

**REPORT TO:** Health and Wellbeing Board

**DATE:** 9 March 2016

**REPORTING OFFICER:** Chief Officer NHS Halton CCG

**PORTFOLIO:** Health and Wellbeing

**SUBJECT:** Summary of CQC Inspection Reports of GP Practices

**WARD(S)** Borough-wide

## 1.0 PURPOSE OF THE REPORT

1.1 This report presents a summary of the outcomes of the first wave of CQC inspections of general practices in Halton undertaken in September 2015. Of the eight practices inspected, seven received an overall rating of good, and one an overall rating of outstanding.

2.0 **RECOMMENDATION: That the Board note the good outcomes of the first wave of CQC inspections of GP practices in Halton.**

## 3.0 SUPPORTING INFORMATION

3.1 The Care Quality Commission (CQC) monitors, inspects and regulates services that provide health and social care, including general practices. They do this by:

- Registering people that apply to them to provide services.
- Using data, evidence and information throughout their work.
- Using feedback to help reach judgements.
- Inspections carried out by experts.
- Publishing information on judgements.
- Taking action when services are judged to need to improve or to make sure those responsible for poor care are held accountable for it.

3.2 There are five questions CQC asks of all care service which are at the heart of the way they regulate and they help them to make sure they focus on the things that matter to people.

The five questions are:

- Are they safe?
- Are they effective?
- Are they caring?
- Are they responsive to people's needs?

- Are they well-led?

3.3 There are four ratings that are given to health and social care services: outstanding, good, requires improvement and inadequate.

 Outstanding	The service is performing exceptionally well.
 Good	The service is performing well and meeting our expectations.
 Requires improvement	The service isn't performing as well as it should and we have told the service how it must improve.
 Inadequate	The service is performing badly and we've taken action against the person or organisation that runs it.

3.4 Between 3<sup>rd</sup> September 2015 and 22<sup>nd</sup> September 2015 eight general practices in Halton received a CQC inspection. All the reports have now been published and this paper provides an overview of those reports. A summary of the findings from the five key questions for each practice can be found in Appendix 1, tables 1-8. Appendix 2 highlights the key themes from each of the five questions.

Seven practices received an overall rating of 'good' and one practice received an overall rating of 'outstanding'. In general the inspectors found the practices to be good for providing well-led, effective, caring and responsive services.

The remaining nine practices will receive their inspection visits between January and March 2016.

#### 4.0 **POLICY IMPLICATIONS**

The reports will be used to inform the review and monitoring of the quality, safety, effectiveness and impact on health outcomes of general practice services.

#### 5.0 **FINANCIAL IMPLICATIONS**

5.1 None identified.

#### 6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

##### 6.1 **Children & Young People in Halton**

The report will support the priority to improve the health and wellbeing of children and young people by focussing on the care provided by GP

practices.

**6.2 Employment, Learning & Skills in Halton**

The report will help to support maintaining a healthy workforce by focussing on the care provided by GP practices.

**6.3 A Healthy Halton**

All issues outlined in this report focus directly on this priority

**6.4 A Safer Halton**

None

**6.5 Halton's Urban Renewal**

None

**7.0 RISK ANALYSIS**

7.1 Practices that receive a poor rating are at risk of providing inadequate levels of care to its patients. No practice received an overall poor rating.

**8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 This is in line with all equality and diversity issues in Halton.

**9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

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Appendix 1 attached.

