

Care Quality Commission

Inspection Evidence Table

Forest Hill Group Practice (1-544424476)

Inspection date: 24 June 2021

Date of data download: 26 August 2021

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

Overall rating: Good

Responsive

Rating: Good

In January 2020, we rated the practice as requires improvement for responsive because:

- The results from the national GP patient survey were below local and national averages.
- The practice had not undertaken their own patient survey.
- The Patient Participation Group (PPG) members felt that the practice did not listen to them.
- There continued to be patient access problems since the last inspection.

Following this review on 24 June 2021, we rated responsive as **good** because:

- The practice had an action plan to monitor problems patients had experienced accessing the service.
- Although the results from the national GP patient survey were below local and national averages, we saw evidence of quality improvement. The practice had acted sufficiently on feedback to improve patient experience of accessing the service. The practice had implemented various strategies to improve patient accessibility including hiring more receptionists to deal with the increased call volumes, increasing the number of GP sessions, recruiting an Advance Nurse Practitioner, Pharmacist and a Health Care Assistant.
- The practice had undertaken their own patient survey.
- In February 2020 the practice had introduced eConsult, and was actively reviewing patient feedback. Evidence showed that the majority of patients were satisfied, reporting it to be a quicker, easier and a more efficient way of accessing the GPs.
- There was evidence that the practice listened to the Patient Participation Group (PPG). The practice shared examples where they acted on patient feedback.
- Information about how to make a complaint or raise concerns was available and it was easy to do.

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.	Yes
The importance of flexibility, informed choice and continuity of care was reflected in the services provided.	Yes
The facilities and premises were appropriate for the services being delivered.	Yes
The practice made reasonable adjustments when patients found it hard to access services.	Yes
There were arrangements in place for people who need translation services.	Yes
The practice complied with the Accessible Information Standard.	Yes
<p>Explanation of any answers and additional evidence:</p> <p>At the last inspection, the practice informed us they had made a number of changes such as the recruitment of more staff, changing the phone system and the appointment system. However, at the time of the inspection we were unable to see these changes had led to evidence of sufficient improvement to patient experience.</p> <p>At this review, the practice sent us evidence of a survey carried out in May 2021. The survey was sent to all patients who had appointments during one week in May. The practice informed us the survey platform they used limited the number of questions they could ask and the number of participants they could contact, so in the future the practice intended on undertaking another survey with a different platform.</p> <p>The practice informed us the Patient Participation Group felt that the telephone system was working better. They also informed us feedback they had received from patients was that the new phone system was an improvement and that the time to get a response from the practice was satisfactory.</p> <p>We saw 52 reviews; the practice rating was 2.1 out of 5 on google.</p> <p>The practice had undertaken audits of the phone system, monitoring call length time and duration. Reports were run on a daily basis and discussed during the reception team meeting. The practice informed us they were flexible during the pandemic and adjusted how appointments were delivered whilst maintaining access. We saw screen shots of a software system the practice was using to analyse appointment activity on a weekly basis in real time, and retrospectively over the previous three months to monitor trends.</p> <p>Progress with the action plan in response to the GP patient survey results was impacted by the pandemic (guidance said that Friends and Family test (FFT) should be stopped). The practice continued to monitor F&F test results and did their own survey</p>	

The practice informed us, in response to patient feedback they were now ensuring all GPs had face to face slots where they could see patients. They also informed us they had increased the number of e-consult appointments each GP had on a daily basis and they respond to all e-consults within 24 hours.

Since the last inspection the practice told us they had increased the number of GP sessions and had recruited an Advance Nurse Practitioner to help with acute minor illness. They also recruited another pharmacist to help with chronic disease management and medication reviews, another HCA to increase the offer of Phlebotomy appointments. Since July 2021 the practice had a new website.

Practice Opening Times	
Day	Time
Opening times:	
Monday	8am – 6.30pm
Tuesday	8am – 6.30pm
Wednesday	8am – 6.30pm
Thursday	8am – 6.30pm
Friday	8am – 6.30pm
Appointments available:	
Monday	8.30am – 11:30am 2:30pm-5pm
Tuesday	8.30am – 11:30am 2:30pm-5pm
Wednesday	8.30am – 11:30am 2:30pm-5pm
Thursday	8.30am – 11:30am 2:30pm-5pm
Friday	8.30am – 11:30am 2:30pm-5pm
	8.30am – 11:30am 2:30pm-5pm
Extended hours:	
	Monday to Friday 7:30am-8am and Monday and Tuesday 6.30pm-7:30pm

Older people

Population group rating: Good

Findings
<ul style="list-style-type: none"> All patients had a named GP who supported them in whatever setting they lived. 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. The practice provided effective care coordination to enable older patients to access appropriate services. In recognition of the religious and cultural observances of some patients, the GP would respond quickly, often outside of normal working hours, to provide the necessary death certification to enable prompt burial in line with families' wishes when bereavement occurred. There was a medicines delivery service for housebound patients.

