

CCG Response to GP Care Quality Commission Inspection Reports Policy

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POLICY GUIDELINES FOR CCG RESPONSE TO GP CQC INSPECTION REPORTS

1. Summary

The Care Quality Commission (CQC) is the independent regulator of Health and Social Care in England. Every GP surgery will be regularly inspected by CQC and a formal report issued. Harrogate and Rural District Clinical Commissioning Group (the CCG) has delegated responsibility for commissioning Primary Care and published CQC reports are a useful resource to help provide assurance about the safety and quality of services provided, and using information in the reports can help the CCG ensure continuing improvement in Primary Care services.

2. Introduction

Before a provider can carry out any regulated activities they must register with CQC and will then be continuously monitored by a combination of regular announced inspections, receipt of certain defined reports from the provider, collection of feedback received from service users and other sources, reviewing data relevant to the quality of services (eg National GP patient survey, Quality and Outcomes Framework results, Electronic Prescribing Analysis and Costs) and unannounced inspections if needed.

When inspecting GP Practices CQC have five key lines of enquiry

1. Are services safe?
2. Are services effective?
3. Are services caring?
4. Are services responsive to people's need?
5. Are services well led?

These five questions are applied to six different population groups

1. Older people
2. People with long term conditions
3. Families, children and young people
4. Working age people (including the recently retired and students)
5. People whose circumstances make them vulnerable
6. People experiencing poor mental health (including dementia)

Following an inspection each of the five key lines of enquiry and each of the population groups is given a rating of Outstanding, Good, Requires Improvement or Inadequate and the practice is given an overall rating using the same four ratings. It is possible for a number of the ratings of key lines of enquiry or population groups to be given a rating below the overall rating applied to the Practice service as a whole. After an inadequate rating CQC will re-inspect the practice after six months and if no improvement has been made the practice may be placed into Special Measures.

CQC informs the CCG Director of Quality before an inspection and information from the CCG is collected. The Director of Quality is also involved in the preparation of the report. This CCG involvement is confidential. However once the CQC report is published it is a public document and the CCG should make best use of the report to assist in the assurance of quality of GP services for which it has delegated commissioning responsibility.

2. Procedure

The Primary Care Steering Group (PCSG) should ensure a robust system is in place to ensure the PCSG is aware as soon as a Practice CQC report is published.

The detail of all reports will be discussed at the next PCSG after the report is published.

An anonymised summary of all reports issued since the last meeting will be taken by the PCSG to the Primary Care Commissioning Committee (PCCC), including areas of practice rated as good and areas where action needs to be taken, highlighting any identified problems relating to primary care strategy or commissioning.

A non-anonymised summary of all reports will be taken to the Quality and Clinical Governance Committee (QCGC), highlighting areas of concern about quality or safety in the reports and the action taken by the Practice (with the support of the PCSG if needed) to remedy any problems.

Important messages from the CQC reports will be brought to the Governing Body in the regular updates at the meeting from the PCCC and QCGC.

The PCSG will produce a regular update for Practices containing learning points from recently published CQC reports (both positive and negative) to assist all Practices to maintain and improve their own services. This will be distributed in Practice Dispatches at intervals determined by the timing of publication of CQC reports.

The CCG website will contain a link to Practice CCG reports, making it easy for the public to access them.

Further action taken by the PCSG will depend on the overall rating of the practice in their report.

Outcome	Action
Outstanding	With the permission of the practice the CCG Communications lead may consider appropriate sharing of this positive message.
Good	Should there be any individual Lines of Enquiry or Patient Groups that have received a 'Needs Improvement' rating the Practice will share their Action Plan with the PCSG, and this will be taken to the next meeting of the QCGC. The Commissioning Team member who is in regular contact with the Practice will check that the Action Plan is completed in the times specified and if not report this to the PCSG
Needs Improvement	The Chair of the PCSG will contact the Practice and offer support to develop an action plan. The CCG Communications lead will ensure press releases are prepared in case of enquiry and also offer support to the Practice for dealing with communications with the press and

	<p>patients. The Practice will share their Action Plan with the PCSG and this will be taken to the next meeting of the QCGC. The Commissioning Team member who is in regular contact with the Practice will check that the Action Plan is completed in the times specified and if not report this to the Chair of the PCSG.</p> <p>It is possible for a Practice to have some fields of the report rated as 'Inadequate' within an overall rating of 'Needs Improvement' but this should not happen if the CQC consider the safety of the patients to be significantly compromised, however the PCSG Chair will check safety is not compromised and, should it be, urgently escalate the problem to the Clinical Executive/Senior Management Team (see below). Otherwise 'Inadequate' aspects of the service should be remedied within the overall action plan</p>
Inadequate	<p>The Chair of the PCSG will urgently contact the Practice to discuss the contents of the report and offer support. The CCG Communications lead will ensure the CCG and the Practice have an appropriate communications strategy in place, for the patients, public and the press.</p> <p>The Clinical Executive/Senior Management Team will urgently review the report and evaluate the level of risk to the safety of the patients registered at the Practice involved and based on this decide on the appropriate further action to be taken, which may include assisting the Practice to develop a detailed action plan, supporting the implementation of the action plan within a strict time table, supporting services to patients in the short term or even closure of the Practice</p>
Special Measures	<p>Using the above policy should prevent any CCG practice being placed in Special Measures, however should this happen the CCG will follow the NHSE guidelines https://www.england.nhs.uk/wp-content/uploads/2014/10/frmwk-respond-cqc-insp.pdf</p>