

CQC Single Assessment Framework – What's new and what do we know so far in General Practice?

How to prepare



About us



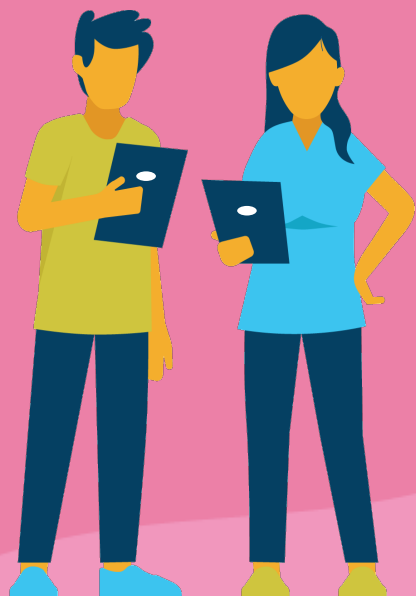
Our mission is to help everyone who cares to do a great job. While you focus on making a difference, our commitment is to maintain your business's compliance every day, every hour, and every minute, so you can dedicate your effort to what matters most — caring for others.

Policies, procedures, and compliance toolkits shaped to your business.

Our team of care specialists provide you the latest expert insights, guidance, and knowledge.

Instant updates are delivered digitally, 24/7, via QCS Policy Centre and QCS Mobile App.

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registered users



6,500+
organisations
relying on QCS



100,000+
policies read
and shared
every week



2,300+
policies



1,000+
policy updates
every month



7,000+
best practice
and guidance
resources

Our Panel today



Kiran Johnson
Owner of DKJ, Primary Care and
CQC Specialists



Dr Victoria Hoyle
GP Partner at The Hollies Medical
Practice & Clinical Director South and
Central Knowsley Primary Care Network

Single Assessment Framework

21st November – South region early adopters

5th December – South region and Bedford, Luton and Milton Keynes

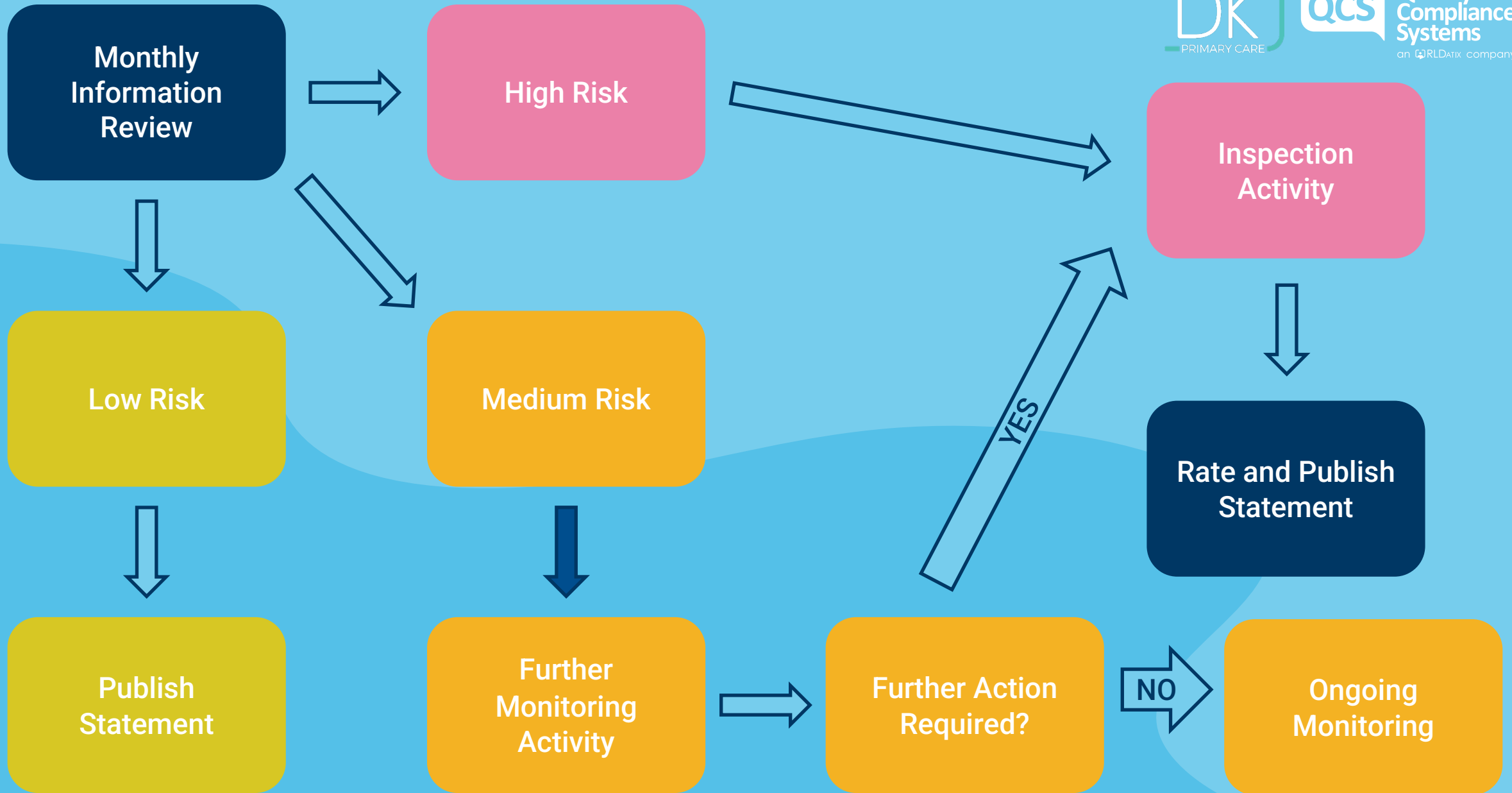
9th January – London and East of England

