

Factual accuracy comments form

Please fill in **all parts** of this form and return:

By email to: HSCA_Compliance@cqc.org.uk or

By post to: CQC PMS Inspections, Citygate, Gallowgate, Newcastle upon Tyne, NE1 4PA

Completeness of the evidence	Section C
Representations against a Warning Notice	Representations via email to HSCA_Representations@cqc.org.uk

Account Number:	1-587569635
Our reference:	INS2-4573675582
Location name:	Tinkers Lane Surgery
Location address:	The Tinkers Lane Partnership Tinker's Lane, Wootton Bassett Swindon Wiltshire SN4 7AT

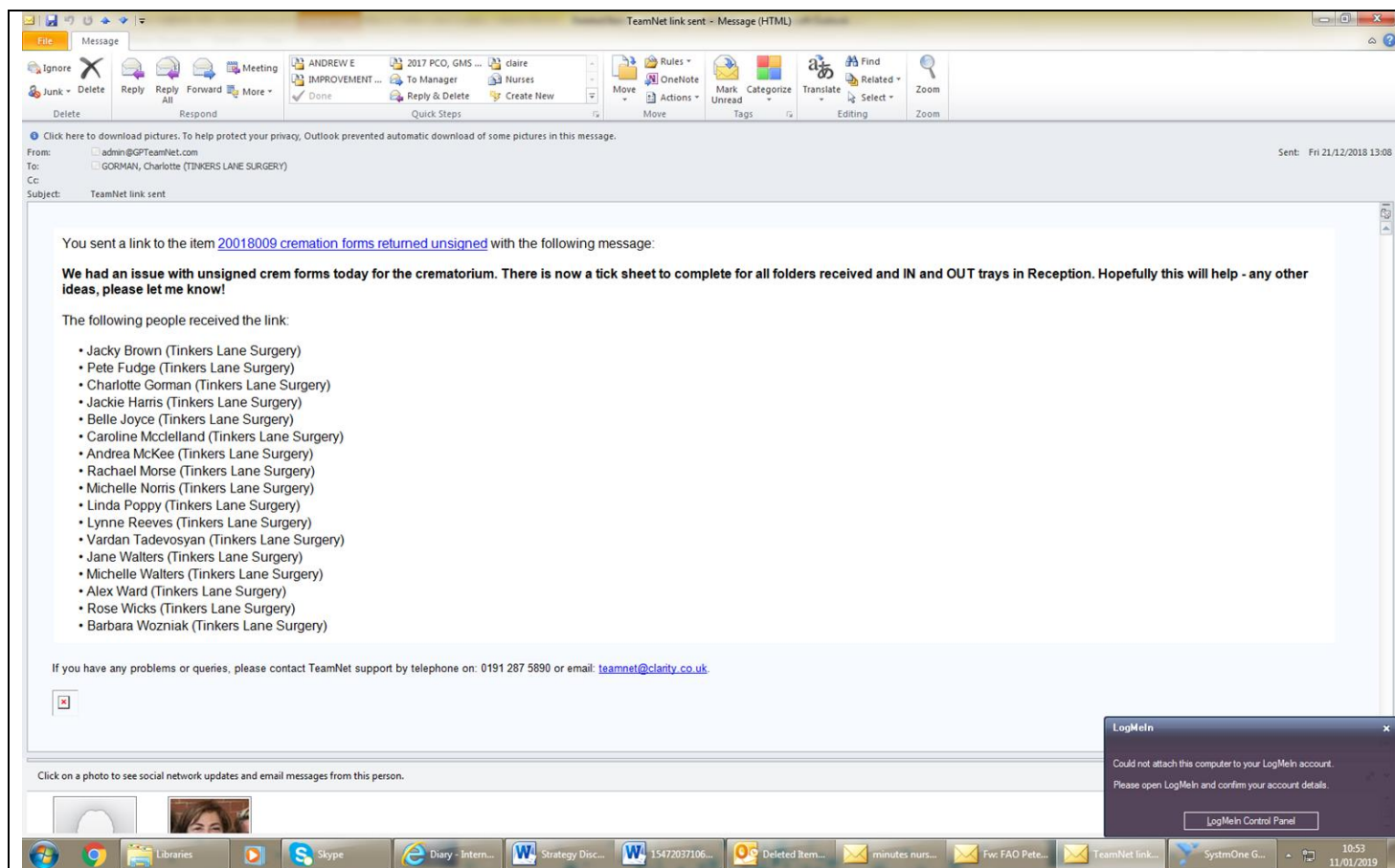
Completed by (name(s))	Charlotte Gorman
Position(s)	Practice Manager
Date	11 th January 2018

