

## CQC Inspection of TBC

**Pre inspection information required. Please follow instructions on following pages and send information in separate emails for each numbered section.**

- Practice ODS code.
- List size.

Date information should be returned by:

**Close of play TBC but can you send safety alert, clinical audits and significant event information (highlighted in red) by close of play TBC.**

Email address of who to send information to: inspection email address

### **Other:**

- PPG contact details – calls will be made before inspection
- Care home contact details – calls will be made before inspection.
- To collect feedback from patients; Please give link to patients and put onto your website [Give Feedback on Care](#)

Staff member name	Role	Date and time available for interview	Email address for invite
	GP Partner		
	Practice Manager		
	Advance Nurse Practitioner		
	Practice Nurse		
	HCA		
	Pharmacist		
	Receptionist		

Please title the email: **EMAIL 1 GOVERNANCE, POLICIES AND PROCEDURES Surgery Name**

<b>EMAIL 1</b> <b>GOVERNANCE, POLICIES AND PROCEDURES</b> <b>Please attach:</b>	<b>Format</b> <b>Word, Excel etc</b>	<b>Attached Y/N</b> <b>(Please state reason if not attached)</b>
Statement of purpose		
Copy of Major incident/business continuity plan		
Medical emergencies policy		
Chaperone policy		
Induction process		
Online services policy		
Access policy		
Registration policy (incl access to medical records)		
Home visits/care home protocol		
Process for supporting carers		
Process for bereaved patients		
ICO registration certificate		
Provider liability/MD insurance		
Information leaflet for online services		
Safety and drug alerts process and evidence of management and actions.		
Policy and process for ensure staff are recruited safely including DBS and registration checks.		
Policy and process to ensure practice oversight of other staff not directly employed by the practice who have access to patients or their records.		
Process for supervision and competency oversight of clinical staff including staff with a prescribing qualification.		
Policy for ensuring PGDs and PSDs are appropriately reviewed and signed.		

Please title the email: **EMAIL 2 TRAINING Surgery Name**

<b>EMAIL 2 TRAINING</b> <b>Please attach:</b>	<b>Format</b> Word, Excel etc	<b>Attached Y/N</b> (Please state reason if not attached)
Number of current staff by role and WTE.		
List of staff and their extended role(s) e.g. cervical screening, diabetes, immunisations		
Policy of training for staff and process to manage and monitor		
Matrix of staff training which should include; <ul style="list-style-type: none"> <li>• Cervical screening training</li> <li>• Child and adult safeguarding detailing the appropriate level undertaken</li> <li>• BLS and anaphylaxis</li> <li>• Chaperone Training</li> <li>• Fire safety including fire marshals</li> <li>• Immunisation training</li> <li>• Infection prevention and control</li> <li>• Mental capacity act training</li> <li>• Sepsis and emergency procedures</li> <li>• Evidence that staff undertaking reviews of patients with long term conditions have received appropriate training.</li> <li>• Evidence that staff undertaking extended roles such as triage, minor illness have received appropriate training.</li> <li>• Other training</li> </ul>		

Please title the email: **EMAIL 3 SAFEGUARDING Surgery Name**

<b>EMAIL 3 SAFEGUARDING Please attach:</b>	<b>Format Word, Excel etc</b>	<b>Attached Y/N (Please state reason if not attached)</b>
Safeguarding adults policy		
Safeguarding children policy		
Sample of minutes of MDT meetings		
Policy/process to ensure information is shared with others such as coding of medical records.		

Please title the email: **EMAIL 4 RISK ASSESSMENTS Surgery Name**

<b>EMAIL 4</b> <b>RISK ASSESSMENTS</b> <b>Please attach:</b>	<b>Format</b> <b>Word, Excel etc</b>	<b>Attached Y/N</b> <b>(Please state reason if not attached)</b>
Latest fire risk assessment and any action log		
Evidence and date of fire extinguish check		
Evidence of latest service for emergency lights and alarm test		
Copy of the latest fire drill and actions taken.		
Sample of fire alarm checks undertaken in the month of <b>October 2023</b>		
Latest health and safety risk assessment and any action log		
Latest legionella assessment and water temperature checks undertaken in the month of <b>October 2023</b>		
Copy of any risk assessments the practice has taken such as wheelchair access, monitoring of waiting areas etc.		
Equipment calibration dates and copy of certificate		
PAT testing dates and copy of certificate		
Evidence of immunisation status of staff.		

