Care Quality Commission

Inspection Evidence Table

Dr Roshan Khuroo (1-521519322)

Inspection date: 1 October 2018

Date of data download: 27 September 2018

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

National GP Survey results

Note: The questions in the 2018 GP Survey indicators have changed. Ipos MORI have advised that the new survey data must not be directly compared to the past survey data, because the survey methodology has changed in 2018. This means that we cannot be sure whether the change in scores was due to the change in methodology, or was due to a genuine change in patient experience.

Responsive

Responding to and meeting people's needs

Practice Opening Times			
Day	Time		
Monday	08:00-18:30		
Tuesday	08:00-18:30		
Wednesday	09:30-12:30		
Thursday	08:00-18:30		
Friday	08:00-18:30		

Appointments available	
	Morning GP consulting hours are from 8.30am to 12.30pm Mondays to Fridays. Evening consulting hours are from 2pm to 6pm Mondays to Fridays; except on Wednesdays when the practice was closed from 1.15pm.
	The practice had opted out of providing cover to patients in their out of hours period as well as Wednesdays when the practice closes at 1.15pm. During this time, services are provided by Birmingham and District General Practitioner

	Emergency Rooms (BADGER) medical services.
Extended hours opening	
	Extended opening hours were provided by a local
	Hub on evenings and weekends.

National GP Survey results

Practice population size	Surveys sent out	Surveys returned	Survey Response rate%	% of practice population
4662	418	67	16%	1.44%

Indicator	Practice	CCG average	England average	England comparison
The percentage of respondents to the GP patient survey who stated that at their last general practice appointment, their needs were met (01/01/2018 to 31/03/2018)	93.9%	94.5%	94.8%	Comparable with other practices
Any additional evidence or comments				

Timely access to the service

National GP Survey results

Indicator	Practice	CCG average	England average	England comparison
The percentage of respondents to the GP patient survey who responded positively to how easy it was to get through to someone at their GP practice on the phone (01/01/2018 to 31/03/2018)	68.9%	59.7%	70.3%	Comparable with other practices
The percentage of respondents to the GP patient survey who responded positively to the overall experience of making an appointment (01/01/2018 to 31/03/2018)	73.1%	62.2%	68.6%	Comparable with other practices
The percentage of respondents to the GP patient survey who were very satisfied or fairly satisfied with their GP practice appointment times (01/01/2018 to 31/03/2018)	60.5%	62.5%	65.9%	Comparable with other practices
The percentage of respondents to the GP patient survey who were satisfied with the type of appointment (or appointments) they were offered (01/01/2018 to 31/03/2018)	80.9%	69.7%	74.4%	Comparable with other practices

Indicator	Practice	CCG	England	England
indicator	Fractice	average	average	comparison

Any additional evidence or comments

During our desk-based inspection we spoke with members of the management team who explained that the practice carried out an audit to identify whether patients were receiving the best type of appointments to meet their needs. Staff explained that the practice identified a high number of patients diagnosed with a long-term condition as well as elderly patients who regularly accessed appointments over the last 12 months were seen for social needs rather than clinical needs. Staff explained that as part of Aspiring to Clinical Excellence programme (ACE) patients had access to social prescribing clinics at the practice once a week (ACE is a local Clinical Commissioning Group programme designed to develop practices to deliver improvements in clinical outcomes). We were told that over the last 12 months patients who required social support rather than clinical intervention were booked into the social prescribing clinic where appointment times were slightly longer. Patients received support in areas such as housing needs or advice regarding community support services. Staff explained that this had a positive impact on reducing appointment demand and allowed the practice to offer more appointment options.

Examples of feedback received from patients:

Source	Feedback
NHS Choices	Feedback placed since our previous inspection, showed positive views from patients regarding their experience of getting through to the practice by phone and accessing appointments.
Minutes from Patient Participation Group (PPG)	Comments from patients during PPG meetings showed positive feedback regarding getting through to the practice by phone and appointment access. For example, members of the PPG felt that the new phone system which placed patients in a queue and advised them of their position was much better then constantly receiving a busy tone. Patients also felt positive about having access to social prescribing.

Any additional evidence

Members of the management team we spoke with during our desk-based review explained clinical staff attended courses to improve their engagement with patients during consultations. For example, the clinical team attended courses on patient satisfaction, privacy and dignity, being open as well as customer care.

Since our previous inspection, national survey results published in August 2018 indicated positive improvements in patient's satisfaction with consultations. Results were more in line with local and national averages. For example:

- 83.3% of respondents to the GP patient survey stated that the last time they had a general practice appointment, the healthcare professional was good or very good at listening to them compared to CCG average 87.8% and national average of 89%.
- 80.8% of respondents to the GP patient survey stated that the last time they had a general practice appointment, the healthcare professional was good or very good at treating them with care and concern compared to CCG average of 86.1% and national average of 87.4%.

- 90% of respondents to the GP patient survey stated that during their last GP appointment they had confidence and trust in the healthcare professional they saw or spoke to compared to CCG average of 95.4% and national average of 95.6%.
- 95.5% of respondents to the GP patient survey stated that during their last GP appointment they were involved as much as they wanted to be in decisions about their care and treatment compared to CCG average of 92.8% and national average of 93.5%.
- 77.9% of respondents to the GP patient survey responded positively to the overall experience of their GP practice compared to CCG average of 81.1% and national average of 83.8%.

Question	Y/N
The practice carries out its own patient survey/patient feedback exercises.	No*

Any additional evidence

The management team we spoke with explained that although the practice did not carry out their own patient survey; staff regularly analysed and discussed the Friends and Family test (FFT) data as a team as well as with the patient participation group. Data from July 2018 provided by the practice showed that a total of 34 patients took part in the FFT and 88% stated that they would recommend the practice to a friend or family. Data from August 2018 showed a total of 42 took part in the FFT and 84% would recommend the practice to a friend or family.

Involvement in decisions about care and treatment

Examples of feedback received:

Source	Feedback
CQC comment cards	Prior to our inspection, we sent the practice a quantity of comment cards and a secure box for patients to put their comment cards in once completed. Completed comment cards were collected before commencing our desk-based review.
	We received a total of 14 completed CQC comment cards which were all positive about the service. For example, patients who completed the CQC comment cards felt that GPs and other members of the clinical team involved them in their care and treatment. Clinical and non-clinical staff were referred to as being friendly, caring and patients felt that they were treated with respect and dignity.

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 practices 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 ≤-3
2	Variation (positive)	-3 < Z ≤ -2
3	Comparable to other practices	-2 < Z < 2
4	Variation (negative)	2 ≤ Z < 3
5	Significant variation (negative)	Z ≥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.cgc.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