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Table 1: Beaconsfield Surgery – summary of findings from five key questions

Overall Rating	Question	Rating	Findings
 Good	Are services safe?	 Requires improvement	The practice is rated requires improvement for providing safe services as there were insufficient records of appropriate recruitment checks. The practice was able to provide evidence of a good track record for monitoring safety issues. The practice took the opportunity to learn from incidents, to support improvement. There were systems, processes and practices in place that were essential to keep people safe including medicines management and safeguarding.
	Are services effective?	 Good	The practice is rated good for providing effective services. Patients' needs were assessed and care was planned and delivered in line with current legislation. Staff referred to guidance from the National Institute for Health and Care Excellence (NICE) and used it routinely. Data showed patient outcomes were at or above national averages. Staff worked with other health care teams and there were systems in place to ensure information was appropriately shared. Staff had received training relevant to their roles.
	Are services caring?	 Good	The practice is rated good for providing caring services. Information from various patient surveys demonstrated patients were treated by clinicians with compassion, dignity and respect and they were involved in decisions about their care and treatment. We also saw that staff treated patients with kindness and respect. Staff helped people and those close to them to cope emotionally with their care and treatment.
	Are services responsive to people's needs?	 Good	The practice is rated good for providing responsive services. The practice had initiated positive service improvements for its patients that were over and above its contractual obligations. It acted on suggestions for improvements from feedback from the patient participation group (PPG). The practice reviewed the needs of its local population and engaged with the Clinical Commissioning Group (CCG) to secure service improvements where these had been identified. Information about how to complain was available. Learning from complaints was shared with staff.
	Are services well led?	 Good	The practice is rated good for being well-led. It had a clear vision and strategy. There were systems in place to monitor and improve quality and identify risk. The practice proactively sought feedback from staff and patients and had an active PPG. Staff had received inductions and attended staff meetings and events.

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Table 2: Beeches Medical Centre – summary of findings from five key questions

Overall Rating	Question	Rating	Findings
 Good	Are services safe?	 Good	The practice is rated as good for providing safe services. Staff were aware of procedures for reporting significant events and safeguarding patients from risk of abuse. There were appropriate systems in place to protect patients from the risks associated with medication and infection control. We found that the recruitment practices should be improved by recording an assessment of the physical and mental fitness of staff. An up to date fire risk assessment needed to be made available to ensure the on-going safety of the premises.
	Are services effective?	 Good	The practice is rated good for providing effective services. Patients' needs were assessed and care was planned and delivered in line with current legislation. Staff referred to guidance from the National Institute for Health and Care Excellence (NICE) and used it routinely. Staff worked with other health care teams and there were systems in place to ensure appropriate information was shared. Staff had received training appropriate to their roles.
	Are services caring?	 Good	The practice is rated as good for caring. Patients were positive about the care they received from the practice. They commented that they were treated with respect and dignity and that staff were caring, supportive and helpful. Patients felt involved in planning and making decisions about their care and treatment. Staff we spoke with were aware of the importance of providing patients with Privacy.
	Are services responsive to people's needs?	 Good	The practice is rated good for providing responsive services. Services were planned and delivered to take into account the needs of different patient groups. Access to the service was monitored to ensure it met the needs of patients. The practice had a complaints policy which provided staff with clear guidance about how to handle a complaint.
	Are services well led?	 Good	The practice is rated good for being well-led. It had a clear vision and strategy. The practice had a number of policies and procedures to govern activity. There were systems in place to monitor and improve quality and identify risk. The practice sought feedback from staff and patients, which it acted on. The practice was aware of future challenges.

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Table 3: Brookvale Practice – summary of findings from five key questions

