

Inspection Evidence Table

Ingleton Avenue Surgery

(1-566937832)

Inspection Date: 18 December 2023

Date of data download: 11/12/2023

Overall rating: Good

Context

The practice served a population of 4,900 patients.

Information published by Office for Health Improvement and Disparities showed that deprivation within the practice population group was in the second highest decile (9 of 10). The lower the decile, the more deprived the practice population is relative to others.

According to the latest available data, the ethnic make-up of the practice area was 78% White, 11% Asian, 6% Black, 3% Mixed, and 3% Other.

The age distribution of the practice population was similar to the local and national averages. Compared to an average practice in the local area or in England, the practice had slightly more older and young people and fewer working age people as patients.

Responsive

Rating: Good

At the last inspection in January 2019 the Responsive key question was rated good. The practice continues to be rated good for providing responsive services following this inspection.

Responding to and meeting people's needs

The practice organised and delivered services to meet patients' needs.

	Y/N/Partial
The practice understood the needs of its local population and had developed services in response to those needs.	Y
The importance of flexibility, informed choice and continuity of care was reflected in the services provided.	Y
The facilities and premises were appropriate for the services being delivered.	Y
The practice made reasonable adjustments when patients found it hard to access services.	Y
There were arrangements in place for people who need translation services.	Y
The practice complied with the Accessible Information Standard.	Y
Explanation of any answers and additional evidence: <ul style="list-style-type: none">Practice staff felt that its small size, low staff turnover, and traditional model of care allowed the practice to know their patients and tailor care accordingly.Patients were asked, on registration, about any information or communication needs. These were explored in new patient checks and noted, with any agreed adjustments, on the patient record so that staff could use the information.We heard examples of adjustments made for individual patients, to support their overall wellbeing as well as to allow equitable access to services.Staff told us that continuity of care was one of the practice's core values, and this could be delivered because care was provided solely by GPs, nurses and midwives, and by the patient's named GP as often as possible.	

Practice Opening Times	
Day	Time
Opening times:	
Monday	8am – 6.30pm
Tuesday	7.30am - 8pm
Wednesday	7.30am – 6.30pm
Thursday	7.30am – 6.30pm

Friday	8am – 6.30pm
Appointments available:	
Monday	8am – 5.50pm
Tuesday	7.30am – 7.45pm
Wednesday	7.30am – 5.50pm
Thursday	7.30am – 4.50pm
Friday	8am – 4.50pm

Further information about how the practice is responding to the needs of their population

- All patients had a named GP with whom they were booked as often as possible. The practice made sure that all members of a family had the same named GP.
- The practice was responsive to the needs of older patients and offered home visits and urgent appointments for those with enhanced needs and complex medical issues. Older patients were seen at least every 12 months, and had their needs assessed in longer appointments. The practice liaised regularly with the community services to discuss and manage the needs of patients with complex medical issues.
- All parents or guardians calling with concerns about a child were offered a same day appointment when necessary.
- Appointments were available until 7.45pm on a Tuesday. Pre-bookable appointments were also available to all patients at additional locations within the area on Saturday afternoons. The practice held a register of patients living in vulnerable circumstances including homeless people, Travellers and those with a learning disability.
- People in vulnerable circumstances were easily able to register with the practice, including those with no fixed abode such as homeless people and Travellers.
- The practice adjusted the delivery of its services to meet the needs of patients with a learning disability.
- The practice participation group held coffee mornings for local older people. Practice staff told us that they felt this was particularly useful following the isolation caused by the Covid pandemic restrictions.
- The practice organised flu immunisation clinics during the week and at weekends to allow as many patients as possible to attend.
- In 2021 the practice won a civic recognition award from the council after nomination from a patient.

Access to the service

People were able to access care and treatment in a timely way.

