

Care Quality Commission

Inspection Evidence Table

Highcroft Surgery (1-542061967)

Inspection date: 8 August 2018

Date of data download: 02 August 2018

Safe

Track record on safety and lessons learned and improvements made

Safety Alerts	Y/N
There was a system for recording and acting on safety alerts	Y *
<p>Comments on systems in place:</p> <p>During the previous inspection in August 2017, the practice's approach to information received from the Medicines and Healthcare Regulatory Agency (MHRA) was observed that appropriate action had been taken following receipt of recent alerts. However, the process for documenting this did not reflect this. We told the provider they should make improvements.</p> <p>The practice had a safety alerts protocol in place to manage all types of safety alerts including information received from the Medicines and Healthcare Regulatory Agency (MHRA). The protocol outlined the procedure to be followed and identified lead members of staff responsible. The practice recorded all safety alerts on spreadsheet which included details such as the type of alert, date issued, action required, action taken and by which clinician. From the alerts received we saw that two medicines received from the MHRA were discussed with a clinician and had been actioned accordingly. However, it was not clear from the information recorded what the outcome was following the initial actions taken. This information was provided to us following the inspection. The practice acknowledged that this information could be better demonstrated and told us that action would be taken to ensure the information was easily accessible.</p>	

Responsive

Responding to and meeting people's needs

Practice Opening Times	
Day	Time
Monday	8am to 6.30pm
Tuesday	8am to 6.30pm
Wednesday	8am to 6.30pm
Thursday	8am to 6.30pm
Friday	8am to 6.30pm

Appointments available	
	Appointments are available 8.30am to 12.30pm 3pm to 6pm Monday to Fridays. Same day 'Sit and Wait' clinics - Mondays, Tuesdays and Fridays between 8.00am to 10.30am
Extended hours opening	
	Extended hours surgeries to see a GP or a member of the nursing team are provided from 6.30pm to 7.30pm on Tuesday and Wednesday evenings.

Timely access to the service

National GP Survey results

Practice population size	Surveys sent out	Surveys returned	Survey Response rate%	% of practice population
12,003	238	121	50.84%	1%

Indicator	Practice	CCG average	England average	England comparison
The percentage of respondents to the GP patient survey who were 'Very satisfied' or 'Fairly satisfied' with their GP practice opening hours (01/01/2017 to 31/03/2017)	74.5%	78.1%	80.0%	Comparable with other practices
The percentage of respondents to the GP patient survey who gave a positive answer to 'Generally, how easy is it to get through to someone at your GP surgery on the phone?' (01/01/2017 to	31.8%	66.8%	70.9%	Variation (negative)

31/03/2017)				
The percentage of respondents to the GP patient survey who stated that the last time they wanted to see or speak to a GP or nurse from their GP surgery they were able to get an appointment (01/01/2017 to 31/03/2017)	65.1%	77.9%	75.5%	Comparable with other practices
The percentage of respondents to the GP patient survey who responded positively to the overall experience of making an appointment (01/01/2017 to 31/03/2017)	53.5%	71.4%	72.7%	Comparable with other practices
Any additional evidence or comments				

Examples of feedback received from patients:

Source	Feedback
NHS Choices	The overall rating based on 83 rated reviews was 2.5 stars. There had been 28 new comments since the last CQC inspection in August 2017. The feedback was mostly positive and included comments relating to improved access as a result of some of the changes made by the practice. There were eight negative feedback which related to difficulty accessing appointments, difficulty getting through to the practice on the telephone and delays on arrival for appointments. The practice had responded to the comments in a timely manner. The most recent comments at the time of our inspection, were generally positive about the practice.
National GP survey 2018	<p><u>Questions relating to Access (Is the service responsive to people's needs)</u></p> <ul style="list-style-type: none"> • 46% find it easy to get through to this GP practice by phone Local (CCG) average: 66% National average: 70% • 48% are satisfied with the general practice appointment times available Local (CCG) average: 62% National average: 66% • 45% describe their experience of making an appointment as good Local (CCG) average: 65% National average: 69% • 92% felt their needs were met during their last general practice appointment Local (CCG) average: 94% National average: 95% <p>At the time of the inspection in August 2018 the national GP survey had not been published; however, the results were published shortly after our inspection.</p> <p>Following the inspection, the practice told us they had reviewed the results of the survey. The practice's initial analysis of the results was that compared to last year's survey the number of patients who stated that it was easy to get through to the practice by phone had increased by 14%. The practice noted that the length of time patients waited to be seen on arrival had improved by 14%.</p>