Overall Rating	Question	Rating	Findings
 Outstanding	Are services safe?	 Good	The practice is rated as good for providing safe services. Staff understood and fulfilled their responsibilities to raise concerns, and to report incidents and near misses. Lessons were learned and communicated widely to support improvement. Information about safety was recorded, monitored, appropriately reviewed and addressed. Risks to patients were assessed and well managed. We noted that the recruitment practices should be improved by recording an assessment of the physical and mental fitness of staff.
	Are services effective?	 Outstanding	The practice is rated outstanding for providing effective services. The practice proactively engaged patients to promote their well-being. The practice had run several events to raise patient awareness of health conditions and promote good health. For example, a talk was given to patients about mammography screening to improve mammography uptake. This event was held in the evening to promote attendance. A health promotion evening was held where male patients were invited for a range of health checks such as blood pressure, body mass index (BMI) and glucose monitoring. This event was well attended and helped to identify several patients who required follow up. The Fit for 15 campaign was introduced this year to increase the cardiovascular screening of patients aged 18 and over. In the last 12 months the practice had completed 478 health checks compared with 253 the previous year. The practice had strategies in place to identify long term conditions early and therefore improve patient care. For example, to identify patients at risk of chronic obstructive pulmonary disease (COPD) Spirometry was offered to smokers aged 35 and over. This strategy has been in place for a number of years and this work gained recognition with a prize from the International Primary Care Respiratory Group. A project was undertaken to encourage male patients over 65 to request aortic aneurysm screening (the national programme offers this to patients who are 65 years of age, patients older than this have to request this screening). Patients were informed about this testing via practice website, waiting room TV, consultations and mailshots. Patients were invited to the practice to discuss to discuss this screening prior to referral. Results showed that 118 scans had been requested and as a consequence six patients with aortic aneurysm and an incidental cancer diagnosis had been identified. The practice had a very good skill mix which included two nurse clinicians and a nurse practitioner who were able to see a broader range of patients than the practice nurses. In addition the practice had four practice nurses and a health care assistant which allowed for greater capacity for monitoring and reviewing patients' health. The practice provided examples of audits to demonstrate that audit and quality improvement was central to the operation of the practice. The practice had been recognised by the RCGP Mersey faculty having won prizes for an audit of diabetes care and an audit of peripheral vascular disease. Patients' needs were assessed and care was planned and delivered in line with current legislation. Staff referred to guidance from the National Institute for Health and Care Excellence (NICE) and used it routinely. Data showed patient outcomes were at or above national averages. Staff worked with other health care teams and there were systems in place to ensure appropriate information was shared. Staff had received training appropriate to their roles and there was a clear commitment towards staff learning and development.
	Are services caring?	 Outstanding	The practice is rated outstanding for providing caring services. The practice provided a range of services to demonstrate that patients were provided with a caring service. The practice had close links with the Halton Carers Association and a representative from the association attended practice meetings such as the avoiding unplanned admissions to hospital and palliative care meetings so they were able to identify any support needed by carers. A carer's register was maintained. Information publicising services for carers was available in the waiting area and on the website. Text messages were sent to carers notifying them of events and useful information. For example, carers had recently been sent a text message about a non-means tested allowance available to them for breaks. Staff told us that if families had suffered bereavement, their usual GP contacted them or sent them a sympathy card. A Christmas present or hamper was provided to older patients with no family. The practice had signed up for the

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			Safe in Town scheme and provided a safe haven for vulnerable people (vulnerable people were able to come to the practice and the person's carers would be contacted). In 2014 the practice was awarded a grant to develop a community garden at the practice. Patients worked to create the garden which provided exercise and reduced social isolation. Patients' views gathered at inspection demonstrated they were treated with compassion, dignity and respect and they were involved in decisions about their care and treatment. We also saw that staff treated patients with kindness and respect, and maintained confidentiality. Staff helped people and those close to them to cope emotionally with their care and treatment.
Are services responsive to people's needs?	 Outstanding	<p>The practice is rated outstanding for providing responsive services. Services were planned and delivered to take into account the needs of different patient groups. For example, extended hours services were provided Monday and Tuesday morning and evening and from 09:00 to 13:00 on Saturdays. Home visits were undertaken to housebound patients and patients that were hard to engage. The nursing team dedicated two days per week to home visits which included long term condition reviews and immunisation. The effectiveness of this approach was shown in data demonstrating flu vaccine uptake for 2014 was higher than neighbouring practices with a similar patient population. Quality and Outcomes Framework (QOF) Performance for diabetes assessment and care was higher than the national averages. There were longer appointments available for people with a learning disability and Saturday morning clinics were offered to patients with a learning disability to encourage attendance. One-stop clinics were provided to encourage uptake for health monitoring services related to specific conditions. There were disabled facilities, hearing loop and translation services available. Chairs for bariatric patients were provided in the waiting area. In response to a high number of patients being illiterate alerts were placed on staff computers to indicate assistance may be required. The practice referred patients to Wellbeing Enterprise Services, a social enterprise to support people to achieve happier, healthier and longer lives. Patients could be referred for support with a number of issues, including, debt management, housing, social isolation. A report from this service showed that patients who were referred by the practice benefitted from the interventions provided. For example, by experiencing a reduction in their symptoms of depression and improving their general well-being. Access to the service was monitored to ensure it met the needs of patients. The practice had a complaints policy which provided</p>	
Are services well led?	 Good	<p>The practice is rated good for being well-led. It had a clear vision and strategy. Governance arrangements were underpinned by a clear leadership structure and staff felt supported by management. The practice had a number of policies and procedures to govern activity. There were systems in place to monitor and improve quality and identify risk. The practice proactively sought feedback from staff and patients, which it acted on and had an active PPG. Staff had received inductions, regular performance reviews and attended staff meetings and events. The practice was aware of future challenges.</p>	