6th February – North and Midlands



CQC Inspections - Today





Monthly Assessment



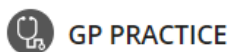
5 January 2023

During a monthly review of our data

We carried out a review of the data available to us about Riverside Surgery on 5 January 2023. We have not found evidence that we need to carry out an inspection or reassess our rating at this stage.

This could change at any time if we receive new information. We will continue to monitor data about this service.

If you have concerns about Riverside Surgery, you can [give feedback on this service](#).




GP PRACTICE

Highview Medical Centre

The Elms, High Street, Potters Bar, Hertfordshire, EN6 5DA (01707) 871980

Provided and run by: [Highview Medical Centre](#)

 Overall: Good

Overview


[Latest inspection summary](#)

[All inspection reports and timeline](#)

Overview

Latest inspection: 21 December 2016

Report published: 30 March 2017

Latest review: 6 July 2023 

CQC Inspections – The Future/Now!



CQC Inspection to CQC Assessment



Quality
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Now

Multiple
Assessment
Frameworks

Inspections
based on
previous ratings

Single point in
time - KLOEs

Develop
Judgements

Publish Narrative
Report

PROCESS

Single
Assessment
Framework

Ongoing
assessment of
quality and risk

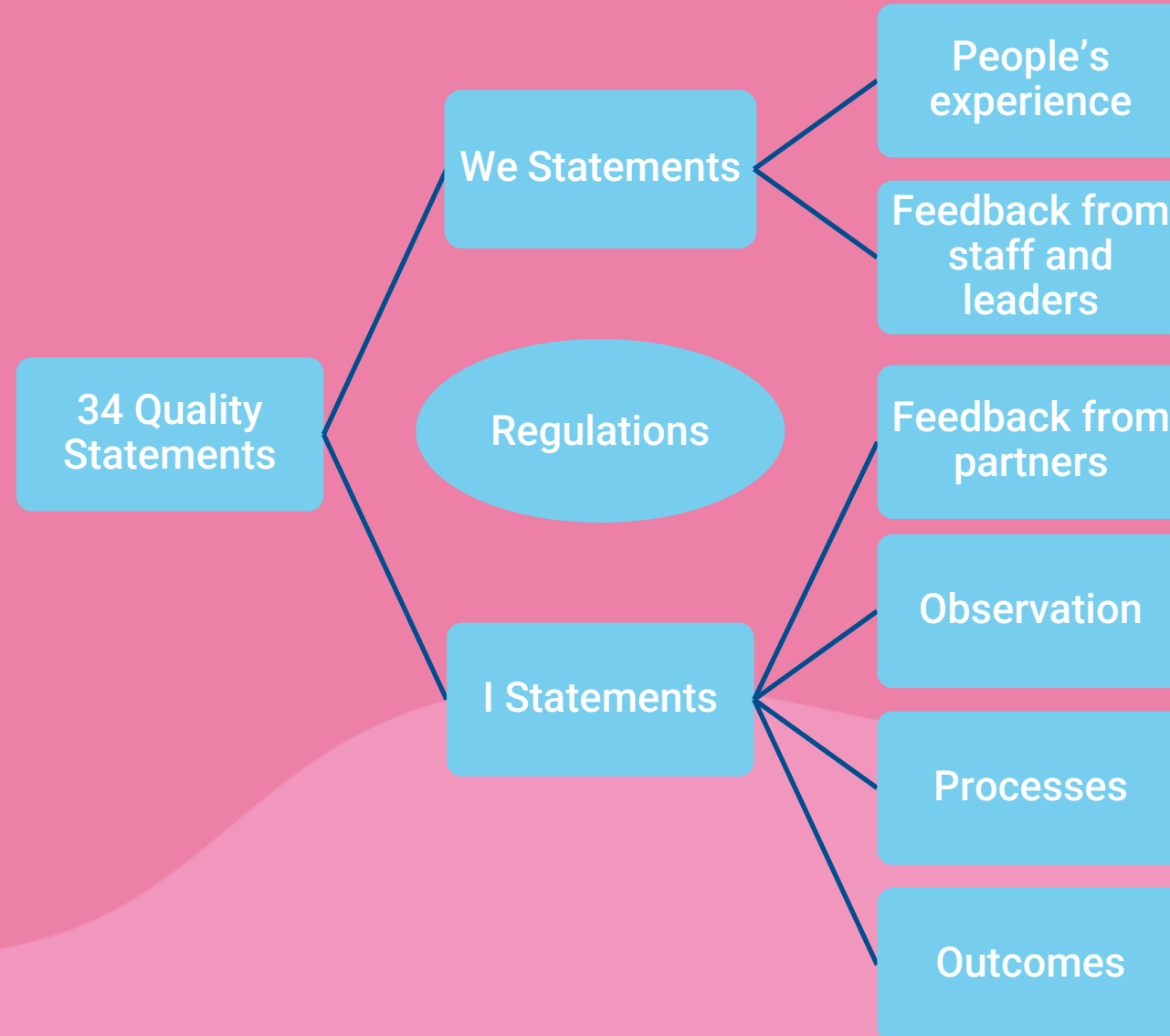
Multiple points in
time – focus on
high risk

Assigns score
based on
evidence

Ratings updated,
short statement
published

Future

Single Assessment Framework



Quality Statement Themes



SAFE	EFFECTIVE	CARING	RESPONSIVE	WELL-LED
Learning culture	Assessing needs	Kindness, compassion and dignity	Person-centred care	Shared direction and culture
Safe systems, pathways and transitions	Delivering evidence based care and treatment	Treating people as individuals	Care provision, integration and continuity	Capable, compassionate and inclusive leaders
Safeguarding	Staff, teams and services work together	Independence, choice and control	Providing information	Freedom to speak up
Involving people to manage risk	Supporting people to live healthier lives	Responding to people's immediate needs	Listening to and involving people	Governance, management and sustainability
Safe and effective staffing	Monitoring and improving outcomes	Workforce wellbeing and enablement	Equity in access	Partnerships and community
Infection prevention and control	Consent to care and treatment		Equity in experiences and outcomes	Learning, improvement and innovation
Medicines optimisation			Planning for the future	Environmental sustainability – sustainable development
Safe environments				Workforce equality diversity and inclusion

Responsive – Listening to and Involving People



Quality
Compliance
Systems
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We Statement

We make it easy for people to share feedback and ideas or raise complaints about their care, treatment and support. We involve them in decisions about their care and tell them what's changed as a result.

