

Care Quality Commission

Inspection Evidence Table

The Euxton Medical Centre (1-583790642)

Inspection date: 25 September 2018

Date of data download: 25 September 2018

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

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 had introduced and implemented a new procedure to manage clinical documents coming into the practice and staff had trained in this process. A new practice procedure for the management of patient urgent two-week-wait referrals was in place which allowed staff to check patients had attended appointments. The practice complaints procedure had been reviewed and included the recording of patient verbal complaints. We saw records of all complaints, both written and verbal had been made. There was a new protocol in place to describe how tasks were managed in the practice.
The security of loose prescriptions in the practice.	Since our last inspection, the practice had implemented a new procedure to secure all loose prescriptions normally held in printers overnight, in a lockable cabinet. This procedure had been embedded into daily practice.
Management overview of clinical staff training and professional membership	A new training matrix had been put in place to allow managers to ensure clinical training was appropriate and up-to-date. This matrix also recorded clinical staff professional membership details.

Managing risks, issues and performance

Examples of actions taken to address risks identified within the practice

Risk	Example of risk management activities
Possibility of staff not following the new procedure for managing clinical	GPs audited a random sample of 20 documents each month to ensure the protocol was followed safely. We saw records of these audits which indicated 100% compliance with the protocol.

documents coming into the practice safely.	
The risk of action not being taken following patient safety alerts	The practice had reviewed its policy for the management of patient safety alerts. Staff implemented a new safety alert action sheet to record actions taken as a result of patient safety alerts. This assured managers that necessary action had been taken.
Risks identified by significant events and patient complaints	The discussion of complaints and significant events in the practice was a standing agenda item at practice meetings. We saw meeting minutes where these were discussed and learning shared. There were also minutes of meetings held for an annual review of complaints and significant events.

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 details](#)).