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Table 4: Grove House Practice – summary of findings from five key questions

Overall Rating	Question	Rating	Findings
 Good	Are services safe?	 Good	The practice is rated as good for providing safe services. Staff understood and fulfilled their responsibilities to raise concerns, and to report incidents and near misses. Lessons were learned and communicated widely to support improvement. Information about safety was recorded, monitored, appropriately reviewed and addressed. Risks to patients were assessed and well managed. We saw good examples of joint working with midwives and health visitors who were based in the same building, and with school nurses. Staff shared locally acquired knowledge to keep vulnerable patients safe, especially where this could affect decisions on the future care arrangements of vulnerable patients.
	Are services effective?	 Good	The practice is rated as good for providing effective services. Staff worked with multidisciplinary teams, which involved staff from care providers and voluntary organisations that could contribute to the long term, effective care and support of patients. Clinicians worked with SCIP workers to provide more holistic treatment of patients, where social factors were significant contributors to some patients' health problems. Data showed patient outcomes were in line with the average for the locality. Staff referred to guidance from the National Institute for Health and Care Excellence and used it routinely. Patients' needs were assessed and care was planned and delivered in line with current legislation. This included assessing capacity and promoting good health. Staff had received training appropriate to their roles and any further training needs had been identified and appropriate training planned to meet these needs. There was evidence of appraisals and personal development plans for all staff.
	Are services caring?	 Good	The practice is rated as good for providing caring services. Feedback from patients about their care and treatment was strongly positive. We observed a patient-centred culture. Staff were motivated and inspired to offer kind and compassionate care and worked to overcome obstacles to achieving this. We found many positive examples to demonstrate how patient's choices and preferences were valued and acted on. We saw particularly how clinicians strived to provide continuity of care by use of a buddying system within the practice. This was particularly important to those patients with complex needs, their carers and their relatives. Staff worked with all stakeholders to ensure that patient care was compassionate and focused on the needs of the individual.
	Are services responsive to people's needs?	 Good	The practice is rated as good for providing responsive services. Where data showed the practice could improve on positive scores for patient satisfaction, we saw plans in place to address this. Urgent appointments were available on the same day. We saw the practice respond to examples of social isolation of patients and the way this affected the health of the local population. To address this the practice had built up a matrix of almost 600 voluntary organisations, many of which were invited to a 'market day' at the practice to reach out to more isolated patients, offering support and well-being services. Practice clinicians worked on a daily basis with SCIP workers, to support vulnerable patients and tackle the root cause of complex health problems of some patients. The practice acted on suggestions for improvements and changed the way it delivered services in response to feedback from the Patient Participation Group (PPG). Information about how to complain was available and easy to understand, and the practice responded quickly when issues were raised. Learning from complaints was shared with staff and other stakeholders.
	Are services well led?	 Good	The practice is rated as good for providing well-led services. The practice had a clear vision with quality and safety as its top priority. The strategy to deliver this vision was regularly reviewed and discussed with staff. High standards were promoted and owned by all practice staff. Teams worked together across all roles. Governance and performance management arrangements had been reviewed and took account of current models of best practice. The practice had succession planning in place, which was reviewed to ensure that the skills set of clinicians kept pace with the demands of the practice population and the practice desire to offer more integrated care. There was a high level of constructive engagement with all staff. Staff we spoke with spoke of high levels of satisfaction in their role. The practice worked with