	<p>The practice had carried out its own survey and new data generally supported the practice findings that the changes made were starting to improve satisfaction for access and waiting times.</p> <p>The practice had plans to further analyse the results of the national survey with the Patient Participation Group (PPG) and consider how they could make further Improvements.</p>
Care Quality Commission (CQC) comment cards	<p>Total comments cards received - 23</p> <p>Number of CQC comments received which were positive about the service - 18</p> <p>Number of comments cards received which were mixed about the service - Five</p> <p>Number of CQC comments received which were negative about the service – 0</p> <p>Of the 18 positive comment cards that we received five specifically mentioned the positive changes made by the practice which had increased access such as the same day clinic appointments. One comment card also included an attached letter which outlined the patients positive experience of the service as a result of the changes made. Of the five comment cards which gave mixed feedback, one described difficulty obtaining an appointment, two experienced delays on arrival for their appointments (one patient had attended the same day clinic, the other was not clear) and two cards included isolated comments.</p>
Patients	<p>We spoke with six patients, they were all positive about the changes made by the practice which included the same day 'Sit and Wait' clinic this was described as an excellent service. Patient said that due to the nature of the same day clinic any delays on arrival were acceptable as urgent patients were prioritised. Patients also stated that any delays were not an issue as when they were seen their care and treatment needs were met. Most of the patients could get a routine pre-bookable appointment in a timely manner. None of the patients reported any difficulty getting through to the practice via telephone.</p> <p>Patients told us that they were not always able to see their preferred GP. However, they understood that this was often due to changes in the GP's work patterns and recruitment and retention issues.</p>
PPG/Practice survey	<p>We spoke with the PPG chair who told us that they had considered the results of the previous National GP Survey published in July 2017 and found that the response rate for the practice was statistically low (total of 230 survey forms were distributed and 111 were returned which equated to a 48% completion rate, and represented 1% of the registered practice population of around 12,000 patients). They told us that therefore they had decided to focus on what the main issues were for the practice and devised a survey in response to this. Based on findings from previous CQC inspections as well as patient feedback the practice recognised that access to appointments and getting through to the practice by telephone were the main areas for concern. This had resulted in high dissatisfaction rates amongst patients and were identified as priority areas, the practice worked in conjunction with the PPG to take action. The telephone system was upgraded in June 2017 to ensure a call waiting and monitoring system was in place and to improve access to appointments a same day 'Sit and Wait' clinic, was introduced in July 2017. Staff explained that all patients</p>

	<p>who arrived between 8am and 10.30am without an appointment would be seen. Patients could be seen by one of three GPs as well as the advanced nurse practitioner (ANP). The practice told us they were offering 1141 appointments per week which was above the target range of 864 appointments based on a widely accepted formula of 72 appointments per 1000 patients.</p> <p>The practice had identified from data analysis and general feedback from patients that since the implementation of the new telephone system and the sit and wait clinic the volume of calls coming into the practice had reduced. As a result, more patients were able to get through to the practice by telephone. Following discussions with the practice the PPG undertook a survey to assess the impact of the sit and wait clinic to see if this had improved patients experience and accessibility.</p> <p>The PPG devised a survey which asked specific questions about the sit and wait clinic for example, if patients were aware of the service, did they access it and did they think it was a good idea. The PPG targeted the flu clinic to hand out surveys as this had a high volume of patient attending and would ensure a cross sample of patients were surveyed. In total 258 surveys were distributed. The results showed positive feedback from patients for example, 75% of patients had heard of the service (about 7 out of every 10 patients) 67% had used the service (about 7 out of every 10 patients) and 71% wanted more sessions (about 7 out of every 10 patients). The survey showed that 95% of patients felt that they had an improved experience at Highcroft Surgery due to introduction of the sit and wait clinic.</p>
NHS Friends and Family Test (FFT)	The most recent FFT data reviewed showed an increase in the percentage of patients who were extremely likely to recommend the practice with a total of 82% compared to 40% from the previous quarter

