

# Care Quality Commission

## Inspection Evidence Table

### The Park Medical Practice (1-537819367)

Inspection date: 10 September 2020

Date of data download: 10 September 2020

## Overall rating: Good

Please note: Any Quality Outcomes Framework (QOF) data relates to 2019/20.

## Responsive

## Rating: Good

The practice was previously rated as Requires Improvement for Responsive following the inspection in October 2019, due to data which indicated patients found it difficult to access the GP practice on the phone.

The 2020 National GP survey saw some improvements in overall experience of making an appointment, however the results were still low for access to the practice on the phone. The practice had had conducted an action plan following the 2019 National GP patient results and reviewed patient satisfaction. Changes had been implemented to attempt to improve results. The practice had also carried out their own patient survey regarding access to the practice and found feedback was mainly positive.

### National GP Survey results

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 (01/01/2020 to 31/03/2020)	92.7%	94.7%	94.2%	No statistical variation

### Any additional evidence or comments

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## 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 (01/01/2020 to 31/03/2020)	28.0%	N/A	65.2%	Significant Variation (negative)
The percentage of respondents to the GP patient survey who responded positively to the overall experience of making an appointment (01/01/2020 to 31/03/2020)	61.5%	65.9%	65.5%	No statistical variation

### Any additional evidence or comments

The previous inspection in 2019 included the National GP survey results where the practice received the scores:

- 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 (01/01/2019 to 31/03/2019) – 29.7%
- The percentage of respondents to the GP patient survey who responded positively to the overall experience of making an appointment (01/01/2020 to 31/03/2020) – 57.1%

The practice had implemented an action plan following the results of the national GP patient survey which aimed to confirm the results were representative of their patient list, and to improve access to patients.

The practice introduced a contact centre where phone lines were mainly answered across all sites. This was located at Oakwood Surgery, their partner practice. This consisted of a team of administration staff to answer calls with further lines which could be answered at individual sites if there was a high volume of calls. The practice also extended opening times for taking phone calls to allow better access to patients.

The practice had employed more staff to take phone calls and amended the amount of staff open to ensure more staff were available to take phone calls during peak times. These changes were advertised within the surgery for patients, as well as being advertised via the PPG and practice newsletter.

The practice had completed an audit of telephone calls being answered and being missed before and after the implementation of the contact centre. In August 2019, the practice was answering around 20% of calls which were attempted however in October 2019 they were answering on average 90% of calls which were attempted.

The practice also obtained feedback from patients who were queuing outside the door for appointments at 8am. They found that this was the patients preferred option and this was not due to issues with telephones. The practice also advertised the doctor's usual rota work patterns for patients to obtain appointments with preferred GPs if necessary.

The practice also expected the number of calls to decrease when they adopt the Derby and Derbyshire CCG Medicines Order Line service where any patients requesting repeat medicines will ring a designated number outside of the practice.

The practice provided the results of their own practice feedback survey which they conducted in December 2019. The practice reported that 65% of patients they asked said they found it easy or fairly easy to access the practice on the telephone. The survey was made up of 812 patients.

The 2020 National GP survey results demonstrated improvement in relation to the patient's overall experience of making an appointment at the practice. The practice results had decreased for patients who responded positively to how easy it was to get through to someone at their GP practice on the phone.

The practice completed a further survey of their patients in July and August 2020 which found that 75% of their patients found it easy to access the practice on the telephone. The survey used data from 138 patients. The practice expanded their survey to assess patients knowledge about accessing the practice and found that 34% of patients were not aware of the online access to the practice. The practice were planning to assess the results of the survey in order to highlight any potential areas which could be worked on and improve further survey results.



## 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 no statistical variation, 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 no statistical variation 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 Bands	Z-score threshold
Significant variation (positive)	$\leq -3$
Variation (positive)	$> -3$ and $\leq -2$
Tending towards variation (positive)	$> -2$ and $\leq -1.5$
No statistical variation	$< 1.5$ and $> -1.5$
Tending towards variation (negative)	$\geq 1.5$ and $< 2$
Variation (negative)	$\geq 2$ and $< 3$
Significant variation (negative)	$\geq 3$

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. Note that practices that have "Met 90% minimum" have not met the WHO target of 95%.
- 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 uses a rules based approach for scoring, due to the distribution of the data. This indicator does not have a CCG average.
- The percentage of women eligible for cervical cancer screening at a given point in time who were screened adequately within a specified period (within 3.5 years for women aged 25 to 49, and within 5.5 years for women aged 50 to 64). This indicator does not have a CCG average and is scored against the national target of 80%.

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: <https://www.cqc.org.uk/guidance-providers/gps/how-we-monitor-gp-practices>

Note: The CQC GP Evidence Table uses the most recent validated and publicly available data. In some cases at the time of inspection this data may be relatively old. If during the inspection the practice has provided any more recent data, this can be considered by the inspector. However, it should be noted that any data provided by the practice will be unvalidated and is not directly comparable to the published data. This has been taken into account during the inspection process.

## Glossary of terms used in the data.

- **COPD:** Chronic Obstructive Pulmonary Disease
- **PHE:** Public Health England
- **QOF:** Quality and Outcomes Framework
- **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.