



**beacon**  
MEDICAL SERVICES GROUP  
"Care With Passion"

# ANNUAL QUALITY ACCOUNT 2024-2025



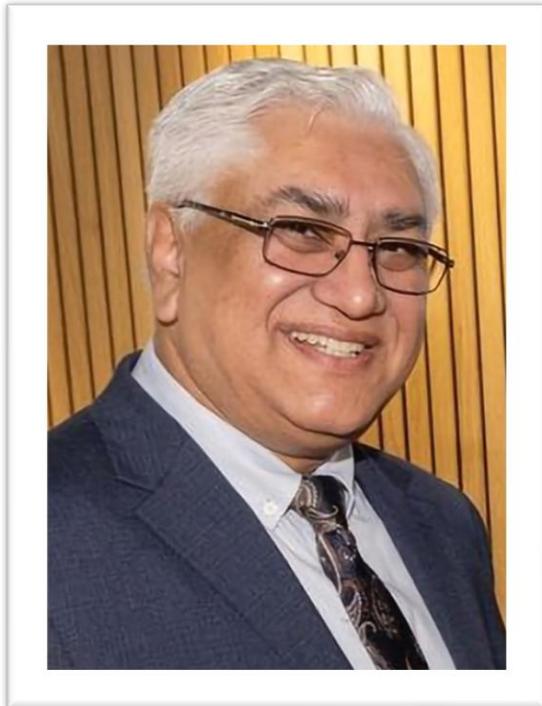
## Contents

PART 1 .....	3
Statement from the Chief Executive.....	3
Welcome to BMSG .....	4
Our Philosophy .....	5
Our Objectives.....	6
PART 2.....	7
Introduction to our Quality Account.....	7
Key Highlights .....	8
Beacon Community Charitable Foundation .....	9
Our Priorities for Improvement .....	10
Quality Priorities for Improvement 2025-26.....	11
Progress on Strategic Priorities from 2024-25 .....	11
Progress on Commissioner Agreed Priorities from 2024-25.....	12
Strategic Priorities for improvement .....	13
Participation in Audits .....	13
Forward plan for Audits .....	14
Patient Experience.....	15
Comments, suggestions & complaints .....	18
Staff Experience/WRES/WDES & Disability Confident.....	20
Feedback on our Organisation .....	22
Data Quality & Performance .....	24
PART 3.....	26
Quality & Performance Measures for 2025-26 .....	26
PART 4.....	28
How to provide feedback on our Quality Account .....	28

# PART 1

## Statement from the Chief Executive

I am pleased to present our Quality Account for **2024–2025**, which reflects a year of



continued progress, collaboration, and commitment in the face of ongoing challenges across the healthcare landscape. This report offers insight into the improvements we have made, and the values that continue to guide our care and service delivery.

Throughout the year, we have remained focused on our strategic priorities—upholding high standards of care, strengthening governance, and responding effectively to the needs of our community. Despite pressures on the wider system, our teams have worked tirelessly to ensure safe, effective, and patient-

centred services remain at the heart of our organisation.

Strong partnerships remain fundamental to our success. We are grateful for the engagement of our Commissioners, Referrers, and wider stakeholders, and above all, for the trust placed in us by our patients and their families. Their voices help shape our services, and we remain committed to involving them in every stage of the quality journey.

As in previous years, our Quality Account is structured around four key themes—**Safety, Clinical Effectiveness, Patient Experience, and Quality Assurance**. These pillars remain integral to how we deliver care and assess our performance. Through regular audit, feedback, and reflective practice, we continue to refine our approach and empower our staff to excel in their roles.

Looking ahead, we are focused on building resilience and sustainability within our services, with a particular emphasis on:

- Strengthening collaboration with Commissioners to deliver high-quality, compassionate care.
- Supporting staff development while expanding our organisational infrastructure to meet future demand.

We remain committed to providing a consistent, safe, and high-performing service to every patient who comes through our doors. This Quality Account captures not just what we have achieved, but where we are going. I hope you find it informative and reflective of the values we stand for



**Dr Tariq Chauhan, Chief Executive Officer**

## Welcome to Beacon Medical Services Group

We are an independent healthcare provider commissioned by the NHS to provide community-based services across Greater Manchester, Greater Preston, South Ribble and Chorley.