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			the wider health care community to deliver care that met the needs of patients. We saw examples of how this was promoted and supported by the leadership team as critical to delivering services that truly addressed patients' health issues. The practice gathered feedback from patients and it had an active Patient Participation Group (PPG) which influenced practice development.
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Table 5: Oaks Place Surgery – summary of findings from five key questions

Overall Rating	Question	Rating	Findings
 Good	Are services safe?	 Requires improvement	The practice is rated as requires improvement for providing safe services as there were areas where it should make improvements. The practice was able to provide evidence that they monitored safety issues. However, there was limited evidence of shared learning taking place or that lessons learnt had led to effective change. The practice had a recruitment system in place that ensured appropriate checks on permanent and temporary staff were undertaken. The practice advertised that chaperones were available, however due to staffing levels this facility was unworkable. There was no system in place to effectively monitor the cleanliness of the practice. There was system in place to monitor uncollected prescriptions to ensure vulnerable patients were receiving their medication. However records viewed during the inspection identified that the system was not always being followed by the staff team.
	Are services effective?	 Good	The practice is rated good for providing effective services. Patients' needs were assessed and care was planned and delivered in line with current legislation. Staff referred to guidance from the National Institute for Health and Care Excellence (NICE) and used it routinely. Data showed patient outcomes were broadly in line or above national averages. Staff worked with other health care teams and there were systems in place to ensure appropriate information was shared. Staff had received training appropriate to their roles.
	Are services caring?	 Good	The practice is rated as good for providing caring services. Data showed that patients rated the practice higher than others for several aspects of care. Patients said they were treated with compassion, dignity and respect and they were involved in decisions about their care and treatment. Information for patients about the services available was easy to understand and accessible. We also saw that staff treated patients with kindness and respect, and maintained confidentiality.
	Are services responsive to people's needs?	 Good	The practice is rated as good for providing responsive services. The practice offered pre bookable and same day appointments and also offered telephone consultations to determine whether a patient needed to be seen by a GP or could be offered advice or sign posted to a more appropriate service such as a pharmacist. There were limited systems in place to monitor patient access. For example, monitoring the use by patients of the urgent care and walk in services situated in the building to determine the effectiveness of the service provided to meet patients' needs. The practice had a complaints policy which provided staff with clear guidance about how to handle a complaint. The practice did not carry out an annual complaints audit to identify themes and to monitor the effectiveness of the complaints process as a driver of improvement. The practice does not have a website.
	Are services well led?	 Good	The practice is rated good for being well-led. The practice had recently changed from a GP partnership to a single handed GP. The lead GP had identified areas for improvement in the clinical and administration staffing levels and had taken steps to resolve these issues. The practice had a number of policies and procedures to govern activity. There were systems in place to monitor and improve quality and identify risk. However, further work was needed to ensure proactive work took place to remove or minimise risks identified. Self-employed and locum GPs received external appraisals, in house induction and were invited to staff meetings.