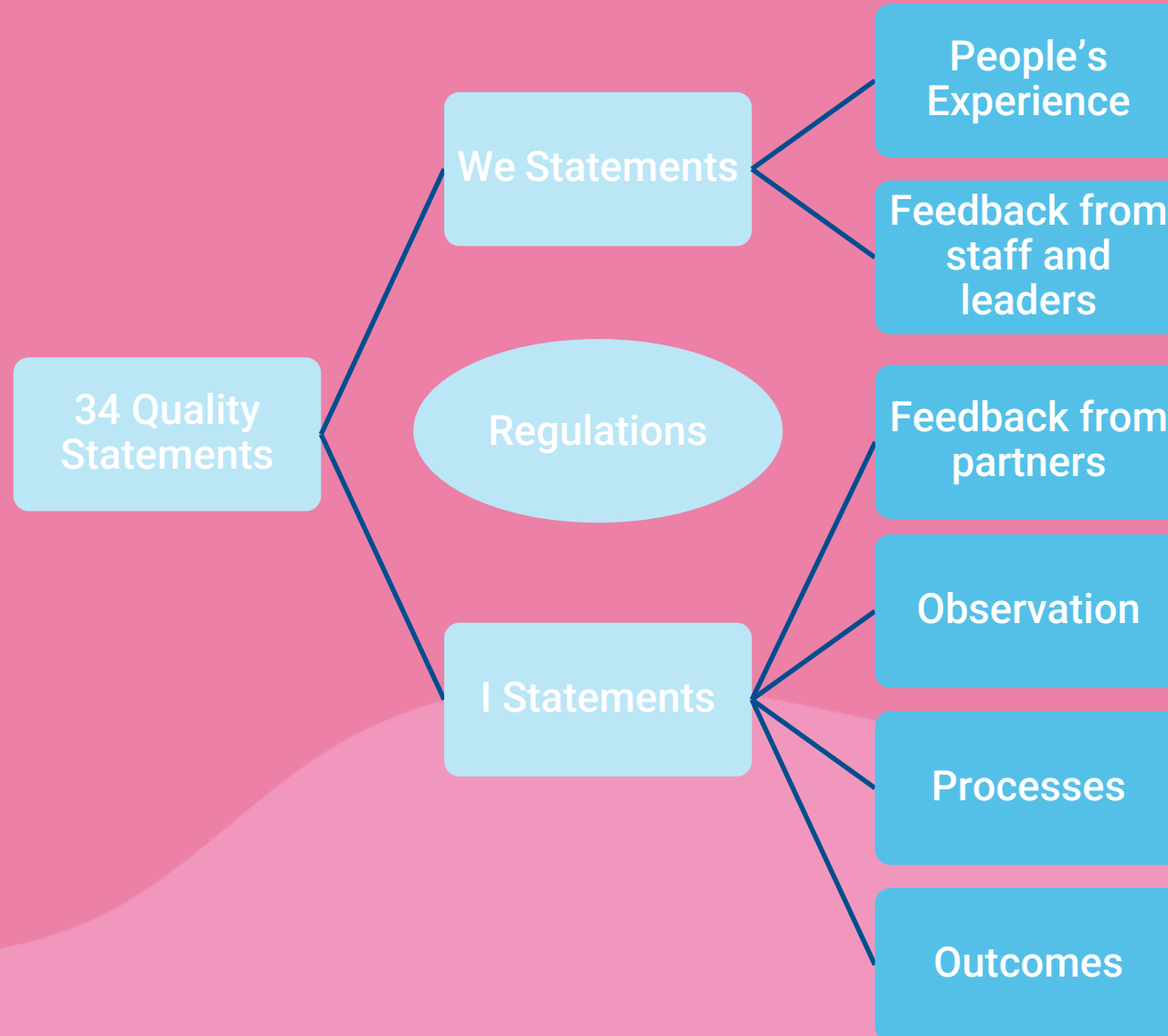
I Statements

- I have care and support that is coordinated, and everyone works well together and with me
- I am in control of planning my care and support. If I need help with this, people who know and care about me are involved
- I am encouraged and enabled to feedback about my care in ways that work for me and I know how it was acted on

Related Regulations

- Regulation 9: Person-centred care
- Regulation 10: Dignity and respect
- Regulation 16: Receiving and acting on complaints
- Regulation 17: Good governance

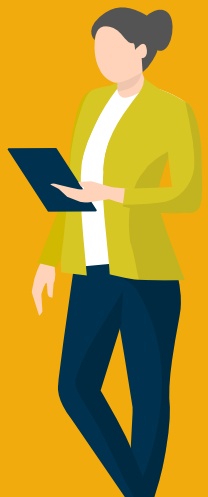
Single Assessment Framework



1. People's experience of health and care services

All types of evidence from people who have experience relating to a specific health or care service, or a pathway across services.

It also includes evidence from families, carers and advocates for people who use services.



2. Feedback from Staff and Leaders

Evidence from people who work in a service, local authority or integrated care system, and groups of staff involved in providing care to people.

Evidence from leaders of services.



3. Feedback from Partners

Evidence gathered from people representing organisations that interact with the service that is being assessed.



4. Observation

Most observation will be carried out on the premises by CQC inspectors and Specialist Professional Advisors (SpAs)



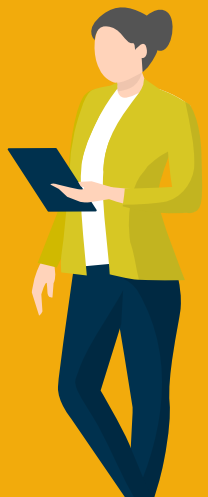
5. Processes

Processes are any series of steps, arrangements or activities that are carried out to enable a provider or organisation to deliver its objectives.