We offer the following services:

- Non-Obstetric Ultrasound scans
- Ear, Nose and Throat
- Minor Surgery
- Gastroenterology/Endoscopy
- Audiology
- Magnetic Resonance Imaging (MRI) scans

## Our Philosophy

We are a respected, caring, motivated team championing a shared vision of professional excellence in providing safe, timely and appropriate care for patients.



Our priority is safe patient care achieved through a committed team working effectively and in partnership with external organisations. Every member of our team, feels empowered to improve and to make a positive difference to our patient’s experience.

We provide health care based on the principle of care closer to home. We ensure that treatment options are discussed with patients for them to make informed choices. With our Clinical teams including leading local GPs, our strong roots in the local community means that we can understand patients’ needs.

We are proud to have strong clinical leadership at the heart of our organisation. Our Chief Executive, who also serves as Medical Director, brings extensive experience from senior leadership roles within the NHS. This is complemented by our Board of Directors and Clinical Directors, all of whom have significant expertise and longstanding experience in their respective specialist fields.



Our services are designed to be locally accessible, equitable, safe, and of high quality. We deliver care in community-based settings, offering patients the flexibility and convenience of choosing locations close to home.

We remain committed to delivering care in line with national standards, adhering to guidance set by the National Institute for Health and Care Excellence (NICE), the Care Quality Commission (CQC), and the Department of Health and Social Care.

## Our Objectives



### We will provide:

- efficient and effective health care services
- services that are supported by national and local best practice and guidance
- services that are accessible to those that they are commissioned for
- services that are provided from best quality community-based environments
- services that are well respected and regarded by both patients and Commissioners of services.

### We will achieve this by:

- Providing regular performance reports to the commissioning bodies for all services
- Listening and being guided by feedback from patients, service users and referrers
- Looking after our staff and supporting their development
- Annually achieving financial balance.

Our Mission	Our vision	Our Values
<b>We are committed to.....</b>		
Delivering accessible, efficient & effective healthcare services	Professional excellence in providing safe, timely, & appropriate care for patients	Care with passion, high quality, safe care with dignity & respect, listening & being responsive to our patients needs

<p><b>Providing care close to home</b></p> 	<p><b>Managing expectations by being open &amp; honest</b></p> 	<p><b>Ensuring involvement in decisions about your care</b></p> 
<p><b>Offering clinic appointments at times that suit you</b></p> 	<p><b>Having minimal waiting times to be offered an appointment</b></p> 	<p><b>High levels of patient satisfaction</b></p> 
<p><b>Undertaking ongoing audit to monitor our performance</b></p> 	<p><b>Delivering Consultant Led services</b></p> 	<p><b>Providing prompt results and feedback to referrers</b></p> 
<p><b>Developing online services to support patient's needs</b></p> 	<p><b>Having a strong Leadership team to support our staff</b></p> 	<p><b>Using the latest technology to support patient care</b></p> 
<p><b>Supporting the healthcare needs of our Local community</b></p> 	<p><b>Maintaining full compliance with all national &amp; local guidelines</b></p> 	<p><b>Having Dignity in care Champions</b></p> 

## PART 2

### Introduction to our Quality Account

This Quality Account is Beacon Medical Services Group's annual report to the public and our stakeholders about the quality of the services we provide. It shows our achievements in terms of clinical excellence, effectiveness, safety and patient's experience and demonstrates that all staff within our Organisation are committed to providing continuous, evidence based, quality care to the patients that we treat.

It will also show that we regularly scrutinise every service we provide with a view to improving it and ensuring that our patients' treatment outcomes are the best they can be. It will give a balanced view of what we are good at and what we need to improve on.

## Key Highlights

94%  
Positive  
Patient  
Feedback

## Digital Transformation in Audiology

New digital tools to  
make care safer, faster, and  
more efficient.



## Achieved re-accreditation

For our Endoscopy services,  
Audiology services & our  
Quality Management Systems



## Supporting Local Trusts to Reduce Waiting Lists

Supported system recovery  
and helped improve patient  
flow across Greater



## Greater Manchester Choice Framework Accreditation

Ensuring patients receive high-  
quality, timely care

## Quality Improvement Framework

Developed to enhance patient  
safety, experience & outcomes  
through a culture of continuous  
learning



Zero Never  
Events

## Implemented the





As part of our corporate social responsibility we have a charitable arm, Beacon Community Charitable Foundation with the aim of supporting our local community with practical steps that they can take to help improve their health and wellbeing, focusing primarily on lower income areas and the BAME community to help tackle health inequalities.

