

PRACTICE MANAGERS' PERSPECTIVE

EXPERIENCE OF THE DAY



PREPARING FOR THE DAY

- ▶ **Make sure your staff are prepared!!**
- ❖ Put your policies and protocols in a shared area on the computer so that the staff can read up before the event and so that they are easily accessible on the day.
- ❖ Check your staff know where this shared area is!
TOP TIP – Create a shortcut on the desktop.

PREPARING FOR THE DAY

- ❖ Check that staff understand the policies and haven't just read and signed them off. They **will** be asked questions on them.
- ❖ Check that the staff know who the Lead Roles are for each policy.
- ❖ Ensure the staff know what the Practice's mission statement is and have evidence that they have read and understood it by getting them to sign it. **CQC will ask staff and GPs what the mission statement is.**

PREPARING FOR THE DAY

- ❖ Make sure that all members of staff have a name badge.
- ❖ Ask them to smile! A happy staff generally means a happy surgery = happy patients!!

TOP HINT No. 1!

One Practice Manager prepared the staff for the day by organising a full staff meeting to discuss what information would be requested on the day.

To make it fun she created a CQC quiz for them to take part in.

TOP HINT No. 2!

One Practice Manager linked their staff's professional development with the CQC regulations.

She produced a CQC Personal Assessment for each member of staff to tick off, which helped identify any particular areas of learning that were needed.

PREPARING FOR THE DAY

- ▶ **Make sure the building is prepared!!**
- ❖ Walk around the building with another person to ensure that everywhere is clean and tidy.
- ❖ Remove ALL (clinical and non-clinical) out of date stock, material and medical resources.
- ❖ Ensure medical supply cupboards are locked and keys are kept in a secure place.
- ❖ Create information zones for your patients through clear and relevant notice boards.

PREPARING FOR THE DAY

▶ Make sure you are prepared!!

- ❖ Read up on the Mythbusters that have been created by the CQC, which clear up common myths about the inspections.
- ❖ Read the CQC Provider Handbook and Appendices.

These can be found on both the CQC and LMC websites below:

<http://www.cqc.org.uk/content/mythbusters-and-tips-gps-and-out-hours-services>

<http://www.cqc.org.uk/content/gp-practices-and-out-hours-service-providers>

<http://www.nwlmcs.org/advice-guidance/>

PREPARING FOR THE DAY

- ❖ Read CQC reports on practices that have done well and highlight any areas that you could learn from.
- ❖ Read CQC reports on practices that haven't done so well to check you are not making the same mistakes.

PREPARING FOR THE DAY

- ❖ Make sure all your policies and protocols are up-to-date.
- ❖ Make hard copies of your business continuity plan and put them on all levels of the practice. **No point in having protocols on your PC if the electricity goes down.**
- ❖ Make sure all meetings (business, clinical and staff) are minuted and shared with the team.

PREPARING FOR THE DAY

- ❖ Start preparing the 30 minute presentation **NOW!**

THE PRESENTATION

- ❖ It is recommended to create the presentation early so that it can be amended as and when you receive the notification that you are being inspected. **YOU DON'T WANT TO BE PANICKING 2 WEEKS BEFORE!**
- ❖ This is your time to shine so make sure the inspectors know how great you are. Think about all the areas where your practice goes above and beyond the call of duty.
- ❖ **TOP TIP – Ask staff members to send you examples of work where they have gone that extra mile for a patient and incorporate this into the presentation.**

THE PRESENTATION

- ❖ Be Honest – It is also ok to let CQC know areas that require improvement and what actions you are putting into place for these.
- ❖ Tailor the information to the 5 key lines of enquiry and also the 6 patient groups.
- ❖ **Make sure you have lots of examples and evidence of everything you do.**

THE PRESENTATION

- ❖ The presentation can be in any format – it doesn't have to be an all-singing, all-dancing PowerPoint presentation.
- ❖ It can include different staff members so that the onus doesn't just fall in your lap!
- ❖ It can be longer than the 30 minute recommendation. One practice's presentation lasted over an hour and CQC were absolutely fine.
- ❖ The presentation is a key part of the day – get it right and it can tick off the majority of the inspectors' questions.

THE INSPECTION DAY

- ▶ Prepare a Welcome Pack for the CQC inspectors containing:

1. A list of staff working on the day and the availability of all health care professionals.
2. Information on the Lead Roles.
3. A copy of the CQC presentation.
4. The location of important files in the premises.

THE INSPECTION DAY

- ▶ Who did the inspectors speak to and what was asked?

“The GP inspector stayed with the doctors and discussed prescribing issues, PDP’s, Audits, DNAR orders and GP training.”

“The nurse inspector went through safeguarding, the mental capacity act and consent with the nurses. She also checked the nurses’ rooms, fridge temperature, resus trolley, drug bags and basic life support training.”

THE INSPECTION DAY

“One of the inspectors sat in reception and spent about 10–15 minutes each with individual patients, asking them about their experiences of the day.”

“I answered many questions from the lead inspector and GP inspector about the way the practice is run, about policies such as recruitment, health and safety, fire policy, child protection, infection control, cleaning audits, training of staff and staff induction.”

THE INSPECTION DAY

“The inspection team did speak to all members of our staff about the same subjects at different times to try and obtain the same answers – she did feed back that we were all singing from the same hymn sheet.”

THE INSPECTION DAY

- ▶ What did they want to see?

“The lead inspector looked at the staff files, minutes of meetings, training, policies and protocols.”

“All the noticeboards were checked to make sure they had everything on there that should be, such as: insurance notes, patients rights and responsibilities, complaints procedures, CQC posters, patient participation group information, chaperone poster, fire evacuation procedure.”

THE INSPECTION DAY

“As we own the building the inspector looked at all the rooms including the cellar, she checked all the fire extinguishers, the PAT testing and the calibration of equipment.”

“We found that they are very high in expectations of patient satisfaction. We had managed to get all the pre-assessment questionnaires completed by patients, which they were very pleased about. They commented that some practices hadn’t bothered to make an attempt with these!”

THE INSPECTION DAY

“The inspectors wanted to see an electrical safety certificate and a gas safety certificate. They also indicated that we had to have a fire safety inspection.”

“We had risk assessments for some nurses who had been employed with us for over 15 years rather than CRB/DBS checks but this was not accepted.”

POSITIVE FEEDBACK OF THE DAY

“The inspectors that were assigned to us were all very approachable and friendly but very meticulous and as a practice we felt that the day had not been as traumatic as imagined.”

“The inspection team were friendly, thorough and knowledgeable”

“Altogether the experience although intense was not uncomfortable nor intimidating – I felt that we as a practice have learnt something from this.”

NEGATIVE FEEDBACK OF THE DAY

“The length of time on receiving the report was too long.”

“Our practice is an outlier and it felt like they were delving more thoroughly to find problems.”

“The inspectors said that the nurses didn’t need protected time but this added further stress to them on the day.”

A FINAL THOUGHT.

The inspectors are there to help so try not to feel intimidated by them.

BE RESPONSIVE, NOT DEFENSIVE!