

Care Quality Commission

Inspection Evidence Table

Sidley Medical Practice (1-548142641)

Inspection date: 14 August 2018

Date of data download: 10 August 2018

Please note: Any Quality Outcomes Framework (QOF) data relates to 2016/17.

Safe

Risks to patients	
Emergency equipment and emergency medicines were available in the practice including medical oxygen and an automated external defibrillator (AED).	Yes
Records showed that emergency equipment and emergency medicines were checked regularly.	Yes
Emergency equipment and emergency medicines that we checked were within their expiry date.	No
Additional evidence or comments	
We looked at emergency equipment and emergency medicines. There were three sets of defibrillation pads with the AED. However, we found that one set of defibrillation pads were out of date.	

Medicine Management	
Medicines that required refrigeration were appropriately stored, monitored and transported in line with Public Health England guidance to ensure they remained safe and effective in use.	Yes
Additional evidence or comments	
<p>The practice had four designated medicines refrigerators where they could store medicines that required refrigeration.</p> <p>Staff told us that inventories of medicines stored in the designated medicines refrigerators were maintained. However, the practice was unable to demonstrate there was an inventory of the medicines stored in the designated medicines refrigerator in room 15.</p> <p>The lock on the designated medicines refrigerator in room 10 was broken. Staff told us that the door to room 10 was kept locked when not in use. Medicines stored in this designated medicines refrigerator were, therefore, being stored securely in accordance with national guidance. Staff we spoke with were unsure how long the lock had been broken but told us that there was an action plan to either repair the lock or replace the refrigerator. However, there were no records to confirm this.</p> <p>We looked at 277 temperature monitoring records for the designated medicines refrigerator in room 15 and saw that on five occasions since 9 January 2018, the temperature had been recorded as being</p>	

outside of the recommended limits of between two and eight degrees centigrade.

We looked at 241 temperature monitoring records for the designated medicines refrigerator in room nine and saw that on six occasions since 9 January 2018, the temperature had been recorded as being outside of the recommended limits of between two and eight degrees centigrade.

There was written guidance for staff to follow when the temperature of any of the designated medicines refrigerators went outside of the recommended limits. For example, the cold chain policy. Staff told us that staff recorded the action they took on each of the occasions when the temperature of the designated medicines refrigerators had been recorded as being outside of acceptable limits. However, there were no records to confirm this.

After our inspection the practice sent us evidence that showed appropriate action was taken by staff on each of the occasions when the temperature of the designated medicines refrigerators was recorded as being outside of the recommended limits of between two and eight degrees centigrade.

The practice had been unable to access the information on the day of the inspection because it had been stored on a computer file that only one staff member had immediate access to and they were not available at the time.

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 comparable, 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 comparable 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 Band	Z-score threshold
1	Significant variation (positive)	$Z \leq -3$
2	Variation (positive)	$-3 < Z \leq -2$
3	Comparable to other practices	$-2 < Z < 2$
4	Variation (negative)	$2 \leq Z < 3$
5	Significant variation (negative)	$Z \geq 3$
6	No data	Null

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.

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>

Glossary of terms used in the data.

- **COPD:** Chronic Obstructive Pulmonary Disease
- **PHE:** Public Health England
- **QOF:** Quality and Outcomes Framework (see <https://qof.digital.nhs.uk/>).
- **RCP:** Royal College of Physicians.
- **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.([See NHS Choices for more details](#)).