

# Care Quality Commission

## Inspection Evidence Table

### Dr Roy Alexander (1-507556344)

Inspection date: 17 July 2018

Date of data download: 16 July 2018

Please note: Any Quality Outcomes Framework (QOF) data relates to 2016/17.

## Safe

### Safety systems and processes

Safeguarding	Y/N
There was a lead member of staff for safeguarding processes and procedures.	Y
Safety and safeguarding systems, processes and practices were developed, implemented and communicated to staff.	Y
Policies were in place covering adult and child safeguarding.	Y
Policies were updated and reviewed and accessible to all staff.	Y
Partners and staff were trained to appropriate levels for their role (for example level three for GPs, including locum GPs)	Y
Disclosure and Barring Service checks were undertaken where required	Y

Recruitment Systems	Y/N
Recruitment checks were carried out in accordance with regulations (including for agency staff and locums).	Y
Systems were in place to ensure the registration of clinical staff (including nurses and pharmacists) was checked and regularly monitored.	Y

Safety Records	Y/N
Fire procedure in place	Y
Fire extinguisher checks	Y
Fire drills and logs	Y
Fire alarm checks	Y
Fire training for staff	Y
Fire marshals	Y
Fire risk assessment Date of completion: April 2018	Y
Actions were identified and completed. Fire doors were all kept closed, filing cabinets had been removed from the vicinity of a fire door and fire notices were placed around the building with instructions of actions to take in the event of a fire. We also noted all staff had up to date fire safety training. Fire drills had been carried out in April and June 2018 and logs were kept of weekly fire alarm and emergency lighting checks.	Y

Infection control	Y/N
Risk assessment and policy in place Date of last infection control audit: April 2018	Y
The practice acted on any issues identified	Y

### Risks to patients

Question	Y/N
There was an effective approach to managing staff absences and busy periods.	Y
Comprehensive risk assessments were carried out for patients.	Y
Staff knew how to respond to emergency situations.	Y
Receptionists were aware of actions to take if they encountered a deteriorating or acutely unwell patient and had been given guidance on identifying such patients.	Y
The practice had equipment available to enable assessment of patients with presumed sepsis.	Y

## Appropriate and safe use of medicines

Medicines Management	Y/N
Prescriptions (pads and computer prescription paper) were kept securely and monitored.	Y
If the practice had controlled drugs on the premises there were systems for the safe ordering, checks on receipt, storage, administration, balance checks and disposal of these medicines in line with national guidance.	N/A*
The practice held appropriate emergency medicines and risk assessments were in place to determine the range of medicines held.	Y**
The practice had arrangements to monitor the stock levels and expiry dates of emergency medicines/medical gases.	Y
There was medical oxygen on site.	Y
The practice had a defibrillator.	Y
Both were checked regularly and this was recorded.	Y
Medicines that required refrigeration were appropriately stored, monitored and transported in line with PHE guidance to ensure they remained safe and effective in use.	Y
<p>Explanation of any answers:</p> <p>*Following the inspection in January 2018 the practice had made the decision to no longer stock or dispense controlled drugs.</p> <p>**The practice had reviewed the emergency medicines held and now had an adequate stock including medicine to treat suspected bacterial meningitis. This medicine was not held in stock at the inspection in January 2018.</p>	

Dispensing practices only	Y/N
Access to the dispensary was restricted to authorised staff only.	Y
Explanation of any answers	
Any other comments on dispensary services: The security of the dispensary had been reviewed and a key pad lock was in place. The practice had taken measures to record and control the temperature in the dispensary to ensure the medicines were kept at the recommended temperature.	

### 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	Y
Staff understood how to report incidents both internally and externally	Y
There was evidence of learning and dissemination of information	Y

Example of significant events recorded and actions by the practice;

Event	Specific action taken
An error had occurred with a prescription printed from the wrong patients record	The error was immediately recognised and rectified. A significant event form was completed and the error was discussed at the practice meeting.

Safety Alerts	Y/N
There was a system for recording and acting on safety alerts	Y
Staff understand how to deal with alerts	Y
Comments on systems in place: We saw evidence that a recent alert relating to the recall of a device used by patients with diabetes had been actioned.	

# Well-led

## 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 manager had completed reviews of all policies held within the practice to ensure they contained up to date and pertinent information.
	Y/N
Staff were able to describe the governance arrangements	Y
Staff were clear on their roles and responsibilities	Y

## Managing risks, issues and performance

Major incident planning	Y/N
Major incident plan in place	Y

### Examples of actions taken to address risks identified within the practice

Risk	Example of risk management activities
Fire	A risk assessment had been completed by an external company. Identified actions had been completed.
Security of patient notes	All patient notes were now secured in locked cabinets within the practice.
Summarising of patient records was completed of site.	A homeworking risk assessment had been completed. The computer used for the work at home had a virtual private network (VPN) to the practice computer system that was encrypted to prevent unauthorized access.

### DO NOT DELETE THE NOTES BELOW

#### 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](#)).