appointments may be booked if patients wish to discuss more than one issue. Patients can book appointments online if they have previously registered to do so. Same-day urgent appointments are available. Video and Telephone consultations are available daily and the GPs also make home visits to see house-bound patients.

In addition to the extended hours operated by the practice, the CCG has commissioned the “IHub” extended hours service, operating until 8pm on weekdays and between 8am and 8pm at weekends and bank holidays at three sites across the borough. Appointments can be booked by patients contacting their own general practice. There is also a walk-in service available to all patients at a central location. The practice has opted out of providing an out of hours service. Patients calling the practice when it is closed are connected to the local out-of-hours service provider. There is information given about the out-of-hours service provided on the practice website.

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 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 Treatment of disease, disorder or injury Maternity and midwifery services	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• The provider did not have an effective policy or process in place to ensure safe prescribing of high-risk medicines.• The provider did not have an effective policy or process in place to ensure drug safety alerts were being actioned. <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

Enforcement actions

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 Treatment of disease, disorder or injury Maternity and midwifery services	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>Care and treatment must be provided in a safe way for service users</p> <p>How the regulation was not being met:</p> <ul style="list-style-type: none">• The provider did not always ensure that blood test results were being reviewed prior to safely prescribing high-risk medicines to patients.• Comprehensive care records were not maintained for patients who were administered high-risk medicine.• The provider did not always record, or action drug safety alerts received by healthcare authorities. <p>This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>