Our foundation has gone from strength to strength over the last year with high attendance and positive feedback from our community health education events. These have also been attended by the not-for-profit organisations that we also support who are actively improving their local communities and undertake activities which we believe to be beneficial to health and wellbeing.

Alongside the support that we provide to our local communities, we play an active role in supporting the General Practitioners (GPs) working in primary care by organising and delivering free training sessions for GPs with a focus on sharing best clinical practice and improved patient management. We are proud to have delivered training to more than 400 GPs in recent years and look forward to continuing to do so. Our training sessions support with up-skilling of experienced and new GPs and ultimately results in improved patient care.



## Our priorities for improvement

We will continue to support our skilled staff in improving our patient-centred, high-quality services for the benefit of the communities we serve. We must be sustainable and will seek appropriate opportunities for growth. Our accountable and effective governance will ensure we remain transparent in all that we do.



We have set out in this Quality Account how well we have performed against local and national priorities and have also set out our Quality Priorities for 2025-2026 and look forward to reporting on our progress against these in next year's Quality Account

## Quality Priorities for improvement for 2025-2026

We continue to play a key role in the delivery of health care services within the local community, working with our partners to ensure that services are personalised for all our patients.



Our Quality Account splits our priorities between those agreed with our Commissioners and those identified as part of our own Strategic Objective Framework.

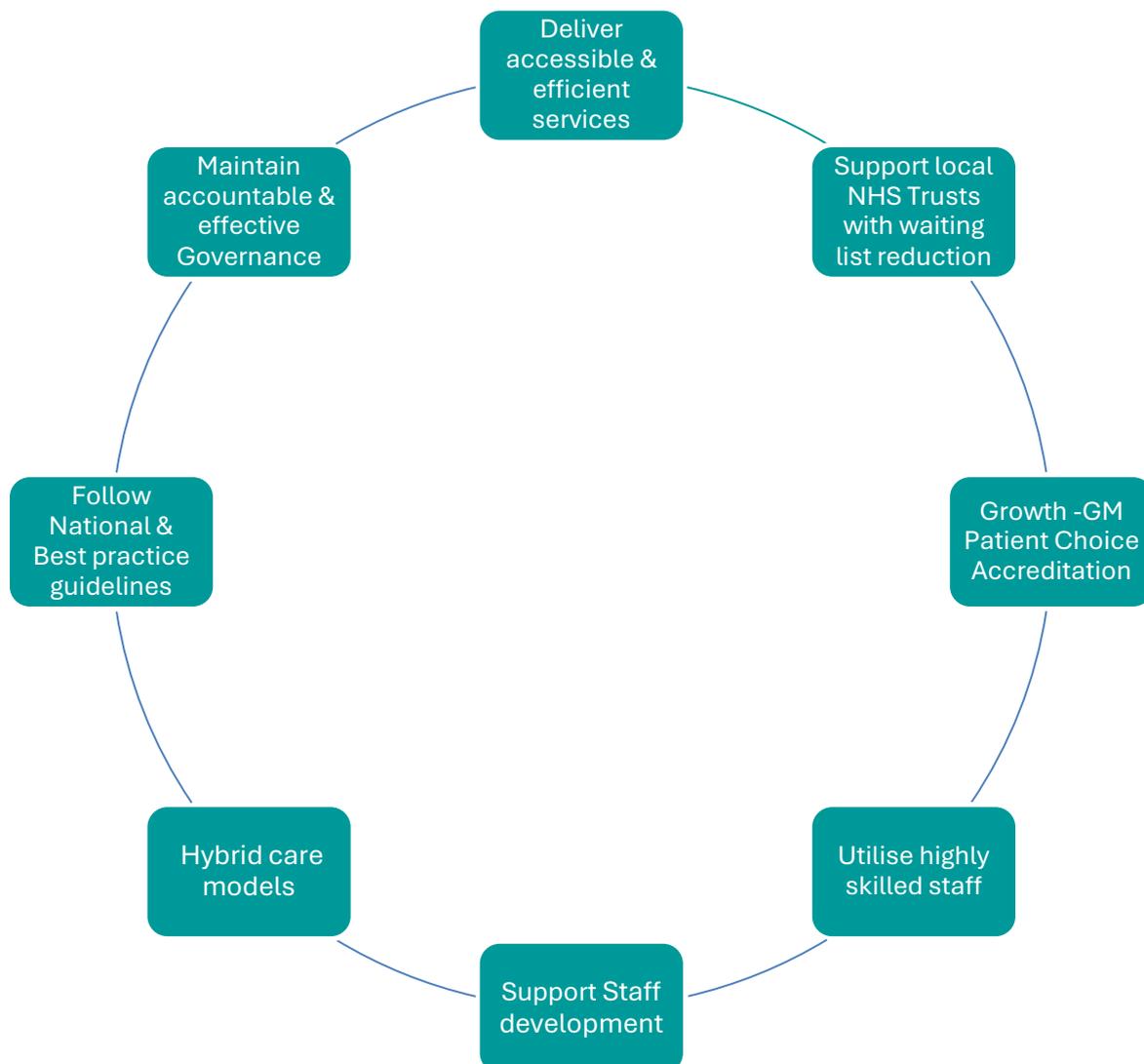
The continuing pressures in the Healthcare system mean that we must ensure that we are not only delivering a high volume of care but also a high standard of care. It is with this in mind that we have looked at our previous objectives to determine if these should change. Whilst we have included some new objectives to support the changing environment of healthcare delivery, we believe that our existing core objectives remain not only important, but integral to the success of our Organisation.

