

# Care Quality Commission

## Inspection Evidence Table

### Medlock Vale Medical Practice (1-542636285)

Inspection date: 10 April 2018

Date of data download: 19 April 2018

## Safe

Safety Records	
Fire procedure in place	Yes
Fire extinguisher checks	Yes
Fire drills and logs	Yes
Fire alarm checks	Yes
Fire training for staff	Yes
Fire risk assessment	Yes
<b>Infection control</b> Detail: Following the inspection December 2017 the provider has applied new flooring, equipment is now covered and wipe able chairs are now in place to comply with infection control standards.	

Medicine Management	
The practice had a process and clear audit trail for the management of information about changes to a patient's medicines including changes made by other services.	Yes
There was a process for the management of medicines including high risk medicines (for example, warfarin, methotrexate and lithium) with appropriate monitoring and clinical review prior to prescribing.	Yes

The practice monitored the prescribing of controlled drugs. (For example audits for unusual prescribing, quantities, dose, formulations and strength).	Yes
Up to date local prescribing guidelines were in use. Clinical staff were able to access a local microbiologist for advice.	Yes
Medicines that required refrigeration were appropriately stored, monitored and transported in line with PHE guidance to ensure they remained safe and effective in use.	Yes
<p>The practice had employed a pharmacist, GP consultant to improve the systems and processes to ensure safe management of medicines. A 12 month action plan was in place for reviewing and monitoring medication, including those patients prescribed high risk medications.</p> <p>New policies and procedures were in place for repeat prescribing, prescribing of Disease Modifying Antirheumatic Drugs (DMARDs) and Lithium monitoring.</p> <p>There was also a new policy and procedure in place for managing uncollected prescriptions.</p> <p>A new policy and procedure was in place to ensure cold chain compliance and the cold chain was now being monitored in line with current guidance.</p>	

### Track record on safety and lessons learned and improvements made

Significant events	
There was a system for recording and acting on significant events	Yes
Staff understood how to report incidents both internally and externally	Yes
There was evidence of learning and dissemination of information	Yes

### Example(s) of significant events recorded and actions by the practice;

Event	Specific action taken
Patient ordering repeat prescription online.	Discussed with clinical team. Procedural update provided to GPs.
Patient overuse of inhalers	CCG Prescribing team audited inhaler prescriptions and ensured prescription and frequency of prescriptions were correct.

Safety Alerts	
There was a system for recording and acting on safety alerts	yes
Staff understand how to deal with alerts	yes

Comments on systems in place:

The practice had introduced a new system to monitor, review and action where appropriate safety alerts and alerts received from the MHRA. An alert monitoring system was in place and they were standing agenda item for clinical meetings, where actions were discussed and reviewed.

## Well-led

### Leadership capacity and capability

#### Evidence

The practice had introduced new governance arrangements for reviewing and monitoring safety systems and had initiated audits to monitor and improve medicines management following our last inspection.

A GP consultant team had been brought in to support the practice and develop their leadership capacity.

A recruitment strategy was in place for increasing GPs within the practice and skill mix to include a pharmacist.

Leads roles had been created for GPs and managers including a new governance and staff management lead.

#### 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, a statistical tool which shows the deviation from the England average. It gives us a statistical measurement of a practice's performance in relation to the England average, and measures this in standard deviations. We calculate a z-score for each indicator, thereby highlighting the practices which significantly vary from the England average (in either a positive or negative direction). We consider that z-scores which are +2 or more or -2 or less are at significant levels, warranting further enquiry.

N.B. Not all indicators are part of the GP insight set and those that aren't will not have a variation band.

The following language is used for banding variation:

#### Significant variation (positive)

- Variation (positive)
- Comparable to other practices
- Variation (negative)
- Significant variation (negative)

Note: for the following indicators the variation bands are different:

- Child Immunisation indicators. These are scored against the World Health Organisation target of 95%.

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>