Section C: Additional relevant evidence that should be taken into account (“completeness”)

Page No	Key Question e.g. Safe	Please describe (and provide copies of) any additional evidence which you consider should be taken into account in the report.	CQC decision ✓ or X or Partial	CQC response If you agree to make amendments you must confirm any impact on breaches or the rating. If you choose not to make any amendments you must provide reasons.
Please use a separate row for each additional piece of evidence by inserting extra rows if needed (click on ‘table tools/layout’ icon at the top of the page and then ‘insert below’ icon). Please clearly state the page number, key question and details of the evidence you have provided.				
Page 2 of Draft Report (Page 19 of evidence table)	Effective	<p>Currently reads <i>‘When patients with one or more long term conditions failed to attend for an annual check up, the practice made a number of attempts to contact them. If this was unsuccessful, the practice ‘excepted’ them and made no further attempts to contact them. However their was no evidence that a clinician had assessed some patients with increased risks prior to excepting them’</i></p> <p>We believe that the following is a more accurate representation:</p> <p><i>‘When patients with one or more long term conditions failed to attend for an annual check-up, the practice made a minimum of three attempts to invite them to attend by post or telephone. If patients did not respond to these invitations, the practice ‘excepted’ them and made no further attempts to contact them in line with current guidance. There was no evidence that a clinician had assessed</i></p>	✓X	<p>We have reviewed the information provided on your factual accuracy response form <u>whilst no factual inaccuracy has been identified and we have not amended the report to remove the statement, “‘made no further attempts to contact them”. No factual inaccuracy has been identified.</u> We have reviewed the proportionality of the comment and have not amended the report. <u>the issue of a clinician not assessing patients with increased risk within such exceptions still exists.</u> This does not have an impact of the ratings.</p>

		<p><i>some patients at increased risk before they were excepted.</i></p> <p>ADDITIONAL EVIDENCE:</p> <p>2018/19 General Medical Services (GMS) contract Quality and Outcomes Framework (QOF), Guidance for GMS contract 2018/19, April 2018 https://www.nhsemployers.org/-/media/Employers/Documents/Primary-care-contracts/QOF/2018-19/2018-19-QOF-guidance-for-stakeholders.pdf</p> <p>Exception reporting criteria</p> <p>Patients may be excepted if they fall within the strict criteria detailed below:</p> <ul style="list-style-type: none"> patients who have been recorded as refusing to attend review who have been invited on at least three occasions during the financial year to which the achievement payments relate (except in the case of indicator CS002, where the patient should have been invited on at least three occasions during the period of time specified in the indicator during which achievement is to be measured (eg the preceding five years ending on 31 March in the financial year to which achievement payments relate) 		
Page 8 of evidence table (and page 2 of	Safe	<p>'There was evidence of learning and dissemination of information'</p> <p>Please could we include:</p>	<p>✓ partial</p>	<p>We have reviewed the information provided on your factual accuracy response <u>and whilst no factual inaccuracy has been identified, form and we have not amended the report to provide clarity. No factual inaccuracy has</u></p>

Draft Report		<ul style="list-style-type: none"> • The minutes of staff meetings to discuss significant events and complaints are posted on the surgery intranet and links sent to all staff via e mail to individual staff nhs e mail addresses. • Individual significant events, including and the learnings from them and actions are also shared via the surgery intranet, with links sent to individual staff e mail addresses. <p>ADDITIONAL EVIDENCE: Screenshots below</p>		<p>been identified. We have reviewed the proportionality of the comment and have not amended the report. However, weWe have amended the section on page eight of the evidence table regarding the dissemination of information. We have added an additional sentence to this section which reads.</p> <p>“Minutes of these meetings were sent to staff by email and learning points were put on the practice internal IT system and links sent to staff via email. However, the practice did not monitor whether these emails were opened or read which meant there was no clear system for ensuring all learning had been read by staff who did not attend the meeting.”</p> <p>This does not have an impact of the ratings.</p>
Evidence that links are sent				



Evidence that links are received by staff (screenshot from staff e mail records)



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CQC use only

Responses prepared by (name)	David Thwaites
Role	Inspector
Date	11/01/2019
Responses reviewed by (name)	<u>Nicola Cliffe</u>
Role	<u>Inspection Manager</u>
<u>Date</u>	<u>14/01/19</u>