## Progress on Strategic Priorities for improvement from 2024-2025



Our priorities for improvement in 2024 were ambitious and covered several aspects across the Organisation and whilst these were not all ‘new’ areas, they were areas where we wanted to enhance and further develop existing systems and processes, thus strengthening our Organisation as a whole.

We have made significant progress against all and for many of the objectives we have been able to demonstrate an impact on patient care and staff well-being. We believe that these core priorities will continue to be updated as the future of healthcare evolves over time.



## Progress on Commissioner Agreed Priorities for improvement

In addition to the Organisational priorities for improvement set for 2024, there were also commissioner agreed priorities, based on existing goals identified within our contractual obligations, these can be seen below alongside an update on the progress made.

**JAG**

- Successfully achieved re-accreditation of Endoscopy services in July 2024

**IQIPS**

- Successfully achieved re-accreditation of Audiology services in September 2024

**QSI**

- Continued work in progress to achieve Accreditation of our Ultrasound services

**NHS**

### QUALITY RISK STRATIFICATION TOOL

Used in the NHS to evidence compliance across all areas of care delivery

The Organisation continues to complete a Quality & Risk Stratification Tool (QRST) on an annual basis. The Organisation has previously been able to consistently demonstrate compliance with reporting requirements (and 'RAG' rated green), and we await the Commissioner intentions for future reporting. There were no Commissioning for Quality and Innovation (CQUINs) set for the reporting period.

## Strategic Priorities for improvement for 2025



### Participation in audits

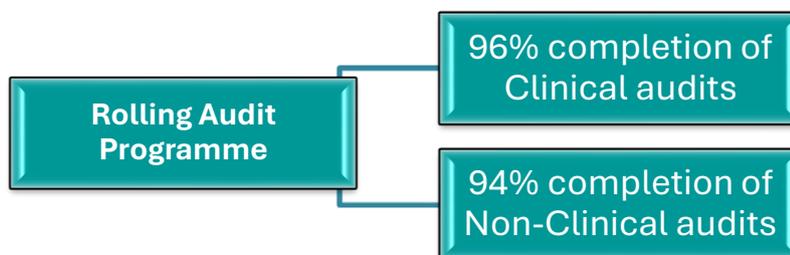
This part of the Quality Account focuses on the audits undertaken by us during last year and how this has shaped the future of our audit programme. A rolling audit programme is in place across all our services to ensure that all elements of clinical and administrative functions are monitored, audited and action plans developed. The audit programme includes quality measures and auditable outcomes in line with national guidance and the regulatory requirements for UKAS and JAG Accreditation. The audit programme is reviewed regularly to ensure that we are auditing all relevant aspects of care.

Our audit programme meets the needs of UKAS and JAG Accreditation; some audits were also moved to biannual in accordance with their recommendations for audit cycles.

All audits have designated Leads to oversee the audit process alongside named staff who support the process.