	Y/N/Partial
Patients had timely access to appointments/treatment and action was taken to minimise the length of time people waited for care, treatment or advice.	Y
The practice offered a range of appointment types to suit different needs (e.g. face to face, telephone, online).	Y
Patients were able to make appointments in a way which met their needs.	Y

There were systems in place to support patients who face communication barriers to access treatment (including those who might be digitally excluded).	Y
Patients with most urgent needs had their care and treatment prioritised.	Y
There was information available for patients to support them to understand how to access services (including on websites and telephone messages).	Y
<p>Explanation of any answers and additional evidence:</p> <ul style="list-style-type: none"> Staff told us that they were almost always able to meet the demand for appointments, although patients did not always get an appointment exactly at a time of their choosing. Reception staff were trained to triage requests and ensure patients were booked with an appropriate staff member within an appropriate timeframe. 50% of appointments were available for the same-day, and 50% for pre-booking. Staff told us patients who pre-booked were generally seen in within 7 days. If a patient called for a same-day appointment when all the slots were booked, staff told us that reception staff would try to ensure the needs were met in another way, for example by asking for a urine sample to test for a suspected urinary tract infection. Staff told us that particularly vulnerable patients, including babies and those on the palliative care list, were always given an appointment. Staff also had information about other services that could support patients, including a local crisis café and foodbank. The practice worked with local organisations to improve information for patients with disabilities or sensory impairments. The practice was positively mentioned in a national newspaper for the ease in which patients could access services during Covid pandemic measures, when 90% of appointments were delivered face to face. 	

National GP Patient Survey results

Note: From July 2022, CCGs have been replaced with Sub Integrated Care Board Locations (SICBL) and CCG ODS codes have been retained as part of this.

Indicator	Practice	SICBL average	England	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 (01/01/2023 to 30/04/2023)	90.1%	N/A	49.6%	Significant variation (positive)
The percentage of respondents to the GP patient survey who responded positively to the overall experience of making an appointment (01/01/2023 to 30/04/2023)	89.8%	49.7%	54.4%	Variation (positive)
The percentage of respondents to the GP patient survey who were very satisfied or fairly satisfied with their GP practice appointment times (01/01/2023 to 30/04/2023)	88.3%	50.0%	52.8%	Significant variation (positive)
The percentage of respondents to the GP patient survey who were satisfied with the appointment (or	90.1%	66.1%	72.0%	Variation (positive)

appointments) they were offered (01/01/2023 to 30/04/2023)				
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Any additional evidence or comments

The practice was above average for satisfaction with access on the National GP Patient Survey, however in response to feedback the practice changed the ratio of appointments – to offer more for pre-booking. The practice told us that this seemed to be working well, with less of an “8am rush” and improved patient feedback on the Friends and Family Test.

Source	Feedback
NHS.uk website (formerly NHS Choices)	There were 2 reviews in the last 12 months, both wholly positive about with particular focus on care and concern expressed by all staff.
Friends and Family Test	Practice staff told us that all patients were sent the survey and that satisfaction scores were over 90% every month.
Patient Participation Group	<p>A representative of the Patient Participation Group (PPG) told us that there is a dedicated comments box, but that there are rarely any complaints or negative feedback.</p> <p>The representative told us that the phone system seems to work well, and that there is now the extra option to request an appointment online.</p> <p>The representative also told us that the practice was very understanding of the needs of individual patients.</p>

Listening and learning from concerns and complaints

Complaints were listened and responded to and used to improve the quality of care.

Complaints	
Number of complaints received in the last year.	2
Number of complaints we examined.	2
Number of complaints we examined that were satisfactorily handled in a timely way.	2
Number of complaints referred to the Parliamentary and Health Service Ombudsman.	0

	Y/N/Partial
Information about how to complain was readily available.	Y
There was evidence that complaints were used to drive continuous improvement.	Y

Example(s) of learning from complaints.

Complaint	Specific action taken
A patient complained that they asked for an appointment, were asked to bring in a urine sample, and were not seen when they did.	The practice worked with reception staff to improve communication, to make sure that patients understood what to expect when their needs were being met in a way other than being booked an appointment.

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)	≤ -3
Variation (positive)	> -3 and ≤ -2
Tending towards variation (positive)	> -2 and ≤ -1.5
No statistical variation	< 1.5 and > -1.5
Tending towards variation (negative)	≥ 1.5 and < 2
Variation (negative)	≥ 2 and < 3
Significant variation (negative)	≥ 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 persons eligible for cervical cancer screening at a given point in time who were screened adequately within a specified period (within 3.5 years for those aged 25 to 49, and within 5.5 years for those 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.
- **UKHSA:** UK Health and Security Agency.
- **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.
- ‰ = per thousand.