

Care Quality Commission

Inspection Evidence Table

New Addington Group Practice (1-497344487)

Inspection date: 19 December 2018

Date of data download: 06 December 2018

Overall rating: Good

Please note: Any Quality Outcomes Framework (QOF) data relates to 2017/18.

Well-led

Rating: Good

Medicines management	Y/N/Partial
The practice held appropriate emergency medicines, risk assessments were in place to determine the range of medicines held, and a system was in place to monitor stock levels and expiry dates.	Y

The practice learned and made improvements when things went wrong.

Significant events	Y/N/Partial
The practice monitored and reviewed safety using information from a variety of sources.	Y
Staff knew how to identify and report concerns, safety incidents and near misses.	Y
There was a system for recording and acting on significant events.	Y
Staff understood how to raise concerns and report incidents both internally and externally.	Y
There was evidence of learning and dissemination of information.	Y
Number of events recorded in last 12 months:	26
Number of events that required action:	26

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

Event	Specific action taken
A child was immunised in error. The clinician noticed that the child had already been immunised when entering the immunisation details in their patient management system. The clinician administered the immunisation following the red book and had not cross checked the clinical patient management	<ul style="list-style-type: none">• The clinician contacted the immunisation supplier for advice.• Parents were informed about the error and to pass on information on the effects this may cause and any symptoms to look out for.• Following this incident, a new system was put in place; clinicians were asked to check both the red

system	<p>book and the clinical patient management system before administering any childhood immunisations and to correct any missing data either on the patient management system or red book.</p> <ul style="list-style-type: none"> We saw evidence that learning from this incident was shared across the organisation.
The main surgery was closed due to flooding caused by a blocked drain during heavy rain.	<ul style="list-style-type: none"> The surgery was closed and staff were relocated to the branch surgery and patients were informed about the closure and relocation of their appointments. Following this incident management team were instructed to ensure all faults and defects were reported to the property managers as soon as it was detected.

Safety alerts	Y/N/Partial
There was a system for recording and acting on safety alerts.	Y
Staff understood how to deal with alerts.	Y

Monitoring care and treatment

Indicator	Practice	CCG average	England average
Overall QOF score (out of maximum 559)	550.76	-	537.5
Overall QOF exception reporting (all domains)	4.3%	5.5%	5.8%

Timely access to the service

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

National GP Survey results

Note: The questions in the 2018 GP Survey indicators have changed. Ipsos MORI have advised that the new survey data must not be directly compared to the past survey data, because the survey methodology changed in 2018.

Practice population size	Surveys sent out	Surveys returned	Survey Response rate%	% of practice population
10423	422	87	20.59%	0.83%

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	76.4%	74.6%	70.3%	N/A

Indicator	Practice	CCG average	England average	England comparison
practice on the phone (01/01/2018 to 31/03/2018)				
The percentage of respondents to the GP patient survey who responded positively to the overall experience of making an appointment (01/01/2018 to 31/03/2018)	73.8%	71.0%	68.6%	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 (01/01/2018 to 31/03/2018)	77.6%	67.7%	65.9%	No statistical variation
The percentage of respondents to the GP patient survey who were satisfied with the type of appointment (or appointments) they were offered (01/01/2018 to 31/03/2018)	77.4%	73.3%	74.4%	No statistical variation

Any additional evidence or comments

The practice was in the process of doing its own survey and so far, received 211 responses. The results indicated the following:

- 73.4% of patients were either very satisfied or satisfied with the general practice appointment times available in the practice.
- 76.4% of patients were satisfied with the type of appointment they were offered.
- 76.6% of said their experience of making an appointment were either very good or fairly good.

Governance arrangements

There were clear responsibilities, roles and systems of accountability to support good governance and management.

	Y/N/Partial
There were governance structures and systems in place which were regularly reviewed.	Y
Staff were clear about their roles and responsibilities.	Y

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 Band	Z-score threshold
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1	Significant variation (positive)	$Z \leq -3$
2	Variation (positive)	$-3 < Z \leq -2$
3	No statistical variation	$-2 < Z < 2$
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:

<https://www.cqc.org.uk/guidance-providers/gps/how-we-monitor-gp-practices>

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.