

# Care Quality Commission

## Inspection Evidence Table

### Dr R D Gilmore and Partners (1-542490411)

Inspection date: 8 November 2018

Date of data download: 08 November 2018

Please note: Any Quality Outcomes Framework (QOF) data relates to 2017/18.

## Effective

### Effective needs assessment, care and treatment

Prescribing				
Indicator	Practice performance	CCG average	England average	England comparison
Average daily quantity of Hypnotics prescribed per Specific Therapeutic group Age-sex Related Prescribing Unit (STAR PU) (01/07/2017 to 30/06/2018) (NHSBSA)	0.79	0.67	0.83	Comparable with other practices

### People with long-term conditions

Diabetes Indicators				
Indicator	Practice performance	CCG average	England average	England comparison
The percentage of patients with diabetes, on the register, in whom the last IFCC-HbA1c is 64 mmol/mol or less in the preceding 12 months (01/04/2017 to 31/03/2018) (QOF)	85.5%	78.6%	78.8%	Comparable with other practices
QOF Exceptions	Practice Exception rate (number of exceptions)	CCG Exception rate	England Exception rate	
	31.1% (234)	14.1%	13.2%	
Indicator	Practice performance	CCG average	England average	England comparison
The percentage of patients with diabetes, on the register, in whom the last blood pressure reading (measured in the preceding 12 months) is 140/80 mmHg or less (01/04/2017 to 31/03/2018) (QOF)	73.5%	76.6%	77.7%	Comparable with other practices

<b>QOF Exceptions</b>	<b>Practice Exception rate (number of exceptions)</b>	<b>CCG Exception rate</b>	<b>England Exception rate</b>	
	5.1% (38)	10.6%	9.8%	

<b>Indicator</b>	<b>Practice performance</b>	<b>CCG average</b>	<b>England average</b>	<b>England comparison</b>
The percentage of patients with diabetes, on the register, whose last measured total cholesterol (measured within the preceding 12 months) is 5 mmol/l or less (01/04/2017 to 31/03/2018) (QOF)	88.5%	78.1%	80.1%	Comparable with other practices
<b>QOF Exceptions</b>	<b>Practice Exception rate (number of exceptions)</b>	<b>CCG Exception rate</b>	<b>England Exception rate</b>	
	26.9% (202)	15.1%	13.5%	

<b>Other long term conditions</b>				
<b>Indicator</b>	<b>Practice</b>	<b>CCG average</b>	<b>England average</b>	<b>England comparison</b>
The percentage of patients with asthma, on the register, who have had an asthma review in the preceding 12 months that includes an assessment of asthma control using the 3 RCP questions, NICE 2011 menu ID: NM23 (01/04/2017 to 31/03/2018) (QOF)	67.3%	76.6%	76.0%	Comparable with other practices
<b>QOF Exceptions</b>	<b>Practice Exception rate (number of exceptions)</b>	<b>CCG Exception rate</b>	<b>England Exception rate</b>	
	1.8% (17)	7.5%	7.7%	
<b>Indicator</b>	<b>Practice</b>	<b>CCG average</b>	<b>England average</b>	<b>England comparison</b>
The percentage of patients with COPD who have had a review, undertaken by a healthcare professional, including an assessment of breathlessness using the Medical Research Council dyspnoea scale in the preceding 12 months (01/04/2017 to 31/03/2018) (QOF)	66.9%	89.1%	89.7%	Significant Variation (negative)
<b>QOF Exceptions</b>	<b>Practice Exception rate (number of exceptions)</b>	<b>CCG Exception rate</b>	<b>England Exception rate</b>	
	6.2% (25)	9.7%	11.5%	

Indicator	Practice	CCG average	England average	England comparison
The percentage of patients with hypertension in whom the last blood pressure reading measured in the preceding 12 months is 150/90mmHg or less (01/04/2017 to 31/03/2018) (QOF)	73.5%	83.0%	82.6%	Variation (negative)
QOF Exceptions	Practice Exception rate (number of exceptions)	CCG Exception rate	England Exception rate	
	4.1% (80)	4.7%	4.2%	
Indicator	Practice	CCG average	England average	England comparison
In those patients with atrial fibrillation with a record of a CHA2DS2-VASc score of 2 or more, the percentage of patients who are currently treated with anti-coagulation drug therapy (01/04/2017 to 31/03/2018) (QOF)	85.9%	90.8%	90.0%	Comparable with other practices
QOF Exceptions	Practice Exception rate (number of exceptions)	CCG Exception rate	England Exception rate	
	5.2% (10)	9.8%	6.7%	
<b>Any additional evidence or comments:</b>				
<p>Following publication of the above results the practice had signed up to the Productive General Practice quick start programme to review the QOF recall process.</p> <p>As a result of this the practice had agreed a common approach and implemented a new recall system.</p> <p>We compared the QOF figures from 2016/17 against 2017/18 and saw that these demonstrated an 8% improvement in achievement against the Chronic Obstructive Pulmonary Disease indicators (COPD).</p>				

# Well-led

## Leadership capacity and capability

### Examples of how leadership, capacity and capability were demonstrated by the practice

- The subsidiary company had introduced a front-line services manager to work across Dr R D Gilmore and Partners and another local practice to improve communication between teams. In addition, the practice had a dedicated site co-ordinator as a direct point of contact for all staff.
- Managers had focused on improving the culture of the practice by ensuring consistency, openness and transparency. In addition, the management team were working to seek feedback from staff and empower them to make suggestions. For example; a care navigator had identified an issue with the appointment system and suggested a new approach. The practice was due to try the new approach the following week.
- We received written feedback from staff members prior to our inspection. All of the feedback we received was positive regarding communication, raising concerns and action taken as a result and support from team and management. However; some of the feedback also contained less positive comments regarding the appointment system and support from GPs.
- The practice had commissioned an independent staff engagement survey to obtain feedback and address issues raised by staff. The survey had been completed by 80% of staff. Managers had shared the results with staff, identifying strengths and areas for improvement:
  - 73% said staff engagement was high
  - 78% said managers were engaging
  - 63% said employee voice was heard

As a result of the survey the practice had shared next steps to address the areas for improvement. This included departmental meetings to discuss the results; develop and action plan and meetings to discuss progress against the action plan.

### Examples of feedback from staff or other evidence about working at the practice

Source	Feedback
Interview templates	Positive feedback received regarding support by managers and team members. However; some feedback contained less positive feedback regarding support from some members of the clinical team.

## Engagement with patients, the public, staff and external partners

### Feedback from Patient Participation Group;

#### Feedback

Positive feedback from patient participation group regarding the appointment availability at the hub. However; the group had requested that the practice make it clear which contact number should be used to book appointments as the hub was located at another local practice. The practice was in the process of communicating this to patients.

#### 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](#)).