

Care Quality Commission

Inspection Evidence Table

MARSTON SURGERY (E81043)

Inspection date: 06 February 2019

Date of data download: 08 January 2019

Overall rating: Good

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

Please Note: CQC was not able to automatically match data for this location to our own internal records. Data is for the ODS code noted above has been used to populate this Evidence Table. Sources are noted for each data item.

Safe

Rating: Good

The practice was rated as requires improvement for providing safe services as we found there were ineffective systems and processes in place to reduce the risks to patient safety. In particular:

- The immunisation checks of applicable clinical and non-clinical staff in relation to immunisations (other than hepatitis B) recommended by the Health and Safety at Work Act 1974 (and Public Health England (PHE) guidance) were incomplete.
- The replacement of carpets in rooms at the Marston Practice where clinical practice took place (minor illness room M008 and HCA room M018) with washable flooring was incomplete.

The practice had clear systems, practices and processes to keep people safe

Recruitment systems	Y/N/Partial
Staff vaccination was maintained in line with current Public Health England (PHE) guidance and if relevant to role.	Y
Explanation of any answers and additional evidence: During our inspection in July 2018, we identified the practice did not maintain adequate records in relation to staff immunity for specific diseases. Following our inspection in July 2018, the practice had taken steps to improve record keeping for staff immunisation status in line with Public Health England guidance. The practice kept a log of staff immunity and vaccination. They also recorded any blood tests conducted or vaccinations given to staff.	

Infection prevention and control

Appropriate standards of cleanliness and hygiene were met.

	Y/N/Partial
The practice had acted on any issues identified in infection prevention and control audits.	Y
Explanation of any answers and additional evidence: During our inspection in July 2018, we found the flooring in two clinical rooms did not meet infection prevention and control (IPC) standards and appropriate risk prevention measures had not been implemented. In February 2019, we found the practice had replaced the carpets in the clinical rooms (minor illness room M008 and HCA room M018) with washable floors.	

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
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: <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
- **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.