

Care Quality Commission

Inspection Evidence Table

Lister Lane Surgery (1-541111735)

Inspection date: 5 September 2018

Date of data download: 23 July 2018

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

Well-led

Leadership capacity and capability

Culture

Examples that demonstrate that the practice has a culture of high-quality sustainable care

The leadership team had responded to feedback from the previous CQC inspection and made some changes to the governance structures and processes in the practice:

- The practice told us they would retain summaries of significant events, to help identify trends and patterns.
- The complaints process had been revised to ensure that patients were provided with information they needed to pursue complaints beyond the practice if necessary.

Examples of feedback from staff or other evidence about working at the practice

Source	Feedback
Staff member	Feel part of the practice. Am able to attend meetings. Senior staff are visible and approachable.
Staff member	Have been supported by the practice to develop and gain new skills and qualifications.

Any additional evidence

Staff and clinical meetings were held. At the time of our visit the timing of clinical meetings was not clear. There was insufficient governance demonstrated in relation to the timely distribution of minutes to relevant staff. The practice told us they would include meeting minutes on the practice shared drive in future.

Governance arrangements

Examples of structures, processes and systems in place to support the delivery of good quality and sustainable care.	
Practice specific policies	A sample of policies we viewed were in date. However, we saw that they did not always contain information in line with up to date guidance. For example, the recruitment policy, updated in September 2018, still referred to CRB checks, rather than the current DBS checks required by employers.
Other examples	
Y/N	
Staff were able to describe the governance arrangements	y
Staff were clear on their roles and responsibilities	y

Any additional evidence
Staff at all sites from which the practice operated, including those working at branch sites, were now able to access practice policies and procedures via the practice shared drive.

Managing risks, issues and performance

Major incident planning	Y/N
Major incident plan in place	y
Staff trained in preparation for major incident	y

Examples of actions taken to address risks identified within the practice

Risk	Example of risk management activities
Disabled toilet at one of the branch sites had a call alarm which was not functional at the time of the previous inspection.	A replacement call alarm system had been fitted to the toilet.
Difficulty recruiting clinical staff	The practice was seeking to recruit additional partners to the practice. Negotiations were in place at the time of our visit.

Any additional evidence
On our previous inspection we noted that a vaccine fridge at one of the branch sites was stored on the floor of the clinical room, and that an oxygen cylinder was out of date. At this inspection the provider told us, and provided photographic evidence, that the fridge had been re-sited appropriately, and that the oxygen had been replaced.

Any additional evidence

DO NOT DELETE THE NOTES BELOW

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>

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](#)).