During the last year, we successfully carried out a high number of audits in accordance with the rolling audit programme. This high level of completion demonstrates our commitment to maintaining robust quality assurance processes and ensuring that both clinical care and operational standards meet the expectations of NHS partners, UKAS, and JAG. Conducting regular audits is essential to identify areas of good practice, drive continuous improvement, and uphold the safety, effectiveness, and responsiveness of our services. By embedding audit into routine practice, we ensure that patients receive care aligned with national standards and best practice guidelines.



## Forward plan for Audits

The rolling audit programme will continue throughout 2025-2026 which will form the foundation for evidencing our strategic objectives. New audit programmes may be added dependent upon changes to national and local guidance and best practice.



## Patient Experience

Obtaining meaningful feedback supports our Organisation to constantly improve whilst providing assurance to patients and Commissioning bodies that we can consistently deliver high standards of care.

We have developed additional feedback mechanisms to ensure there are several ways that patients, relatives and carers can share their experience of our services, ensuring that feedback can be given through different mediums to suit patients, relatives and carers, such as electronic text messages with a survey link, QR codes and paper copies of the survey.



The Patient satisfaction survey incorporates the Friends & Family Test (FFT).

This is in addition to the option to leave feedback via our website and the feedback function available through NHS Choices. Our Quarterly Patient Experience Report is shared with the teams so any actions can be taken for improvement or change alongside formal review by our Governance committee. The Patient Experience Report is also shared externally with our Commissioning bodies.

We take pride in the positive feedback received and welcome all feedback as we view this as an opportunity for improvement, ensuring that patients remain at the heart of what we do.

## High levels of patient satisfaction

90%

FFT National Average

94%

Beacon Medical Services Group



92% of patients told us that felt listened to & their opinions taken seriously

95% of patients told us that they were treated with dignity & respect by our staff

92% of patients told us that they were happy with the booking processes we have in place

## Patient testimonials



*“Had ENT appointment at Beacon. It was unexpectedly quick. I got a place on cancellation on Sunday. Very convenient timing for me. Excellent car parking facilities. Reception staff very courteous and polite. Seen the specialist who was very good both professionally and on individual basis. He explained everything to me very clearly and nicely. The nurse in the clinic was also very courteous and good.  
I had very nice overall experience” GS (Google, 5-star review)*

*“I really don't think the (endoscopy) staff could have done anything else to make the appointment go any smoother or to put me at ease, they were all very professional & absolutely fantastic.” JS (via patient survey)*

*The care I received was excellent AP (NOUS patient via Patient survey)*

*“Lovely staff, very friendly and professional” EB (Google, 5-star review)*

*“I had a minor surgical procedure here last Thursday after being referred from my GP and I couldn't be more pleased with the experience. From the moment I arrived, the staff were exceptionally friendly and informative. The receptionist was warm and welcoming, and both the doctor and assistant took the time to clearly explain each step of the process.” GW (Google, 5-star review)*

## Patient support

We have dedicated Safeguarding Leads across the organisation, supported by Dignity in Care Champions, to ensure the safety, wellbeing, and respectful treatment of all patients.

In addition, we provide access to information about support groups and helplines through discreetly placed posters and stickers, including within patient toilets. This allows individuals to access important contact details privately and safely, supporting those who may be experiencing difficult circumstances or seeking confidential help.



## Comments, suggestions & complaints



Whilst we work hard to ensure that all patients, relatives, and carers have a positive experience of our services, we recognise there may be occasions when we do not get it right. Although the number of complaints we receive remains low, we place high importance on listening to feedback and using it as an opportunity to learn and improve. Patient safety and satisfaction remain central to our approach. All feedback, including complaints and concerns, is recorded, monitored, and reported through our Quarterly Patient Experience Report, which is shared with our Commissioners to ensure transparency and continuous improvement.

**“ Patients said it is difficult to access audiology supplies like hearing aid batteries**  
We introduced an easy-to-use online ordering system so patients can request batteries and other supplies from home ”

**“ Patients advised that bowel preparation instructions were confusing**  
We simplified our guidance & included visual step-by-step leaflets to ensure the instructions were clear and easy to understand ”

**“ Patients wanted wound care information after their procedure**  
We created aftercare leaflets with wound care guidance & contact information in case of concerns ”

**“ Patients said they need support understanding & communicating during their appointment**

We ensure our telephone translation service is available to support patients during consultations, ensuring clear and accessible communication in their preferred language





We make sure that we act on any concerns raised and review all comments, complaints, and compliments as part of our

Quarterly Governance meeting. We have a dedicated Lead for overseeing any complaints across the Organisation. We have a very clear process for anyone to provide us with feedback, be it good or bad; raise concerns or complain. Our process for this can be found on our website.