Please title the email: **EMAIL 5 INFECTION PREVENTION AND CONTROL Surgery Name**

<b>EMAIL 5</b> <b>INFECTION PREVENTION AND CONTROL</b> <b>Please attach:</b>	<b>Format</b> Word, Excel etc	<b>Attached Y/N</b> (Please state reason if not attached)
Name and role of IPC lead •		
Latest Infection control policy		
Latest Infection prevention control audit and action log.		
Copies of any meetings where IPC has been discussed, any shared learning and changes since last inspection		
Summary of vaccine fridge management including number and location of vaccine fridges		
Copy of the temperature recordings for <b>October 2023</b>		

Please title the email: **EMAIL 6 SIGNIFICANT EVENTS, COMPLAINTS AND COMPLIMENTS Surgery Name**

<b>EMAIL 6</b> <b>SIGNIFICANT EVENTS, COMPLAINTS AND COMPLIMENTS</b> <b>Please attach:</b>	<b>Format</b> <b>Word, Excel etc</b>	<b>Attached Y/N</b> <b>(Please state reason if not attached)</b>
Significant events policy		
Complaints policy and leaflet available to patients		
A summary of significant events within the last 12 months, including evidence of actions you have taken, learning you have applied, and improvements made as a result.		
A summary of complaints received within the last 12 months, including evidence of actions you have taken, learning you have applied, and improvements made as a result.		
Sample of meetings minutes where significant events and /or complaints have been discussed in past 6 months.		
Sample of compliments received in past 6 months.		

Please title the email: **EMAIL 7 EVIDENCE OF QUALITY IMPROVEMENT WORK Surgery Name**

<b>EMAIL 7</b> <b>EVIDENCE OF QUALITY IMPROVEMENT WORK</b> <b>Please attach:</b>	<b>Format</b> Word, Excel etc	<b>Attached Y/N</b> (Please state reason if not attached)
Summary of the quality of care you provide for the six population groups		
Details of how you have monitored and improved care and treatment, <ul style="list-style-type: none"> <li>• A summary of clinical audits from the last two years.</li> <li>• Details of two complete full-cycle audits including actions taken and outcomes achieved.</li> </ul>		
Summary of any other quality improvement work undertaken over the last two years.		
Evidence of how you have collected, analysed and responded to patient feedback during the last 12 months, including examples of actions taken.		
If not included above – If you have undertaken your own Patient survey and not included above – results of the survey and action log		
Evidence of how you have collected, analysed and responded to staff feedback during the last 12 months, including examples of actions taken.		



Please title the email: **EMAIL 8 PATIENT RECORD KEEPING AND MEDICINES**

**Surgery Name**

<b>EMAIL 8</b> <b>PATIENT RECORD KEEPING AND MEDICINES</b> <b>Please attach:</b>	<b>Format</b> <b>Word, Excel etc</b>	<b>Attached Y/N</b> <b>(Please state reason if not attached)</b>
Discharge (medicine reconciliation) process and any audits/checks undertaken.		
Policy and process for the management of repeat prescriptions and medicine reviews.		
Patient summarising/coding in medical records policy/process and any audits/checks undertaken.		
Number of patient records that have not been fully summarised.		

Please title the email: **EMAIL 9 DATA FOR THE REPORT Surgery Name**

<b>EMAIL 9 DATA FOR THE REPORT Please attach:</b>	<b>Format Word, Excel etc</b>	<b>Attached Y/N (Please state reason if not attached)</b>
NHS health checks data, how many eligible, how many offered, how many completed in last 12 months		
Learning Disability check data, how many eligible, how many offered, how many completed in last 12 months		
Number of carers on the practice register		