People with long-term conditions

Population group rating: Good

Findings
<ul style="list-style-type: none"> Patients with multiple conditions had their needs reviewed in one appointment.

- The practice provided effective care coordination to enable patients with long-term conditions to access appropriate services.
- The practice liaised regularly with the local district nursing team and community matrons to discuss and manage the needs of patients with complex medical issues.
- Care and treatment for people with long-term conditions approaching the end of life was coordinated with other services.

Families, children and young people

Population group rating: Good

Findings

- Additional nurse appointments were available until 7pm on a Monday for school age children so that they did not need to miss school.
- We found there were systems to identify and follow up children living in disadvantaged circumstances and who were at risk, for example, children and young people who had a high number of accident and emergency (A&E) attendances. Records we looked at confirmed this.
- All parents or guardians calling with concerns about a child were offered a same day appointment when necessary.

Working age people (including those recently retired and students)

Population group rating: Good

Findings

- The needs of this population group had been identified and the practice had adjusted the services it offered to ensure these were accessible, flexible and offered continuity of care.
- The practice was open until 6.30pm on a Monday to Friday. Pre-bookable appointments were also available to all patients at additional locations within the area, as the practice was a member of a GP federation.

People whose circumstances make them vulnerable

Population group rating: Good

Findings

- 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 provided effective care coordination to enable patients living in vulnerable circumstances to access appropriate services.
- The practice adjusted the delivery of its services to meet the needs of patients with a learning disability.

People experiencing poor mental health (including people with dementia)

Population group rating: Good

Findings

- Priority appointments were allocated when necessary to those experiencing poor mental health.
- Staff interviewed had a good understanding of how to support patients with mental health needs and those patients living with dementia.
- The practice was aware of support groups within the area and signposted their patients to these accordingly.

Access to the service

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

National GP Survey results

	Y/N/Partial
There was information available for patients to support them to understand how to access services (including on websites and telephone messages).	Yes
Patients were able to make appointments in a way which met their needs.	Yes
The practice offered a range of appointment types to suit different needs (e.g. face to face, telephone, online).	Yes
There were systems in place to support patients who face communication barriers to access treatment.	Yes
Patients with urgent needs had their care prioritised.	Yes
The practice had systems to ensure patients were directed to the most appropriate person to respond to their immediate needs.	Yes

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 (01/01/2021 to 31/03/2021)	51.6%	N/A	67.6%	No statistical variation
The percentage of respondents to the GP patient survey who responded positively to the overall experience of making an appointment (01/01/2021 to 31/03/2021)	61.3%	69.2%	70.6%	No statistical variation
The percentage of respondents to the GP patient survey who were very satisfied or fairly satisfied with their GP practice appointment times (01/01/2021 to 31/03/2021)	55.7%	65.7%	67.0%	No statistical variation
The percentage of respondents to the GP patient survey who were satisfied with the	72.4%	79.5%	81.7%	No statistical variation

Indicator	Practice	CCG average	England average	England comparison
appointment (or appointments) they were offered (01/01/2021 to 31/03/2021)				

Any additional evidence or comments

In comparison to last year's National GP Survey results, the 2021 published results showed that patient experience regarding access had improved significantly. At this review, we checked what actions the provider had taken to address the access issues found at the last inspection. Although practices were advised to postpone audit and assurance activities during the pandemic, the practice had responded positively to the access issues.

We were assured that the practice had processes to evaluate the impact of the changes they had made to ensure improvements had been achieved and the quality of access to services had improved.

