

Cornerstone Family Practice

Inspection report

Cornerstone Family Practice
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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	
Are services effective?	Requires improvement	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Good	

Overall summary

We carried out an announced comprehensive inspection at Cornerstone Family Practice, on 08 May 2019. This practice is rated as Good overall. (Previous rating July 2018 – Inadequate)

The key questions at this inspection are rated as:

Are services safe? - Good

Are services effective? – Requires Improvement

Are services caring? - Good

Are services responsive? - Good

Are services well-led? - Good

The practice was previously given an overall rating of Inadequate on 31 July 2018 with the following domain ratings:

Safe - Inadequate

Effective - Requires improvement

Caring - Good

Responsive - Requires improvement

Well-led - Inadequate

A requirement notice was issued in respect of Regulation 17 of the Health & Social Care Act 2008 (Regulated Activities) Regulations 2014 (good governance) and Regulation 12 of the Health & Social Care Act 2008 (Regulated Activities) Regulations 2014 (safe care and treatment).

On 30 August 2018 warning notices were issued in respect of Regulation 12 of the Health & Social Care Act 2008 (Regulated Activities) Regulations 2014 (safe care and treatment) and Regulation 17 of the Health & Social Care Act 2008 (Regulated Activities) Regulations 2014 (good governance). On 3 December 2018 we undertook a focused inspection and the practice had met the legal requirements of the warning notices.

At this inspection we found:

 The practice had enrolled in the Royal College of General Practitioners (RCGP) special measures peer support programme. The programme provides a bespoke support package, working closely with the practice's clinicians and senior staff to develop improvement solutions, provide peer support and in-depth reviews and solutions of services.

- The practice had introduced systems to manage risk so that safety incidents were less likely to happen. When incidents did happen, the practice learned from them and improved their processes.
- There was an open and transparent approach to safety and an effective system in place for reporting and recording significant events with learning outcomes documented.
- There was a clear leadership structure in place. The practice proactively sought feedback from staff and patients, which it acted on.
- Every Thursday the practice manager held every Thursday "Meet the practice manager", which was a one hour drop in session to speak to the practice manager on any issues or concerns they may have.
- The practice worked within the new Primary Care Network (PCN) where practices shared learning and provided buddy support.
- Staff involved and treated patients with compassion, kindness, dignity and respect.

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

• There were multiple areas below average in the quality outcome framework (QOF).

The areas where the provider **must** make improvements are:

• Ensure that care and treatment is provided in a safe way.

The areas where the provider **should** make improvements are:

- Continue to increase the number of carers recorded on the practice system.
- Continue to improve patient experiences to access to services and survey results.

We saw improvement to patient safety and clinical care had significantly improved, with a more structured process and governance system in place to keep staff and patients safe. We were told the aim would be to maintain these standards and continue to improve in areas of quality outcome framework (QOF) and patient access and experiences.

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

Overall summary

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Please refer to the detailed report and the evidence tables for further information.

Population group ratings

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

Our inspection team

Our inspection team was led by a Care Quality Commission (CQC) lead inspector. The team included a GP specialist adviser and a practice manager adviser.

Background to Cornerstone Family Practice

Cornerstone Family Practice is the registered provider and provides primary care services to its registered list of 7,029 patients.

The practice is registered with the Care Quality Commission (CQC) to provide the regulated activities of diagnostic and screening procedures; surgical procedures; maternity and midwifery services and treatment of disease, disorder and injury.

Cornerstone Family Practice is member of Manchester Health and Care Commission and provides services to patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering services to the local community.

The provider is a partnership comprising of three GP partners (two male and one female). There are two female practice nurses and a locum advanced nurse prescriber. The practice has a practice manager and administrative staff.

Information published by Public Health England, rates the level of deprivation within the practice population group as one, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

Male life expectancy is 74 years compared to the national average of 79 years. Female life expectancy is 80 years compared to the national average of 83 years. The practice is in line with the national average of patients' age ranges. The National General Practice Profile states that 76% of the practice population is of white ethnicity, with 24% of black, Asian or mixed-race ethnicity.

The practice is a training practice.

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 the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment How the regulation was not being met The registered person did not always assess the risks to the health and safety of service users of receiving the care or treatment. In particular: The practice had below average quality scores for multiple long term conditions in the area of quality outcome framework (QOF).