

# Regency Surgery

## Inspection report

4 Old Steine  
Brighton  
BN1 1FZ  
Tel: 01273600103  
www.regencysurgery.nhs.uk

Date of inspection visit: 20 June 2023 to 22 June  
2023  
Date of publication: 22/09/2023

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?

Good 

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 an announced comprehensive inspection at Regency Surgery from 20 June 2023 to 22 June 2023. Overall, the practice is rated as good.

Safe - good

Effective - good

Caring - good

Responsive - good

Well-led - good

We carried out an announced comprehensive inspection of Regency Surgery in June 2022. This was part of a random selection of services rated Good or Outstanding, to test the reliability of our new monitoring approach. At this inspection the practice was rated inadequate and placed in special measures. We issued two warning notices against Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance). We carried out an inspection in December 2022 and confirmed the provider was compliant with the warning notices. However, as there were some systems and processes that were still in progress or needed to be embedded, we issued a requirement notice for Regulation 17 (Good governance).

The full reports for previous inspections can be found by selecting the 'all reports' link for Regency Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

## Why we carried out this inspection

This inspection was carried out to confirm whether the provider continued to meet the legal requirements of regulations and to ensure enough improvements had been made.

The focus of our inspection included:

- All key questions
- To follow up on breaches of regulation 17 (good governance)
- Areas we said the provider should improve;
  - Complete all remedial actions as identified by the fire risk assessment.
  - Strengthen monitoring checks of emergency equipment to include the defibrillator kept at the neighbouring practice.

## How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews on site and using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.

# Overall summary

- A staff questionnaire.
- A 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 found that:

- The provider had continued to make improvements since our last inspection and had fully addressed all of the areas of concern raised by our last inspections.
- Risks to patients, staff and visitors were assessed, monitored and managed effectively. This included child and adult safeguarding processes, staffing including recruitment and supervision, medicines management, health and safety, and information governance.
- The practice provided care in a way that kept patients safe and protected them from avoidable harm.
- Patients received effective care and treatment that met their needs.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients could access care and treatment in a timely way. The practice was committed to offering a flexible and accessible appointment system that met the patient needs.
- Feedback from patients from the national GP patient survey was consistently higher than local and national averages.
- The way the practice was led and managed promoted the delivery of high-quality, person-centred care.
- Staff were proud to work at the practice and happy with the level of support provided by their management team and each other. Staff told us they were given opportunities to develop and further their career.
- The practice leaders demonstrated that one of their commitments was for the practice becoming an eco-friendly and sustainable practice.
- Governance systems and processes had continued to improve, evolve and embed.

Whilst we found no breaches of regulations, the provider **should**:

- Review systems and processes to improve uptake of child immunisation and cervical screening.

I am taking this service out of special measures. This recognises the significant improvements that have been made to the quality of care provided by this service.

**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 with a second CQC inspector, who undertook the site visits and spoke with staff in person. The team also 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 Regency Surgery

Regency Surgery is in the city of Brighton and Hove at:

4 Old Steine,  
Brighton,  
BN1 1FZ

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

The practice delivers General Medical Services (GMS) to a patient population of approximately 5,350. This is part of a contract held with NHS England.

The practice is part of a wider network of local GP practices who work collaboratively to provide primary care services.

Information published by the Office for Health Improvement and Disparities shows that deprivation within the practice population group is in the third lowest decile (3 of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 88% White, 5% Asian, 4% Mixed, 2% Black and 1% Other.

Data available to the Care Quality Commission (CQC) shows the number of patients from birth to 18 years old served by the practice is slightly below the national average. The number of working age patients is above the average for England.

There are two GP partners, two salaried GPs and two practice nurses. The practice is supported by a practice manager and a team of reception and administration staff. A team of paramedics were also based at the practice and shared by other practices in the primary care network.

The practice is open between 8am and 6.30pm Monday to Friday. The practice offers a range of appointment types including book on the day, telephone consultations and advance appointments.

Patients requiring a GP outside of normal working hours are advised to contact the NHS 111 service, where they will be given advice or directed to the most appropriate service for their medical need.