

Care Quality Commission

Inspection Evidence Table

Fullwell Cross Medical Centre (1-549913696)

Inspection date: 2 May 2018

Date of data download: 08 May 2018

Safe

Safety systems and processes

Infection control	Y/N
Risk assessment and policy in place Date of last infection control audit: The provider acted on any issues identified Detail: The infection control audit action plan identified 10 actions which were all completed within three weeks of the audit being completed. Actions include: updating the infection control audit to include a bare below elbow statement, ensuring sharps bins were not overfilled and were appropriately labelled.	Yes 28/12/17 Yes
The arrangements for managing waste and clinical specimens kept people safe?	Yes
Explanation of any 'No' answers:	

Risks to patients

Question	Y/N
The practice had systems in place to monitor and review staffing levels and skill mix.	Yes
There was an effective approach to managing staff absences and busy periods.	Yes
Staff knew how to respond to emergency situations.	Yes

Information to deliver safe care and treatment

Question	Y/N
Individual care records, including clinical data, were written and managed in line with	Yes

current guidance and relevant legislation.	
The care records we saw demonstrated that information needed to deliver safe care and treatment was made available to relevant staff in an accessible way.	Yes
Referral letters contained specific information to allow appropriate and timely referrals.	Yes
Referrals to specialist services were documented.	Yes
The practice had a documented approach to the management of test results and this was managed in a timely manner.	Yes
The practice demonstrated that when patients use multiple services, all the information needed for their ongoing care was shared appropriately and in line with relevant protocols.	Yes
Explanation of any 'No' answers:	

Safe and appropriate use of medicines

Medicine Management	Y/N
The practice had a process and clear audit trail for the management of information about changes to a patient's medicines including changes made by other services.	Yes

Track record on safety and lessons learned and improvements made

Significant events	Y/N
There was a system for recording and acting on significant events	Yes
Staff understood how to report incidents both internally and externally	Yes
There was evidence of learning and dissemination of information	Yes

Example(s) of significant events recorded and actions by the practice;

Event	Specific action taken
Medicines error due to communication failure between practice and another health provider.	An investigation was undertaken and a comprehensive action plan was developed. Actions included the revision of prescribing policies when medicines are changed by a prescriber from another health provider. The practice held joint meetings with an external health provider with whom they had shared care arrangements and worked together to improve the timeliness of correspondence.

Well-led

Leadership capacity and capability

Example of how leadership, capacity and capability were demonstrated by the practice

The leadership team demonstrated by they had the skill, capacity and capability to provide safe and effective treatment and care. The practice could demonstrate they were aware of the practices strengths and weakness and produce a comprehensive strategy and business plan to overcome the barriers identified.

Culture

Examples of feedback from staff or other evidence about working at the practice

Source	Feedback
GP	The practice has a good track record of staff retention and staff are all treated with dignity and respect and their views and opinions are important to the effective running of the practice.
Patient Participation Group	The GPs and practice manager are open and honest about the performance of the practice and make the PPG members feel valued.

Source	Example
Serious Case Review	The practice undertook a serious case review following the death of a patient. The practice included all staff members in the investigation, subsequent discussion and development of a thorough action plan. The case review and action plan was shared with the Coroner's Office and we saw evidence of actions identified being completed.

Examples of action taken by the practice to promote the safety and wellbeing of staff

Source	Example
Staff	All practice leadership team provide lunch during a daily informal meeting to help build working relationships.

Examples of actions to improve quality in past 2 years

Area	Impact
Review of repeat prescribing protocol	Following an incident on GPs are permitted to change repeat medicines to ensure clinicians are aware of the changes and patients are appropriately informed of any adjustments.
Accredited Quality Improvement Programme	The practice manager has been sponsored to enrol in on an accredited Quality Improvement Programme.

