

Care Quality Commission

Inspection Evidence Table

Queen Mary Practice (1-2266239500)

Inspection date: **27 July 2018**

Date of data download: 26 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.	Yes
Safety and safeguarding systems, processes and practices were developed, implemented and communicated to staff.	Yes
Policies were in place covering adult and child safeguarding.	Yes
Policies were updated and reviewed and accessible to all staff.	Yes
Partners and staff were trained to appropriate levels for their role (for example level three for GPs, including locum GPs)	Yes
Systems were in place to highlight vulnerable patients on record. There was a risk register of specific patients	Yes

Medicines 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
Prescriptions (pads and computer prescription paper) were kept securely and monitored.	Yes
There was a process for the management of medicines including high risk medicines (for example, warfarin, methotrexate and lithium) with appropriate monitoring and clinical review prior to prescribing.	Yes
Explanation of any answers: We reviewed the clinical records for patients prescribed Methotrexate, New oral Anticoagulants (NoAC's) and Lithium and found that the practice were prescribing and monitoring patients in line with national guidance. For example, all patients on Methotrexate (a medicine usually prescribed to manage the symptoms associated with arthritis) had recent blood tests to ensure they were continuing to be prescribed the correct dosage of this medicine.	

Caring

Carers	Narrative
Percentage and number of carers identified	<p>62 carers identified. The practice told us that it was continuing in its efforts to identify further carers.</p> <p>An example of this was the exercise the practice was conducting of reviewing records of patients within certain population groups, to identify whether there is contact person linked to the identified patient.</p> <p>The name of the identified contact is searched on the practice patient record to see whether their name is already listed with the practice as a patient. If so, the patient is contacted by the practice to confirm whether they are a carer.</p>
How the practice supports carers	<p>The practice offers carers flu vaccines and flexible appointments to suit carers (where possible). The practice signposts carers to local support services.</p>

Responsive

Listening and learning from complaints received

Complaints	Y/N
Number of complaints received in the last year.	3
Number of complaints we examined	1
Number of complaints we examined that were satisfactorily handled in a timely way	1
Number of complaints referred to the Parliamentary and Health Service Ombudsman	0
Additional comments:	
<p>We viewed one complaint regarding the methods used by one of the doctors to diagnose a patient. We noted that the practice had sent an acknowledgement to the complainant on receipt of the complaint, but that there was not a date on the acknowledgement letter.</p> <p>When the practice had conducted its full investigation, we saw that the practice sent a dated response letter to complainant with a full explanation of why the doctor chose the method of diagnosis in question and what this method achieved in terms of the best patient care.</p> <p>The response letter concluded with contact details of the organisation to contact if the complainant was not satisfied with the response given.</p>	

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" (this tells us the number of standard deviations from the mean the data point is), giving us a statistical measurement of a practice's performance in relation to the England average. We highlight practices which significantly vary from the England average (in either a positive or negative direction). We consider that z-scores which are higher than +2 or lower than -2 are at significant levels, warranting further enquiry. Using this technique we can be 95% confident that the practice's performance is genuinely different from the average. It is important to note that a number of factors can affect the Z score for a practice, for example a small denominator or the distribution of the data. This means that there will be cases where a practice's data looks quite different to the average, but still shows as comparable, as we do not have enough confidence that the difference is genuine. There may also be cases where a practice's data looks similar across two indicators, but they are in different variation bands.

The percentage of practices which show variation depends on the distribution of the data for each indicator, but is typically around 10-15% of practices. The practices which are not showing significant statistical variation are labelled as comparable to other practices.

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

The following language is used for showing variation:

	Variation Band	Z-score threshold
1	Significant variation (positive)	$Z \leq -3$
2	Variation (positive)	$-3 < Z \leq -2$
3	Comparable to other practices	$-2 < Z < 2$
4	Variation (negative)	$2 \leq Z < 3$
5	Significant variation (negative)	$Z \geq 3$
6	No data	Null

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](#)).