

Care Quality Commission

Inspection Evidence Table

Shinfield Health Centre (1-3162053452)

Inspection date: 19 June 2019

Date of data download: 19 June 2019

Overall rating: Good

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

Responsive

Rating: Good

At our previous inspection on 14 March 2019 we rated the practice as requires improvement for providing responsive services because feedback from patients was poor in regard to accessing the practice by telephone and obtaining appointments. The practice had clear plans in place to address patient feedback. However, the plan had commenced and there was further work to be undertaken. It was too early to evaluate if the plan would improve access.

Responding to and meeting people's needs

The practice organised and delivered services to meet patients' needs.

	Y/N/Partial
The practice understood the needs of its local population and had developed services in response to those needs.	Y
There were arrangements in place for people who need translation services.	Y
The practice complied with the Accessible Information Standard.	Y

Practice Opening Times

Day	Time
Opening times:	
Monday	8am to 6.30pm
Tuesday	8am to 6.30pm
Wednesday	8am to 6.30pm
Thursday	8am to 6.30pm
Friday	8am to 6.30pm

National GP Survey results

Practice population size	Surveys sent out	Surveys returned	Survey Response rate%	% of practice population
9,335	388	116	29.9%	1.24%

Indicator	Practice	CCG average	England average	England comparison
The percentage of respondents to the GP patient survey who stated that at their last general practice appointment, their needs were met (01/01/2018 to 31/03/2018)	82.6%	94.3%	94.8%	Variation (negative)

Any additional evidence or comments

The practice had undertaken a review of their clinical and administration capacity to assess the number of staff that was needed. This had resulted in further administration and nursing staff being employed.

The practice was still trying to recruit further GPs but had long term locums to ensure continuity for patients.

The practice had undertaken an inhouse survey, in June 2019, following the implementation of their action plan.

In May 2019 this showed:

- 100% of patients said they were either satisfied or fairly satisfied with the quality of their most recent appointment.
- 100% of patients said they were either satisfied or fairly satisfied with the GP they had an appointment with

Timely access to the service

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

National GP Survey results

	Y/N/Partial
Patients with urgent needs had their care prioritised.	Y
The practice had a system to assess whether a home visit was clinically necessary and the urgency of the need for medical attention.	Y
Appointments, care and treatment were only cancelled or delayed when absolutely necessary.	Y
Explanation of any answers and additional evidence: The practice had implemented a website designed for patients to use to interact with patients. This was a local initiative that the practice felt would allow patients to access the service in different ways. Patients could access the website and ask the practice a question. This would then be passed to the appropriate staff member to deal with.	

A survey completed in June 2019 showed that:

- 71% of patients who had access the website found it to be helpful.

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 practice on the phone (01/01/2018 to 31/03/2018)	36.5%	N/A	70.3%	Significant Variation (negative)
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)	37.8%	68.9%	68.6%	Variation (negative)
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)	38.9%	65.0%	65.9%	Variation (negative)
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)	52.0%	74.7%	74.4%	Variation (negative)

Source	Feedback
In house survey (May 2019)	<p>The data above relates to the period January to March 2018 and is the same data that was reviewed at the previous inspection.</p> <p>The provider had devised and implemented an action plan and undertaken a further patient survey to assess the impact of these actions. The data below shows the results of this survey.</p> <ul style="list-style-type: none"> • 77% of patients said it was easy or fairly easy to get through to the practice on the phone. • 84% of patients said they were either satisfied or fairly satisfied with the available appointment times. • 88% of patients said they were offered an appointment at an appropriate time. • 100% of patients said they were either satisfied or fairly satisfied with the clinician and the quality of their most recent appointment. <p>Further to the action plan the practice offered extended hours appointments on Tuesday evenings between 6.30pm and 8pm, on alternative Saturdays between 8am and 1pm and on Friday evenings, Sunday mornings and bank holidays via a shared rota.</p>

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 practice's 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 Bands	Z-score threshold
Significant variation (positive)	≤ -3
Variation (positive)	> -3 and ≤ -2
Tending towards variation (positive)	> -2 and ≤ -1.5
No statistical variation	< 1.5 and > -1.5
Tending towards variation (negative)	≥ 1.5 and < 2
Variation (negative)	≥ 2 and < 3
Significant variation (negative)	≥ 3

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.
- 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 practice on the phone uses a rules based approach for scoring, due to the distribution of the data. This indicator does not have a CCG 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.