



December 2014

## **A message from the Doctors & Team on the recent Care Quality Commission ratings**

*There have been recent reports in the local press about Stockton Heath Medical Centre detailing information extracted from "Intelligent Monitoring" by the Care Quality Commission (CQC) which could have been misinterpreted that we are a failing Practice. The CQC has published information on every General Practice in England to show how it will decide which surgeries it will inspect and what it will focus on. Professor Sparrow, senior national adviser and responsible officer CQC advised "Intelligent monitoring will never be used in isolation to make a final judgment or produce a rating of a GP Practice" (Pulse December 2014)*

*With their "Intelligent Monitoring" report the CQC produced 36 indicators on whether patients at the surgery could be at 'risk' or 'elevated risk' beyond what would be expected normally for each of these indicators*

*Based on these indicators, the CQC has then placed every Practice into bandings with Stockton Heath Medical Centre receiving a banding of one. This indicates the highest risk although the CQC stresses that **"The bandings are not judgements: these only happen following inspections. The data is a further tool that will help us to decide where to inspect and when."***

**Our doctors and staff are very disappointed to receive this risk rating. We do not feel that the indicators reflect the care and service provided to our patients.**

A routine CQC inspection was carried out at Stockton Heath Medical Centre on January 7<sup>th</sup> 2014. This reported that we met the following essential standards:

- **Respecting and Involving people who use services**
- **Care and Welfare of people who use services**
- **Safeguarding people who use services from abuse**
- **Requirements relating to workers**
- **Complaints**

The full report with reasons for the judgement can be viewed on the CQC website:

<http://www.cqc.org.uk/provider/1-199777454/services>

The recent CQC report; Intelligent Monitoring was published in November 2014. The report covered a period from April 2013 to March 2014. We would like to take this opportunity to explain the measurements used and to include our response to the indicators of which were classed as a risk.

The report groups the indicators under the following headings:

- **Are we EFFECTIVE?**
- **Are we CARING?**
- **Are we RESPONSIVE?**

First we would like to highlight the **positives** from the report: We had **30 “no evidence of risks”** and **0 “elevated risks”**. We actually scored above average in many of the “no evidence of risk” scores. These are listed below:

- The ratio of expected to reported prevalence of Coronary Heart Disease.
- The percentage of patients with diabetes, on the register, who have had influenza immunisation in preceding 12 months
- The contractor establishes and maintains a register of all patients over age 18 or over with learning disabilities
- The contractor establishes and maintains a register of all patients in need of palliative care/support irrespective of age
- The contractor has regular (at least 3 monthly) multidisciplinary case review meetings where all patients on the palliative register are discussed

The indicators of risk which were highlighted in the report are listed below along with our response.

**Category: EFFECTIVE Indicator Percentage of Cephalosporins and Quinolones items as a proportion of antibiotic items prescribed.**

Our response: At Stockton Heath Medical Centre our overall prescribing of antibiotics is the lowest in Warrington Practices. Where possible, when our clinical staff do prescribe an antibiotic which is a Cephalosporin or Quinolone, it will be for a very specific reason. Our Practice has a higher number of elderly patients who have an increased resistance to the usual antibiotics used which may explain the higher proportion of use of the antibiotics in this group. We wish to highlight that our overall prescribing is low and the figures do not reflect our true prescribing data. We have discussed the results with our Medicines Management team and they have advised they have no concerns with our prescribing.

**Category EFFECTIVE Indicator 2: The percentage of patients with diabetes, on the register, with a record of a foot examination and risk classification 1-4 within the preceding 12 months**

Our response: Diabetic foot checks in the Warrington area are undertaken through a block contract by the Podiatry service at Health Services at Wolves. The Practice recognised early this year that there had been delays in patients being invited for this check. Due to the backlog our Practice Nurses decided that they will now perform this check as part of the annual diabetic health check at the surgery.

**Category EFFECTIVE Indicator 3: The percentage of patients with hypertension in whom the last blood pressure reading measured in the preceding 9 months is 150/90mmHg or less**

Our response Our own audits indicate that data used by CQC could have been skewed by the Practice recalling patients over a different time scale than that which was analysed. We had recognised this and have altered our recall for patients with hypertension.

**The following indicators were developed from analysis of the annual NHS GP Survey which is sent by post direct to patients. The GP survey provided indicators on patient satisfaction.**

**Category CARING Indicator 4: The proportion of respondents to the GP survey who described the overall experience of their GP surgery as fairly good or very good**

**Category CARING Indicator 5: The percentage of people who gave a positive answer to “Generally how easy is it to get through to someone at your GP surgery on the phone?”**

**Category RESPONSIVE Indicator 6: The percentage of patients who were “very satisfied” or “fairly satisfied” with their GP Practice opening hours.**

Our response: Patients often tell us they are more than happy with the clinical care they receive but this can be tempered by access problems.

The Doctors and staff are very aware of the problems encountered in accessing the surgery for routine appointments with a doctor. The GP’s and staff strive to provide care that is of high quality, cost effective and appropriate. We are currently recruiting additional GP’s to begin with us in early 2015 so that we can improve patient access to appointments.

We are aware of the difficulties patients have in getting through on the phone. We have employed further receptionists for busy periods. The issue is compounded by the problems we have with access demand in that patients have to call back the following day. We have also invested in 9 mobile telephones for the GP’s to make external telephone consultations. This has in effect doubled the capacity of our telephones. Our patients can now also register to book appointments on-line. They need to collect their password and log-in from the receptionist.

We are working with Warrington Clinical Commissioning Group and Warrington Health Plus to investigate ways we can provide access in addition to our core hours. We currently offer extended hours two mornings a week to see a clinician starting at 7.30am.

The CQC report highlighted **no evidence of risk in 6 further indicator of patient satisfaction:**

- Proportion of respondents to GP survey who stated that the last time they saw or spoke to a GP, the GP was good at treating them with care or concern
- Proportion of respondents to GP survey who stated that the last time they saw or spoke to a GP, the GP was good or very good at involving them in decisions about their care.

- Proportion of respondents to GP survey who stated that they always or almost always see or speak to a GP they prefer
- Proportion of respondents to GP survey who stated that the last time they saw or spoke to a Nurse, the Nurse was good or very good at treating them with care and concern.
- Proportion of respondents to GP survey who stated that in the reception area other patients can't overhear.

We hope that our response has fully explained the CQC report and that we have reassured you that we are **EFFECTIVE, CARING** and **RESPONSIVE** in service provision to our patients.

Regards

**The Partners and Team**

**Stockton Heath Medical Centre**