0161 445 7451  
bmsg.beacon-enquiries@nhs.net

## Patient Feedback Centre

### Your opinion matters...

Beacon Medical Services Group is striving hard to ensure we are delivering the best possible care to users of our services. In order to achieve this goal, we would appreciate if you could spare a few minutes to complete a customer satisfaction survey.

Please answer honestly as all information provided helps us to continuously improve our service offering to better suit the needs of our patients.

Below are links to the corresponding surveys for each of our services:



[AUDIOLOGY PATIENT SURVEY](#)

[MRI PATIENT SURVEY](#)

[ENT PATIENT SURVEY](#)

[COMPLAINTS LEAFLET](#)

[ENDOSCOPY & GASTROENTEROLOGY PATIENT SURVEY](#)

[ULTRASOUND PATIENT SURVEY](#)

[MINOR SURGERY PATIENT SURVEY](#)

## Staff Experience

We value our staff and want them to enjoy working for our Organisation as a motivated and valued workforce that delivers high quality patient care to maximise patient satisfaction and patient safety.

We are committed to supporting our team by providing appropriate training tailored to individual roles. A rolling programme of 1:1 meetings and appraisals are in place to help us plan for future development needs, encourage reflective practice, and recognise achievements.

The results of recent staff surveys are positive and indicate that our team members feel part of a supportive and collaborative environment. Staff consistently report feeling listened to and empowered, with open communication and shared goals helping to foster a culture of trust, growth, and continuous improvement.



We prioritise creating a culture where all staff feel safe and empowered to raise concerns. Our Freedom to Speak Up Guardian plays a key role in ensuring that all voices are heard, and that concerns are addressed promptly, confidentially, and without detriment.

BEACON MEDICAL SERVICES GROUP

## STAFF FEEDBACK

96% of staff feel supported

95% say their wellbeing & health is prioritised by the organisation

4.43 out of 5 rating as a place to work

## Workforce Race Equality Standard (WRES) Data



We report on WRES data annually to identify areas for improvement, promote inclusivity, and demonstrate our commitment to building a diverse, respectful, and equitable working environment for all staff.



This report ensures that we are taking active steps to ensure:

- Empowered, engaged, and included staff
- Inclusive leadership at all levels

We are committed to this agenda and share all reports and findings with our Commissioners. We are confident that our findings are indicative of positive staff experience, with 97% staff self-reporting ethnicity and zero reports of any concerns in relation to treatment in the workplace. We are proud to have such a diverse workforce.

## Workforce Disability Equality Standard (WDES)

We report on WDES data annually to demonstrate that we are committed to creating an inclusive, supportive workplace for staff with disabilities. The WDES is a set of ten metrics that compare the experiences of disabled and non-disabled staff. We use this data to guide action plans and are actively achieving progress in promoting disability equality across the organisation, embedding a culture of inclusivity that promotes and protects a diverse workforce.



## Disability Confident Employer

Over recent years, we have progressed in our Disability Confident journey, achieving the status of Disability Confident Employer. This demonstrates our organisation's commitment to creating an inclusive and supportive environment for all, where people with disabilities are valued and enabled to thrive. We are now actively reviewing the requirements needed to progress further and achieve Disability Confident Leader status, reflecting our ongoing ambition to lead by example in championing equality, diversity, and inclusion.

## Feedback on our Organisation



We work closely with our commissioning bodies and as an independent organisation providing care to NHS patients on their behalf, this feedback is especially important to us. It helps ensure we align with NHS standards, continuously improve the quality of our services, and maintain the trust placed in us to deliver safe, effective, and patient-centred care. Their insights play a key role in shaping how we evolve and meet the needs of the communities we serve



We have received the following feedback from Greater Manchester NHS Integrated Care Board (ICB):



### **Independent providers – Manchester Locality: Quality Account/Annual Report Statement**

NHS Greater Manchester (NHS GM) commissions a number of Independent Services to provide NHS services to patients across Manchester. A quality assurance framework is in place to monitor and assure the quality of service delivery.