Call waiting time

We saw evidence of improvement to patient experience of how easy it was to get through to the practice by telephone:

- The practice provided us with performance information for the phone system for the period running up to this review. The practice shared an example screenshot from the live performance dashboard to demonstrate how they were monitoring daily appointment access over the telephones.
- The practice had developed a system to audit live telephone calls statistics, in terms of incoming calls, pick up times by individual staff and call duration. Staff reviewed reports of call duration and call answering in reception team meetings.
- During busy periods the practice could review the capacity required to ensure good telephone response. The practice told us they had employed more receptionists to deal with the increased call volume.
- The practice had done their own patient survey in May 2021 to monitor patient satisfaction with the changes to the service provided during the COVID19 pandemic. Patients could feedback about whether they felt new systems implemented during the pandemic had improved their access experience. The practice shared the survey with us.
- The practice had listened to patient feedback about the phone system and difficulty accessing appointments. The practice shared copies of minutes from their Patient Participation Group meetings which showed the PPG fed back positively.
- Although FFT data submission was suspended from March 2020, the provider told us they continue to audit FFT patient feedback and shared their monthly log of FFT scores. They told us FFT scores were reviewed at their Quality Achievement meetings.
- The practice told us they have made changes to their website to support patients accessing services.

Access to appointments

The practice had worked to improve the appointment system and had an action plan in place to address lower scoring areas in the NHS national patient survey.

At the last inspection the practice had implemented a new appointment system and the practice had audited and reviewed this twice.

At this review the practice had embedded a process of monitoring the appointment system. Staff shared evidence of analysis of appointment data:

- The practice told us they use a forecasting tool to monitor whether they are meeting demand and helps staff to understand how patients access their service. The appointment tool enabled staff to analyse appointment activity on a weekly basis, and retrospectively to monitor trends. The practice uses appointment data to review the staff rota and appointment numbers scheduled.
- The practice shared data from their appointment's dashboard showing type of appointments offered in April. We saw an example which showed 4073 appointments booked during that month, the average number of appointments offered was 84/1000 patients per week; 38% face to face, 49% telephone, 13% e consult. In February 2020 the practice introduced e-consult as another means for patients to contact the surgery without the need to call the practice.
- The practice had an online appointment booking system. The practice promoted the Patient Access app which allowed patients to book reserved appointment slots. All routine GP and nurse appointments were available for patients to book online. Patients had access to appointments outside normal 9 to 5 working hours.
- The practice gave examples of how they had engaged with those patients and their families who were unable to use the phone or digital platforms to offer them care or treatment.
- At the last inspection the practice told us they us that they had recruited some new reception staff, and existing reception staff had been on customer service training. At this review the practice told us they had strengthened their clinical workforce and recruited a pharmacist to help with chronic disease management and medication reviews. They had employed another HCA to increase the offer of Phlebotomy appointments at the surgery and chronic disease reviews and also a new Advanced Nurse Practitioner to help with acute on the day clinical demands.

Source	Feedback
NHS Choices	NHS website reviews (NHS Choices) 10 in last 16 months. 5 x 1 star and 2 x 2 star and 3 x 5 star reviews in last 16 months indicate dissatisfaction with delivery of service.
eConsult monthly patient feedback summary	The practice monitored monthly summaries of patient feedback collated through the eConsult system. When patients have completed an online consultation, they can offer some feedback after their consultation has taken place. Between December 2020 and May 2021, the practice reviewed themes from patient

	feedback. They identified the majority of patients were satisfied with the service reporting it to be a quicker, easier & more efficient way of accessing a GP.	
	Satisfied with Service (%)	Recommend to Friends & Family (%)
	Dec-20	86
	Jan-21	76
	Feb-21	73
	Mar-21	72
	Apr-21	63
	May-21	71
Negative feedback: Related to delayed response time and difficulties completing the form itself and complexity of questions asked.		

Listening and learning from concerns and complaints

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

	Y/N/Partial
Information about how to complain was readily available.	YES
<p>At our last inspection we did not see any leaflets in reception that explained what the complaints process was. There was information on the practice website that explained the complaints process. However, patients spoken to on the day of the inspection said they were not aware of the complaints process.</p> <p>At this review, we were assured that the service took complaints and concerns seriously and responded to them appropriately to improve the quality of care:</p> <ul style="list-style-type: none"> • Information about how to make a complaint or raise concerns was available and it was easy to do. • There was clear information on website about how to complain and when the practice would respond to a complaint. • The practice shared a copy of their complaint policy and procedures which were in line with recognised guidance. The practice had received 15 complaints in the last year. We saw evidence that all patients were contacted and that all complaints were discussed in complaints review meetings with action taken and records of how learning was implemented. 	

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 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.
- *PCA:** Personalised Care Adjustment. This replaces the QOF Exceptions previously used in the Evidence Table (see [GMS QOF Framework](#)).
- %** = per thousand.