Any additional evidence

At the time of the inspection in August 2018 the national GP survey had not been published however, the results for the 2018 survey were published shortly after the inspection. The practice had responded to the results of the previous national GP survey published in July 2017. The practice had explored ways to improve satisfaction rates with regards to access to appointments and getting through to the practice by telephone as these were identified as key areas for patient dissatisfaction. Some of the actions taken were in place at the last CQC inspection. However, the practice had continued to engage with the PPG and build on progress made. The practice had completed internal surveys and audits to assess and monitor the changes made to ensure they impacted positively on patients experience of the service.

Actions taken to help assess and improve access included the following:

- A same day ‘Sit and Wait’ clinic was introduced in July 2017 in response to patient feedback. An internal survey was completed by the PPG to assess the impact for patients. Results showed positive response, the initiative had increased accessibility for patients and reduced the number of calls to the practice as patients could arrive at the practice without an appointment and be seen.
- An audit was completed to review the effectiveness of the sit and wait clinic on regular appointments

since its introduction in June 2017 to July 2018. The aim of the audit was to assess the availability of appointments within one, three and seven days of a request and the percentage of patients waiting less than 10 and 20 minutes on arrival. Data was collected between July 2016 to July 2018 and showed a steady increase in the availability of appointments from July 2016 to July 2018 and improvements in waiting times. For example, data provided by the practice showed in July 2018, 76% of people were seen within 10 minutes of their appointment time and 86% with 20 minutes (compared with July 2016 when 69 % of people were seen within 10 minutes of their appointment time and 49% with 20 minutes).

- The practice had reviewed the non-attendance rates (DNA) and data showed that the rate of DNA had improved, this increased the availability of appointments by ensuring effective use of resources. Data showed the rate of DNA was 3.9% between June 2016 to June 2017. This had reduced to 3.5% between June 2017 to June 2018 following the implementation of the sit and wait clinic.
- The telephone system was upgraded in June 2017 to ensure a call waiting and monitoring system. This allowed the practice to monitor the response rate and focus on peak times, it also provided patients reassurance that they were in a queue. Recent data provided by the practice demonstrated that the number of calls to the practice had reduced and more calls were answered within the target range. In the month of May 2017, the practice had received 9142 calls, this had reduced to 6269 in May 2018, which was a 32% reduction in calls. The practice identified through analysis of data that calls were distributed more evenly and no calls were left waiting for long periods of time without being answered. On the day of the inspection data reviewed supported this.
- The practice had experienced difficulties in recruiting GPs due to the national shortage, a long-term locum was added to support the current team of three full-time GP partners and two salaried GPs. The appointment of a new salaried GP was in progress. The practice anticipated that this would help bring the total number of GPs up to full capacity and help stabilise the team as well as increasing the availability of appointments for patients.
- The practice had participated in the winter pressure scheme and was one of only eight practices in the CCG to be involved, between January 2018 to April 2018 the practice was open every Saturday morning to support the NHS during the winter crisis and help improve patient access. In total 584 additional appointments were made available during this period.
- Reception staff had received training to provide them with guidance in ensuring patients were booked with the most appropriate clinician and signposted other services when appropriate. This enabled the most effective use of resources as well as possibly increasing accessibility for patients. The training was used alongside an online decision-making tool to help support staff.
- From September 2018 the practice would be participating in an extended access initiative as part of a local GP federation. The practice would be offering routine appointments during weekday evenings and on the weekend and an extra 228 out-of-hours appointments between September 2018 and March 2019.

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" (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

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

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

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 deta](#))