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Table 6: Peelhouse Medical Centre – summary of findings from five key questions

Overall Rating	Question	Rating	Findings
 Good	Are services safe?	 Good	The practice is rated as good for providing safe services. Staff understood and fulfilled their responsibilities to raise concerns, and to report incidents and near misses. Lessons were learned and communicated within the practice and with external professionals and members of the patient participation group (PPG) to support improvement. The premises were clean and tidy. Safe systems were in place to ensure medication, including vaccines were well managed. Prescription pads stored in office cabinets would benefit from risk assessments to help improve security when cabinets were left open for staff access. There were sufficient numbers of staff. Recruitment checks were carried out and recruitment files were well managed.
	Are services effective?	 Outstanding	Practice rated outstanding for providing effective services. Practice proactively engaged patients to promote their well-being. The practice had strategies in place to identify long term conditions early and therefore improve patient care. For example, to identify patients at risk of chronic obstructive pulmonary disease (COPD). The practice monitored its performance data and had systems in place to improve outcomes for patients. Staff routinely referred to guidance from the National Institute for Health and Care Excellence (NICE.) Patients' needs were assessed and care was planned and delivered in line with best practice and national guidance. An advanced nurse practitioner saw a broader range of patients and monitored the effectiveness of their unplanned admissions strategy of patients identified at risk and in managing their in-house warfarin clinic.
	Are services caring?	 Good	The practice is rated as good for caring. Patients' views gathered at inspection demonstrated they were treated with compassion, dignity and respect and they were involved in decisions about their care and treatment. We also saw that staff treated patients with kindness and respect, and maintained confidentiality. Staff helped people and those close to them to cope emotionally with their care and treatment. Data from the National GP Patient Survey published July 2015 showed that patients rated the practice as comparable and exceeded in several aspects of care compared to local and national averages. Some staff had worked at the practice for many years and understood the needs of their patients well.
	Are services responsive to people's needs?	 Good	The practice is rated as good for providing responsive services. It reviewed the needs of its local population and engaged with the local Clinical Commissioning Group (CCG) to secure improvements to services where these were identified. Services were planned and delivered to take into account the needs of different patient groups. The practice referred patients to Wellbeing Enterprise Services, a social enterprise to support people to achieve happier, healthier and longer lives. Patients could be referred for support with a number of issues, including, debt management, housing, social isolation. The practice had good facilities and was well equipped to treat patients and meet their needs including access to disabled facilities, hearing loop and translation services. Information about how to complain was available and evidence showed that the practice responded quickly to issues raised. Learning from complaints was shared with staff.
	Are services well led?	 Good	The practice is rated as good for being well led. It had a clear vision and strategy. Governance arrangements were underpinned by a clear leadership structure with delegated roles and staff felt supported by management. The practice had a number of policies and procedures to govern activity. There were systems in place to monitor and improve quality and identify risk. The practice proactively sought feedback from staff and patients, which it acted on and had an active PPG. Staff had received inductions, regular performance reviews and attended staff meetings and events.

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Table 7: Upton Rocks Primary Care – summary of findings from five key questions