Examples of service developments implemented in past 2 years

Development area	Impact
Telephone system	The practice installed a cloud based telephone system to improve accessibility to the practice by telephone. The system allows 50 lines to be in use at one time therefore patients are able to join a queue to speak to the practice. The evidence provided by the practice show almost no calls are unable to get through to the practice due to the line being engaged.
eConsult	The practice have introduced a web based system which allows patients to review their symptoms, be directed to alternative medical services or speak directly with a GP.
Additional clinical sessions	The practice have increased the number of clinical sessions provided by 10 in order to improve access for patients.
Elderly care health care assistant	The practice employ a health care assistant who undertakes phone visits for elderly patients. Patient can contact them directly on a dedicated mobile number to seek advice and support between the hours of 10am and 4pm. This system has decreased the number of A+E admissions and appointments from approximately 450 in 2015 to 320 in 2017.

Governance arrangements

Examples of structures, processes and systems in place to support the delivery of good quality and sustainable care.	
Learning from complaints and significant events	We saw evidence following a recent Coroners report where the practice had thoroughly investigated the concern, identified actions to ensure service improvements and shared the findings with all staff members. The changes made following the event include; introducing a policy to improve communication with patients when medicines are changed by
Practice specific policies	The practice introduced a policy which ensures prescription amendments recommended by external organisations
Staff were able to describe the governance arrangements	Yes
Staff were clear on their roles and responsibilities	Yes

Managing risks, issues and performance

Major incident plan in place	Yes
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Staff trained in preparation for major incident	Yes
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Engagement with patients, the public, staff and external partners

Examples of methods of engagement

	Method	Impact
Patients	Staff Survey	A number of changes made to the appointment system to
Staff	Daily lunchtime meetings	Protected learning and social time between all staff members.

Feedback from Patient Participation Group;

Feedback
The patient participation group (PPG) met with the practice staff on a monthly basis to discuss practice performance and consider way to engage with the different patient population groups.
The PPG felt the practice staff listened to the suggestions raised and took on-board all suggestions to possible improvements within the practice.

Examples of specific engagement with patients and patient participation group in developments within the practice;

Examples	Impact
The PPG arranged for an event at the practice to encourage those aged over 55 who may be living in isolation to have the opportunity to talk to the practice team, appropriate charities and the local MP.	The event is scheduled for the 28 June 2018 and therefore the impact could not be measured during our inspection.
The PPG suggested improvements to the telephone queuing system.	The queuing system was amended to ensure the different options available to patients were accessible in the most sensible order. This made the system easier to use for patients and reduced the number of patients using the wrong options and therefore accessing the wrong service within the practice.

Continuous improvement and innovation

Examples of innovation and improvements	Impact on patients
Improved management of patient correspondence	The practice introduced a system to improve the management of patient correspondence to reduce the time burden on GPs. The process had saved 1.5 hours of GP time per GP per day resulting in an additional 1 days' worth of GP sessions available per week. A case study of this process was published on the NHS England Website.
Accredited Quality Improvement Programme	The practice manager was sponsored to complete an accredited Quality Improvement Programme.

Notes: CQC GP Insight

GP Insight assesses a practice's data against all the other practices in England. We assess relative performance for the majority of indicators using a z-score, a statistical tool which

shows the deviation from the England average. It gives us a statistical measurement of a practice's performance in relation to the England average, and measures this in standard deviations. We calculate a z-score for each indicator, thereby highlighting the practices which significantly vary from the England average (in either a positive or negative direction). We consider that z-scores which are +2 or more or -2 or less are at significant levels, warranting further enquiry.

N.B. Not all indicators are part of the GP insight set and those that aren't will not have a variation band.

The following language is used for banding variation:

Significant variation (positive)

- Variation (positive)
- Comparable to other practices
- Variation (negative)
- Significant variation (negative)

Note: for the following indicators the variation bands are different:

- Child Immunisation indicators. These are scored against the World Health Organisation target of 95%.

It is important to note that z-scores are not a judgement in themselves, but will prompt further enquiry, as part of our ongoing monitoring of GP practices.

Guidance and Frequently Asked Questions on GP Insight can be found on the following link: <http://www.cqc.org.uk/what-we-do/how-we-use-information/monitoring-gp-practices>