

CQC 2026 - GP RETURN TO GOOD AND OUTSTANDING: Quick Reference Guide

Focus on **10 non-clinical quality statements** • Include a **site visit** • **5 working days’ notice** • **Do not** routinely include a **GP Specialist Advisor** • Reports are published in **2 – 4 weeks**

THE 10 RETURN TO GOOD QUALITY STATEMENTS

Quality Statement	Evidence Required	Questions for Staff
Safe Environments	☐ Environmental policies and procedures	Have you received Health and Safety/Fire training? Who is the fire warden? Where do you assemble in the event of a fire?
	☐ Portable Appliance Testing certificate	
	☐ Equipment calibration	
	☐ COSHH risk assessment (with actions in hand)	
	☐ Legionella risk assessment (with actions in hand)	
	☐ Fire risk assessment, evacuation procedure, training, records of fire drills	
	☐ EICR Inspections and Certificate (Fixed Wire Testing)	
	☐ Premises/security risk assessment	
	☐ Health and safety risk assessment	
	☐ Systems to manage patient safety alerts around equipment	
Safe and Effective Staffing	☐ HR policies	How are you supported by the practice? What happened when you started at the practice? When did you last have an appraisal?
	☐ Training matrix	
	☐ Staff rotas and skills mix	
	☐ Induction checklist	
	☐ Risk assessments	
	☐ Locum packs and checklists	
	☐ Recruitment checklists	
	☐ Staff files: training, appraisals, supervision, 1:1s, recruitment documents, job descriptions, competency checks	
	☐ Staff meeting minutes	
Infection Prevention and Control	☐ IPC policies	Have you had IPC training? What did you learn? Do you know who the IPC lead is? What would you do if a patient vomited in the waiting room? Where is the spillage kit?
	☐ IPC audit	
	☐ Staff IPC training	
	☐ Hand hygiene training and audit	
	☐ IPC lead – roles and responsibilities	
	☐ Management of clinical waste	
	☐ Cleaning contracts	
	☐ Cleaning schedules	
	☐ Cleaning of curtains	
	☐ Cleaning checklists	
	☐ COSHH data sheets	
	☐ Staff immunisations in line with The Green Book	
Supporting People to Live Healthier Lives	☐ Care plans (including end of life)	How are patients encouraged to manage their own health?
	☐ Promoting uptake of screening, vaccinations, stop smoking campaigns, weight management support	
	☐ Healthy lives promotion, e.g. posters, leaflets	
	☐ MDT meeting minutes	
	☐ Involvement of allied health professionals, social prescriber	
	☐ Management of hospital discharge	
	☐ Health promotion initiatives with hard to reach groups	
Monitoring and Improving Outcomes	☐ Policies and procedures, SOPs	If there are changes to current evidence-based guidelines, how do you find this out? Are you involved in clinical audit?
	☐ Clinical notes - evidence working to best practice guidelines	
	☐ Clinical audits	
	☐ Treatment templates	
	☐ Reviews of patients with long-term health conditions	
	☐ Performance cervical screening, childhood immunisations, prescribing	
	☐ Clinical and MDT meeting minutes	
Kindness, Compassion and Dignity	☐ Improvement plans for GP Patient survey data underperformance	Do leaders treat you with kindness, compassion and dignity? Can you give an example? How do you support patients who appear distressed or upset?
	☐ Feedback surveys	
	☐ Complaints	
	☐ Compliments	
	☐ Arrangements for personal conversations	
	☐ Supporting bereaved patients	
	☐ Use of chaperones/signage	
Equity in Access	☐ Emergency unplanned care access/out of hours arrangements	How would you make an appointment for someone who was hearing impaired, blind or did not speak English?
	☐ Risk assessments – health and safety, accessibility	
	☐ Reasonable adjustments	
	☐ Systems to support patients who may be digitally excluded	
Equity in Experience and Outcomes	☐ Improvement plans for GP Patient survey data underperformance	Does the practice offer appointments in a way that meets individual patient needs?
	☐ Reasonable adjustments	
	☐ Systems to prevent digital exclusion	
	☐ Links with other providers including the voluntary sector and social prescribers	
Shared Direction and Culture	☐ Vision statements	Do you know what the vision and values of the practice are? Are leaders visible?
	☐ Staff meetings minutes and engagement	
	☐ Leadership visibility	
	☐ Business plans	
	☐ Working with stakeholders, voluntary sector and the community	
	☐ Equality, diversity and human rights training	
Governance, Management and Sustainability	☐ Significant events log and evidence of duty of candour	How do you maintain oversight and continuous improvement?
	☐ Complaints log and evidence of duty of candour	
	☐ Registration with ICO	
	☐ Risk registers	
	☐ Business continuity plans	
	☐ Meeting minutes (including staff, leadership team, MDT, PCN, PPG etc)	
	☐ Appraisals and supervision documents	
	☐ Job descriptions	
	☐ Assurances of suitability of staff employed by PCN	
	☐ Clinical and non-clinical audits	
	☐ Action plans	