6. Outcomes

Outcomes are focused on the impact of care processes on individuals.



Quality Statement Evidence Categories



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SAFE	Evidence Categories
<p><u>Learning Culture</u></p> <p>We have a proactive and positive culture of safety based on openness and honesty, in which concerns about safety are listened to, safety events are investigated and reported thoroughly, and lessons are learned to continually identify and embed good practices.</p>	<ul style="list-style-type: none">• People's experience of health and care services• Feedback from staff and leaders• Processes
CARING	Evidence Categories
<p><u>Kindness, compassion and dignity</u></p> <p>We always treat people with kindness, empathy and compassion and we respect their privacy and dignity. We treat colleagues from other organisations with kindness and respect.</p>	<ul style="list-style-type: none">• People's experience of health and care services• Feedback from staff and leaders• Observation

Scoring and Rating



In Practice – GP Practice

Infection Prevention and Control

We assess and manage the risk of infection. We detect and control the risk of it spreading and share any concerns with appropriate agencies promptly.

In Practice – Required Categories

People's Experiences

- Patient survey
- Complaints and compliments

Feedback from staff and leaders

- Call with staff at the practice

Observation

- Inspection to look at the care environment

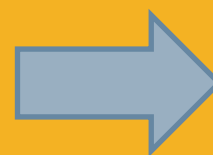
Processes

- Policies



In Practice – Quality Statement Score

Evidence Category	Score	Existing or Updated Score
People's experience	3	Updated
Feedback from staff and leaders	2	Updated
Observation	3	Updated
Processes	3	Existing
Combined score	11/16	
	69%	



25 to 38% = 1

39 to 62% = 2

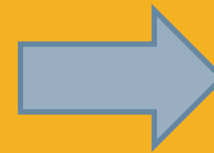
63 to 87% = 3

over 87% = 4



In Practice – Quality Statement Score

Evidence Category	Score	Existing or Updated Score
Learning culture	3	Updated
Safe systems, pathways and transitions	3	Updated
Safeguarding	3	Updated
Involving people to manage risks	2	Existing
Safe environments	3	Existing
Infection prevention and control	3	Existing
Safe and effective staffing	2	Updated
Medicines optimisation	3	Existing
Total	21/32	65.6%



25 to 38% = Inadequate
39 to 62% = Requires Improvement
63 to 87% = Good
over 87% = Outstanding



What we are seeing



Adopter Sites

General practice – Access prompts

Systems to manage demand/access to appointments:

- **Balance of face-to-face vs online/telephone appointments**
- **Balance between routine and urgent appointments**
- **Monitoring and improving access**
 - Core opening hours/opening days of the practice/OOH arrangements
 - Systems to determine required appointments and staffing levels
 - Arrangements for signposting to other providers/organisations
 - Arrangements when appointment slots are filled
 - Systems to review and improve access arrangements; systems in place to support the monitoring of access

Management of triage arrangements

- Systems to triage patients
- Clinical oversight of triage processes
- Staff training

Systems to prevent digital exclusion and ensure everyone can access the care, support and treatment they need when they need it

- Range of appointment types offered
- How are the individual needs of patients' health inequalities identified and flagged?
- How are people who are more likely to have a poorer experience of care supported to access services and register at the practice? For example, but not limited to, people from the homeless, gypsy, Roma and traveller communities, people who are homeless or rough sleepers, patients with poor mental health, disabled people with physical or sensory impairments, people from Black and minority ethnic groups and those who are unable to use digital services

Systems to determine clinical urgency of appointments

- How does the practice prioritise appointments?
- How are requests for face-to-face appointments or home visits prioritised?
- When planned appointment slots are filled, how does the practice manage requests for urgent appointment?

Adopter Sites

Overall inspection

Good 

Updated 4 January 2024

We carried out an announced focused assessment of the key question responsive at Modern Medical Centre on 5 December 2023. Overall, the practice is rated as good and the key question for providing a responsive service is now rated requires improvement.

Safe - not inspected, rating of good carried forward from previous inspection.

Effective - not inspected, rating of good carried forward from previous inspection.

Caring - not inspected, rating of good carried forward from previous inspection.

Responsive - Good.

Well-led - not inspected, rating of good carried forward from previous inspection.

How we carried out the assessment

This assessment was carried out remotely. It did not include a site visit.