NHS GM welcomes the Quality Account from this organisation and appreciates the work that has been undertaken to improve quality of care and experience of service users.

Commissioning and quality relationships are well established between this Provider and the NHS GM Manchester Quality Team with an oversight infrastructure in place which includes contract review meetings, quality visits, exchange of data, incident monitoring and assurance reports.

Based on the quality information received throughout the year 2024/25, NHS GM can confirm that this service has met contractual expectations. We will continue to work with the provider to support the maintenance of required standards.

We look forward to building on our existing relationship with this service and continuing to work together through our shared values of collaboration, compassion, inclusivity and integrity.

**Mark Fisher**  
NHS Greater Manchester Chief Executive

# Data Quality & Performance



Data quality is essential to delivering high-quality care, and we are committed to its continuous improvement across the organisation. Accurate and timely data enables us to monitor performance, understand service activity, and identify areas for improvement.

We meet all national reporting requirements, including submissions to NHS Digital and the Secondary Uses Service (SuS). Submitting data to SuS supports our Commissioners by enabling accurate service planning, performance monitoring, and funding allocation. It also supports any NHS Trusts we are subcontracted by, ensuring transparency, contractual compliance, and alignment with system-wide reporting requirements.



**100%**

Compliance with DMO1 & RTT submissions  
Completed on time



**100%**

Submission deadlines met for SUS submissions



**< 0.5%**

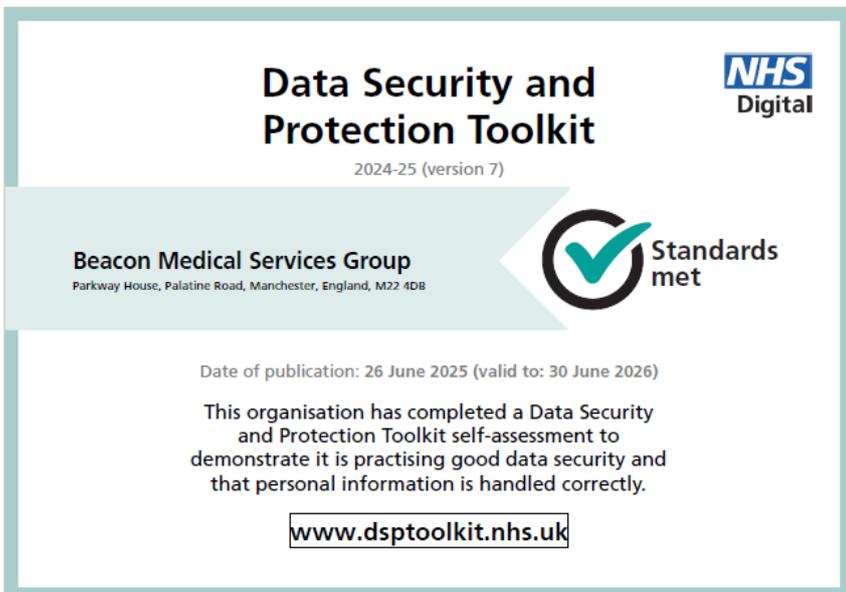
Waiting over 6 weeks for an appointment



**0**

Missed contractual KPI reports

Submitted data includes activity levels, Referral to Treatment Times (RTT), Monthly Diagnostic Waiting Times (DM01), and contractual Key Performance Indicators (KPIs). Enhanced data quality supports the front-line staff in their ability to deliver safe and effective care to our patients, giving practitioners across the system confidence that the data that they access is accurate and up to date.



We use several data systems and have clear rules in place to ensure that the systems are only used by the staff who require access to them. We take our responsibility for protecting personal data very seriously and comply with all General Data Protection Regulations.

We complete an annual Data Protection and Security toolkit to evidence this compliance.

A Quarterly Governance meeting ensures that we are actively monitoring our current performance and gives focus and direction in achieving our set targets. We also complete monthly performance reports for our Commissioners along with Quality Reports and Quality Risk Stratification Tools on both a Quarterly and Annual basis.



One of our previous objectives was to develop a formal Board Quality & Performance Report to demonstrate an annual round up of all Quality and Performance measures, ensuring we have the right processes in place to meet our Organisational and Commissioner Quality and Performance objectives. We are pleased to report that this has now been achieved and is an annual internal requirement.

