

# Cornerways Surgery

## Inspection report

145 George V Avenue  
Worthing  
BN11 5RZ  
Tel:

Date of inspection visit: 28 April 2022  
Date of publication: 06/07/2022

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

<b>Overall rating for this location</b>	<b>Requires Improvement</b> 
Are services safe?	<b>Requires Improvement</b> 
Are services effective?	<b>Good</b> 
Are services caring?	<b>Good</b> 
Are services responsive to people's needs?	<b>Good</b> 
Are services well-led?	<b>Requires Improvement</b> 

# Overall summary

We carried out an announced inspection at Cornerways Surgery on 26th and 28th April 2022. Overall, the practice is rated as requires improvement.

Safe - Requires improvement

Effective - Good

Caring – Good

Responsive – Good

Well-led - Requires improvement

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

## **Why we carried out this inspection.**

We inspected the practice because it was newly registered as a partnership. This inspection was comprehensive and covered the safe, effective, caring, responsive and well-led key questions.

## **How we carried out the inspection.**

Throughout the pandemic CQC has continued to regulate and respond to risk. However, considering 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
- A staff questionnaire

## **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.**

# Overall summary

We found that:

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice adjusted how it delivered services to meet the needs of patients during the COVID-19 pandemic.
- Patients could access care and treatment in a timely way.
- The way the practice was managed promoted the delivery of person-centre, holistic care.
- Feedback from patients about their care was consistently positive. The practice scored above average in all areas of the national GP patient survey.
- Staff felt supported by their managers.
- Staff had the training required for their role and were encouraged to develop their skills.

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

- Staff vaccination was not maintained in line with current UK Health Security Agency guidance relevant to their role.
- The practice did not have a policy and procedure for reporting and recording significant events. There was limited evidence to show that lessons learnt had been identified and shared.
- Risk assessments relating to health, safety and fire were not completed and reviewed by people with the qualifications, skills and experience to do so.
- The system for recording and acting on safety alerts was not always effective.
- Information required for recruitment and to confirm the ongoing registration status of clinical staff was not always complete.

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

- Leaders lacked oversight of some processes and therefore failed to identify risks when those processes did not operate as intended.
- The practice did not always act on appropriate and accurate information.

We rated the practice as good for providing caring services, however we identified the exceptionally positive feedback from patients as an area of outstanding practice. Patients felt that staff went 'the extra mile' and that their care and support exceeded their expectations.

We rated the practice as good for providing responsive services. However, we identified timely patient access to services and appointments as an area of outstanding practice.

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

- Ensure safe care and treatment.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

In addition, the provider **should**:

- Regularly review and maintain an up to date safeguarding register.
- Ensure that the system for monitoring and recalling patients on high risk medicines and those with long-term conditions is fully embedded.

**Details of our findings and the evidence supporting our ratings are set out in the evidence tables.**

# Overall summary

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## 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 who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

## Background to Cornerways Surgery

Cornerways Surgery is in the town of Worthing at:

145 George V Avenue,

Worthing,

West Sussex.

BN11 5RZ.

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

The practice is situated within the West Sussex Clinical Commissioning Group (CCG) and delivers General Medical Services (GMS) to a patient population of about 3700. This is part of a contract held with NHS England.

The practice is part of the Cissbury Integrated Primary Care Network, which is made up of four local practices.

Information published by the UK Health Security Agency shows that deprivation within the practice population group is in the second highest decile (nine out of 10). The higher the decile, the less deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area is 95% white, 2% asian, 1.7% mixed, 0.7% black and 0.3% other.

The age distribution of the practice population closely mirrors the local and national averages. There are more male patients registered at the practice compared to females.

There are two GP partners. The practice has a team of two practice nurses and one health care assistant. The GPs are supported by a practice manager and a team of reception and administration staff.

For more information on opening times and services provided visit: [www.cornerwaysurgery.com](http://www.cornerwaysurgery.com)

Extended access is provided locally by a federation of GPs, where late evening and weekend appointments are available. 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.

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 Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>Systems and processes for monitoring the service were not always effective. The practice had failed to identify risks when those processes did not operate as intended. Records relating to the management of regulated activities were not always accurately maintained or up to date. This was evident in relation to the following: -</p> <ul style="list-style-type: none"><li>• Systems for recording, investigating, acting on and sharing the lessons from complaints and significant events were not sufficient.</li><li>• The practice did not maintain records to show that professional registration of clinical staff was current.</li><li>• The practice did not keep records of completed staff inductions.</li><li>• Information related to the recruitment process was not always complete.</li></ul> <p>This was in breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The practice had failed to ensure care and treatment was provided in a safe way for service users. In particular:</p> <ul style="list-style-type: none"><li>• Safety alerts from the Medicines and Healthcare Products Regulatory Agency were not always acted on sufficiently.</li><li>• The practice was unable to demonstrate that emergency equipment was regularly checked and fit for use.</li></ul>

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## Requirement notices

- The practice was unable to fully demonstrate staff vaccination status was not maintained in line with current UK Health Security Agency guidance relevant to their role.
- Risk assessments relating to health, safety and fire were insufficient.

This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.