The process included:

- Conducting an interview with the provider and members of staff using video conferencing.
- Reviewing patient feedback from a range of sources.
- Requesting evidence from the provider.
- Reviewing data, we hold about the provider.
- Seeking information/feedback from relevant stakeholders.

We found that:

- The practice had responded to patient feedback and made and continues to make improvements to patient access.
- The practice had organised and delivered services to meet patient's needs.
- The GP survey data demonstrated that the improvements had improved patients' feedback.

Whilst we found no breaches of regulations, the provider should:

- Continue to improve patient access.
- Continue to improve the receptionist uptake of care navigation training.

Preparing – Non clinical

Familiarise yourself with:

- 34 Quality Statements
- We and I Statements
- Evidence Categories

Patient Population

- Who are your patients and how do they access your services?
- Inclusion health
- Seeking and acting on patient feedback

What does your shop window look like?

- Website
- Social Media
- Signage

Engagement with Partners

- How strong are your relationships?
- Working with the PCN and ICB

Preparing as a GP

Who, what, when, where and why?

Prepare key documentation

Know where it is



Getting ready for your inspection checklist as a GP - Documents



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Significant events

Audits - infection control, cleanliness and disability access, benzos

Risk assessments

Health and safety documentation

Business continuity plan

HR staff files, policies and procedures

SOPs - complaints, chaperoning, medicine management and repeat prescribing, equipment calibration reports, PAT testing reports, palliative care registers, safeguarding register, workforce training matrix and schedules

Preparing for the Day

What is the plan?







Are your team prepared?

Are you prepared?



Clinical Searches Systems

- **Monitoring patients prescribed DMARDs**
- **Medicines requiring monitoring**
- **MHRA/Central Alert System (CAS)/Drug safety update alerts**
- **Potential missed diagnosis**
- **Medicines Usage**
- **Medications Review**
- **Monitoring of high-risk patients with LTC**
- **Patients with DNACPR or ReSPECT form**
- **Patients accessed different types of appointments**

Name
 CQC GPFIP Medicines usage
 CQC GPFIP MHRA CAS Drug safety updates
 CQC GPFIP Missed diagnosis
 CQC GPFIP SPS DMARDs
 CQC GPFIP SPS High Risk Drugs
 DNACPR

Deep Dive into Clinical Quality Statements



Getting ready for your inspection checklist as a GP

Who, what, when, where and why?

Prepare key documentation

Know where it is



Getting ready for your inspection checklist as a GP - Documents

- Significant Events
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SAFE QUALITY STATEMENT

Medicines Management

EFFECTIVE QUALITY STATEMENT

Assessing Needs

Monitoring Improvements

RESPONSIVE QUALITY STATEMENT

Personalised Care

WELL LED QUALITY STATEMENT

Leadership and Governance

Safe Quality Statement - Medicines Management



Safety is a priority for everyone, and leaders embed a culture of openness and collaboration.

People are always safe and protected from bullying, harassment, avoidable harm, neglect, abuse and discrimination. Their liberty is protected where this is in their best interests and in line with legislation.

Med management

How are medication requests handled?

Medication reviews

How are discharge summaries processed to ensure utd prescribing?

Emergency medicines and home visit bag

Non-medical prescriber

Effective Quality Statement - Assessing Needs and Monitoring Improvement



“People and communities have the best possible outcomes because their needs are assessed. Their care, support and treatment reflects these needs and any protected equality characteristics.

Services work in harmony, with people at the centre of their care. Leaders instil a culture of improvement, where understanding current outcomes and exploring best practice is part of everyday work”

Assessing needs is patient focused

Patient feedback evidences improvements

Robust monitoring system for above

Responsive Quality Statement: Personalised Care



People (patients and communities) are at the centre of everything you do

People can access care in a way that meets their individual needs

I have care and support that is co-ordinated, and everyone works well together and with me.

I am in control of planning my care and support. If I need help with this, people who know and care about me are involved.

I am supported to plan ahead for important changes in my life that I can anticipate.

I know how to access my health and care records and decide which personal information can be shared with other people, including my family, care staff, school or college.

Well Led Quality Statement: Leadership and Governance



We have clear responsibilities, roles, systems of accountability and good governance. We use these to manage and deliver good quality, sustainable care, treatment and support.

We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate

Clear and effective governance

Digital-specific



Discussion & Questions

Get In Touch



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01482 643108



www.dkjsupportservices.co.uk



Website live chat

Thank you.

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