

<b>Meeting: Quality and Safety Committee</b>	<b>Month: May Data from 1<sup>st</sup> – 30<sup>th</sup> April 2017</b>
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<b>Presented By: Liz Corrigan Primary Care Quality Assurance Coordinator</b>	<b>Team: Quality and Risk</b>
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**Safety**

**Infection Prevention.**

**IP Audit Ratings: Gold 97-100%; Silver 91-96%; Bronze 85-90%; No rating ≤84%**

Site	Date	General audit	Minor Surgery room	Practice nurse room
No reports received this month – visits to commence again in May for 2017/18 financial year				

The following overview of IP ratings within general practice is available for 2016/17 and the IP team continue to update audits and carry out follow up support visits where necessary. The Quality Team have oversight of this process.

**Medicines Alerts**

Healthcare professionals will be informed about the alerts via the monthly newsletter (Tablet Bytes). In addition, ScriptSwitch messages and/or PMR searches would be used to inform healthcare professionals where appropriate.  
[Click to view Tablet Bytes](#)  
 Suspected adverse drug reactions should be reported to the Medicines and Healthcare products Regulatory Agency (MHRA) through the Yellow Card Scheme ([www.mhra.gov.uk/yellowcard](http://www.mhra.gov.uk/yellowcard)).

**Patient Experience****Friends & Family Test****Data:**

GP FFT	Submission for April 2017 (February 2017 data)		
	WCCG	West Mids	England
Percentage Recommended	85%	89%	85%
Percentage Not recommended	6%	6%	6%
Overall response % of total list size	0.6%	0.6%	0.3%
Wolverhampton CCG			
	Number	Percentage	
No of Practices with "no data"	10	22%	
No of Practices had data suppressed <i>(returns with less than 5 responses are not included in the final analysis by NHSE)</i>	6	13%	
No of practices with zero responses	1	2%	
Total number practices with no data	17	38%	

The numbers/percentages of submission and non-submission are shown below:

**\*Practices where no data was submitted were:**

Identifier	Practice	Comments
M92001	POPLARS MEDICAL CENTRE	No data submitted in previous 3 months
M92004	PRIMROSE LANE PRACTICE	1 incidence of no submission in 2016/17
M92011	PENN MANOR MEDICAL PRACTICE	7 incidences of no submission in 2016/17
M92027	CAERLEON SURGERY	2 incidences of no submission in 2016/17
M92031	DRS PASSI & HANDA	7 incidences of no submission in 2016/17
M92035	ALL SAINTS SURGERY	7 incidences of no submission in 2016/17
M92041	PROBERT ROAD SURGERY	1st incidence
M92042	80 TETTENHALL ROAD SURGERY	1 incidence of no submission in 2016/17
M92609	ASHFIELD ROAD SURGERY	3 incidences of no submission in 2016/17
M92640	TETTENHALL ROAD MEDICAL PRACTICE	2 incidences of no submission in 2016/17

Overall response for WCCG as a proportion of list size was 0.6% which had decreased from 1.2%.

**Ratings:**

84% of responses were positive (extremely likely or likely), 20 practices had responses that included unlikely or extremely unlikely to recommend which is an increase on 10 last month. Of these practices this ranged from 1% – 33% of their overall responses, however response numbers were low again for some sites and this has skewed the figures. Overall 9% of respondents also gave a neither or don't know answer to this question which is a decrease from 21% last month, again figures are low and it is difficult to draw conclusions.

**Method of Response:**

Once again this month responses are, fairly equally attributed to handwritten, check in screens and SMS. Work continues to increase FFT submission via electronic methods, and this will continue now that the CCG is fully delegated.

Liz Corrigan held a telephone discussion with Olivia Taylor Quality Lead at NHSE around FFT, the regional team have no concerns around this for Wolverhampton. She has asked that we be provided with information from the NHSE primary care quality dashboard for comparison with ours.

WCCG plans for improving FFT uptake and submissions following full delegation were discussed including electronic submission and data collection. Issues with CQRS reported by practices were also discussed and this will be taken back to the national team by Olivia.

**Quality Matters.**

New	0
On-going	4
Closed	0

Please see Appendix 1 for full details.

**Formal Complaints (including learning)**

None for CCG

**Compliments**

None noted

**Effectiveness**

## NICE/Clinical Audit

The NICE assurance group met on the 15<sup>th</sup> February 2016 where the latest guidelines were discussed. New guidance relevant to primary care is shown below. For the latest list of published guidance please see [this link](#).

### Guidance

CG95 - Chest pain of recent onset: assessment and diagnosis

NG60 - HIV testing: increasing uptake among people who may have undiagnosed HIV

QS140 - Transition from children's to adults' services

QS141 - Tuberculosis

NG63 - Antimicrobial stewardship: changing risk-related behaviours in the general population

CG146 - Osteoporosis: assessing the risk of fragility fracture

QS86 - Falls in older people

QS143 - Menopause

QS139 - Oral health promotion in the community

## CQC

Site	Date	Rating	Comments
<a href="#">All Saints and Rosevillas Medical Practice</a>	17/3/17	Good	New inspection report published on 17th March 2017.
<a href="#">Ashfield Road Surgery</a>	31/3/17	Good	New inspection report published on 31st March 2017.

## Other Items

### Risk Register (see Appendix 2)

Rating	Number	Percentage
Extreme	0	0%
High	13	65%
Moderate	7	35%
Low	0	0%
<b>Total</b>	<b>20</b>	
<b>Confidential risks</b>	<b>3</b>	

## Workforce Development

**Attraction:**

The workforce fayre date is now finalised:

**15th June 2017 Wolverhampton Science Park**

An afternoon and evening event are planned with both events mirroring each other, this ensures that there is coverage for people who work and may want to attend in the evening. Liz Corrigan and Ranjit Khular have been working to identify staff to support this event as well as ways to promote and maximise attendance.

Pre-emptive links have also been made with the West Midlands Deanery.

**Recruitment:**

In addition to the workforce fayre, training and workforce analysis for all practices is underway with a report being prepared by the project managers and further data provided by CSU.

**Development:**

GPFV programmes including administrator training and practice manager development have commenced. Monies for SLAiP training are available from University of Wolverhampton and expressions of interest are being followed up by Liz Corrigan.

Root Cause Analysis training was held in March and April and was attended by representatives from 13/45 practices (28.9% coverage), therefore more work is needed to ensure that primary care staff are aware of the RCA process. This will be followed up by Liz Corrigan.

The nursing associate and registered nurse apprenticeship programme is due to go live next academic year and Liz Corrigan is to attend a workshop at the University of Wolverhampton links have also been made with the Apprenticeship Hub at University of Wolverhampton.

**Retention:**

This will be addressed via the information gathered through the training and workforce analysis.

**Appendices****Appendix 1 Quality Matters:**

Microsoft Word  
Document

**Appendix 2 Risk Register:**

Microsoft Excel  
Worksheet