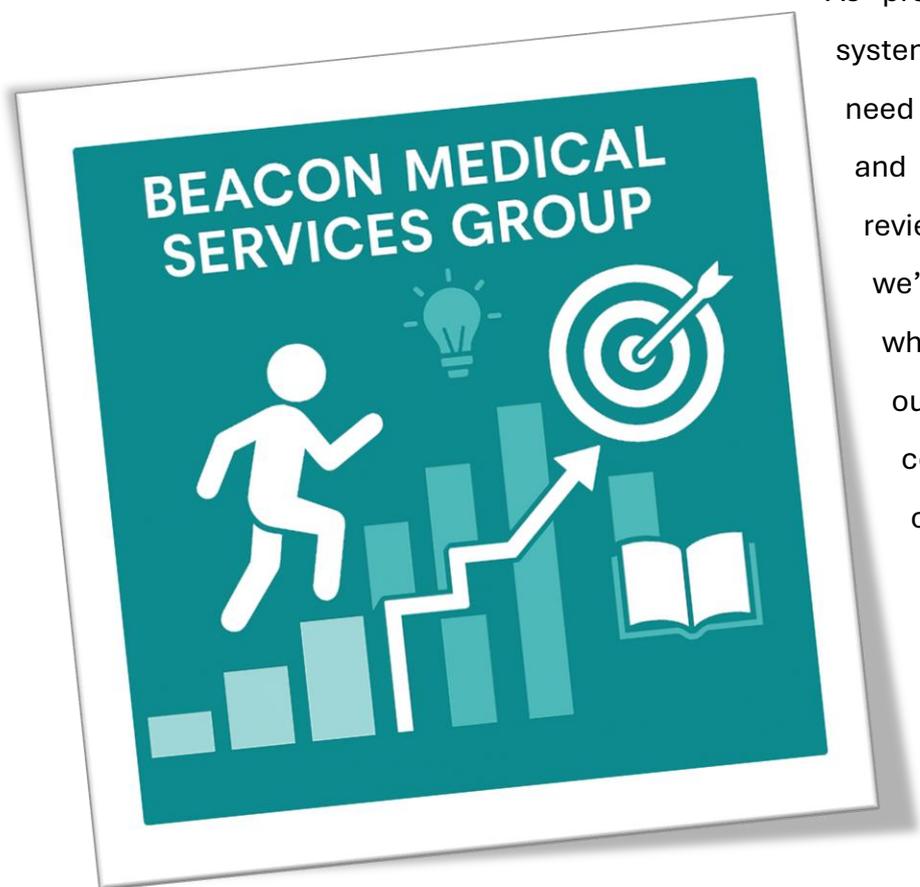
## PART THREE

### Quality and Performance Measures for 2025-2026



We remain committed to excellence through continuous learning and ambition. This year, we continue to maximise our resources to support national growth, using proven care models to expand services and meet broader community needs.

Following accreditation in two of our services, we are now working towards accreditation of our Non-Obstetric Ultrasound service.

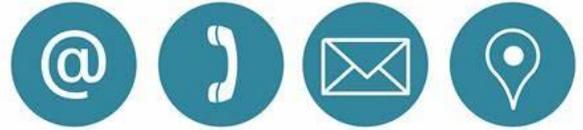


As pressures in the healthcare system persist, we recognise the need to deliver both high-quality and high-volume care. In reviewing our past objectives, we've introduced new ones where needed but reaffirm that our core objectives remain central to the success of our organisation.

To recap from previous Quality Accounts, what these objectives are and how we see these being met are shown below:



# PART FOUR



## How to provide feedback on our Quality Account

We welcome any feedback in relation to the contents of our Quality Account.

If you have any issues, questions, concerns, or recommendations in relation to this report, please contact us via any of the methods below and we will ensure that the most appropriate person responds to you as quickly as possible.

### In Writing

Mrs J. Bergin  
Director of Quality & Performance  
Beacon Medical Services Group  
Parkway House  
Palatine Road  
Northenden  
Manchester  
M22 4DB

### Via Email

[bmsg.beacon-enquiries@nhs.net](mailto:bmsg.beacon-enquiries@nhs.net)

### By Telephone

0161 445 7451