Overall Rating	Question	Rating	Findings
 Good	Are services safe?	 Good	The practice is rated as good for providing safe services. Staff understood and fulfilled their responsibilities to raise concerns, and to report incidents and near misses. Lessons were learned and communicated widely to support improvement. Information about safety was recorded, monitored, appropriately reviewed and addressed. Risks to patients were assessed and managed. Some follow-up of outstanding compliance matters was required.
	Are services effective?	 Good	The practice is rated as good for providing effective services. Data showed patient outcomes were at or above average for the locality. Staff referred to guidance from the National Institute for Health and Care Excellence and used it routinely. Patients' needs were assessed and care was planned and delivered in line with current legislation. This included assessing capacity and promoting good health. Staff had received training appropriate to their roles and any further training needs had been identified and appropriate training planned to meet these needs. There was evidence of appraisals and personal development plans for all staff.
	Are services caring?	 Good	The practice is rated as good for providing caring services. Data from the NHS England GP Patients Survey, showed that patients rated the practice the same or sometimes lower than others locally and nationally for several aspects of care, particularly in relation to GP care. More recent data, for example from the Friends and Family Test, showed patients would recommend the practice to others. Patients said they were treated with compassion, dignity and respect. Scores in relation to treatment by the practice nurses were good. Information for patients about the services available was easy to understand and accessible. We also saw that staff treated patients with kindness and respect, and maintained confidentiality.
	Are services responsive to people's needs?	 Good	The practice is rated as good for providing responsive services. It reviewed the needs of its local population and when necessary, engaged with the NHS England Area Team and Clinical Commissioning Group to meet the needs of patients. Patients said they found it easy to make an appointment with a named GP, and said if they needed an appointment to be seen on the day, this was made available to them. The practice information leaflet gave details of how to make a complaint. We saw that complaints were responded to in line with the complaints policy of the provider. The practice has a branch surgery which it operates from one day each week. This had been kept open in response to patient demand. We did note that although the practice had a GP presence for the extended hours surgery on Monday of each week, there was no GP presence for most of the surgery opening hours on Monday of each week. The arrangement in place was that the GP was 'on call' and if patients needed to see the GP, staff would telephone and request the GP attend the surgery. An advanced nurse prescriber was routinely available throughout the day.
	Are services well led?	 Good	The practice is rated as good for being well-led. There was a corporate vision and strategy. Staff were clear about the vision and their responsibilities in relation to this. There was a clear leadership structure and staff felt supported by management. The practice had a number of policies and procedures to govern activity. There were systems in place to monitor quality and identify risk. The practice proactively sought feedback from staff and patients. The patient participation group (PPG) was active. Staff had received inductions, regular performance reviews and attended staff meetings and events.

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Table 8: West Bank – summary of findings from five key questions

Overall Rating	Question	Rating	Findings
 Good	Are services safe?	 Good	The practice is rated as good for providing safe services. Staff understood and fulfilled their responsibilities to raise concerns, and to report incidents and near misses. Lessons were learned and communicated widely to support improvement. Information about safety was recorded, monitored, appropriately reviewed and addressed. Risks to patients were assessed and well managed.
	Are services effective?	 Good	The practice is rated as good for providing effective services. Data showed patient outcomes were at or above average for the locality. Staff referred to guidance from the National Institute for Health and Care Excellence and used it routinely. Patients' needs were assessed and care was planned and delivered in line with current legislation. This included assessing capacity and promoting good health. Staff had received training appropriate to their roles and any further training needs had been identified and appropriate training planned to meet these needs. There was evidence of appraisals and personal development plans for all staff. Staff worked with multidisciplinary teams.
	Are services caring?	 Good	The practice is rated as good for providing caring services. Data showed that patients rated the practice higher than others for several aspects of care. Patients said they were treated with compassion, dignity and respect and they were involved in decisions about their care and treatment. Information for patients about the services available was easy to understand and accessible. We also saw that staff treated patients with kindness and respect, and maintained confidentiality.
	Are services responsive to people's needs?	 Good	The practice is rated as good for providing responsive services. It reviewed the needs of its local population and engaged with the NHS England Area Team and Clinical Commissioning Group (CCG) to secure improvements to services where these were identified. Patients said they found it easy to make an appointment with a named GP and that there was continuity of care, with urgent appointments available the same day. The practice had good facilities and was well equipped to treat patients and meet their needs. Information about how to complain was available and easy to understand and evidence showed that the practice responded quickly to issues raised. Learning from complaints was shared with staff and other stakeholders.
	Are services well led?	 Good	The practice is rated as good for being well-led. It had a clear vision and strategy. Staff knew the vision and their responsibilities in relation to this. There was a clear leadership structure and staff felt supported by management. The practice had a number of policies and procedures to govern activity and held regular governance meetings. There were systems in place to monitor and improve quality and identify risk. The practice proactively sought feedback from staff and patients, which it acted on. The patient participation group (PPG) was active. Staff had received inductions, regular performance reviews and attended staff meetings and events.

