

Care Quality Commission

Inspection Evidence Table

The Symons Medical Centre (1-571045052)

Inspection date: 17 July 2018

Date of data download: 03 July 2018

Well-led

Leadership capacity and capability

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

Since the comprehensive inspection carried out in November 2017 leaders at the practice had undertaken systematic reviews of processes, protocols and procedures that gave rise to concern and resulted in a breach of regulation. Leaders had measured improvement and identified further action to make further improvements.

Any additional evidence

- Clinical leaders had completed a review of the system in place to offer and undertake physical health reviews for patients diagnosed with a learning disability. Data showed that 21 out of 46 patients in this group had received a physical health review since April 2018. The practice clinic timetable included time dedicated to these reviews one morning a week. This had not been the case when we carried out the November 2017 inspection.
- A review of the system and process to identify carers had been undertaken. This included provision of a wider range of promotional material to encourage patients with carer responsibilities to register as a carer. The clinical staff also focused on ascertaining whether patients diagnosed with either a learning disability or dementia had formal carers. The work undertaken had resulted in an increase of 29 registered carers from 64 in November 2017 to 93 in July 2018. Whilst this 46% increase did not result in 1% of the practice population being identified as carers it was significant when compared to the situation we found at our first inspection.

Governance arrangements

Examples of structures, processes and systems in place to support the delivery of good quality and sustainable care.

Practice specific policies	The practice had undertaken a review of all their operational and clinical policies. All policies now carried a review date and from the sample of 15 policies we reviewed, in detail, we could see that updating had taken place where appropriate.
Other examples	Review of the process to follow up on safety alerts had taken place. System included recording the appropriate staff, responsible for action arising from an alert and the action taken.

Managing risks, issues and performance

Examples of actions taken to address risks identified within the practice

Risk	Example of risk management activities
Nurses administering vaccines without appropriate authorisation.	Practice monitored patient group directions (PGDs) to ensure they were up to date and appropriately authorised.
Emergency medicines may pass expiry date.	Monthly control checks undertaken and recorded.
Six monthly reviews of patients diagnosed with cancer not being undertaken.	Practice maintained regular review of performance in following up long term conditions and recalled or undertook reviews when these were identified as required.

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>

Glossary of terms used in the data.

- **COPD:** Chronic Obstructive Pulmonary Disease
- **PHE:** Public Health England
- **QOF:** Quality and Outcomes Framework (see <https://qof.digital.nhs.uk/>).
- **RCP:** Royal College of Physicians.
- **STAR-PU:** Specific Therapeutic Group Age-sex weightings Related Prescribing Units. These weighting allow more accurate and meaningful comparisons within a specific therapeutic group by taking into account the types of people who will be receiving that treatment. ([See NHS Choices for more details](#)).