**Table 9: Common themes from the five key questions**

Question	Rating	Key Themes
<b>Are services safe?</b> Six practices were rated as 'good' and two as 'required improvement'.	 Good	<ul style="list-style-type: none"> <li>• Staff understood and fulfilled their responsibilities to raise concerns, and to report incidents and near misses.</li> <li>• Lessons were learned and communicated widely to support improvement.</li> <li>• Risks to patients were assessed and managed.</li> <li>• Safe systems were in place to ensure patients protected from risks associated with medication.</li> </ul>
	 Requires improvement	<ul style="list-style-type: none"> <li>• Recruitment practices should be improved by recording an assessment of the physical and mental fitness of staff.</li> </ul>
<b>Are services effective?</b> Six practices were rated as 'good' and two as 'outstanding'.	 Good	<ul style="list-style-type: none"> <li>• Staff referred to guidance from the National Institute for Health and Care Excellence and used it routinely.</li> <li>• Patients' needs were assessed and care was planned and delivered in line with current legislation.</li> <li>• Staff had received training appropriate to their roles.</li> </ul>
	 Outstanding	<ul style="list-style-type: none"> <li>• The practice proactively engaged patients to promote their well-being.</li> <li>• The practice had strategies in place to identify long term conditions early and therefore improve patient care.</li> <li>• The practice skill mix included nurse clinicians and nurse practitioners which enabled them to see a broader range of patients than the practice nurses.</li> </ul>
<b>Are services caring?</b> Seven practices were rated as 'good' and one as 'outstanding'.	 Good	<ul style="list-style-type: none"> <li>• Staff treated patients with kindness and respect, and maintained confidentiality.</li> <li>• Patients said they were treated with compassion, dignity and respect.</li> <li>• Patients felt involved in planning and making decisions about their care and treatment.</li> </ul>
	 Outstanding	<ul style="list-style-type: none"> <li>• The practice provided a range of services to demonstrate that patients were provided with a caring service, e.g. the practice had close links with the Halton Carers Association and a representative from the association attended practice meetings so they were able to identify any support needed by carers. A carer's register was maintained. Information publicising services for carers was available in the waiting area and on the website. Text messages were sent to carers notifying them of events and useful information.</li> <li>• A Christmas present or hamper was provided to older patients with no family.</li> </ul>
<b>Are services responsive to patient's needs?</b> Seven practices were rated as 'good' and one as 'outstanding'.	 Good	<ul style="list-style-type: none"> <li>• The practice reviewed the needs of its local population and engaged with the NHS England Area Team and Clinical Commissioning Group (CCG) to secure improvements to services where these were identified.</li> <li>• Information about how to complain was available and easy to understand and evidence showed that the practice responded quickly to issues raised.</li> <li>• Learning from complaints was shared with staff and other stakeholders.</li> <li>• The practice acted on suggestions for improvements and changed the way it delivered services in response to feedback from the PPG.</li> </ul>
	 Outstanding	<ul style="list-style-type: none"> <li>• Home visits were undertaken to housebound patients and patients that were hard to engage. The nursing team dedicated two days per week to home visits which included long term condition reviews and immunisation.</li> <li>• There were longer appointments available for people with a learning disability and Saturday morning clinics were offered to patients with a learning disability to encourage attendance.</li> <li>• One-stop clinics were provided to encourage uptake for health monitoring services related to specific conditions.</li> <li>• In response to a high number of patients being illiterate alerts were placed on staff computers to indicate assistance may be required.</li> </ul>

Appendix 1

<p><b>Are services well led?</b> All eight practices were rated as 'good'.</p>	<p> Good</p>	<ul style="list-style-type: none"><li>• Practice had a clear vision and strategy.</li><li>• Governance arrangements were underpinned by a clear leadership structure and staff felt supported by management.</li><li>• The practice had a number of policies and procedures to govern activity.</li><li>• There were systems in place to monitor and improve quality and identify risk.</li><li>• The practice proactively sought feedback from staff and patients, which it acted on.</li></ul>
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