



**Somerset**  
Clinical Commissioning Group

# **Primary Care Quality Report** **Quarter 4 2020/2021** **(Jan – March 2021)**

**Written: 19 May 2021**

## Incidents, PALS, Complaints trend analysis and actions (Quarter 4 2020/21)

**PALS Contacts:** There has been an increased number of patients contacting the PALS team over the quarter. The vast majority of contacts received by the CCG PALS and complaints teams related to the mass vaccination programme. This included questions on when people would be called, where they could go, how housebound patients would receive it and issues around best interest assessments.

There were a number of concerns due to patients being able to access their practice by phone. Specifically, one particular practice. There were also concerns about poor communications being sent out by this practice to patients. The primary care team and quality team are working to support the practice.

There were also a number of issues with patients registering/de-registering with practices.

One enquiry relating to the future of a practice was received.

### Performance:

Nothing new to report this Quarter

### Key Risks:

Nothing new to report this Quarter

## GP Complaints managed by NHS England in Quarter 4 2020/21

Name	Description	Outcome
2011-1281559	Complainant dissatisfied with services provided. They are unhappy with the lack of support they received and state that several doctors told them they have an addiction, leading to difficulties in obtaining medication.	An Independent clinical adviser reviewed the concerns raised and concluded that the complainant received appropriate GP care and followed current guidelines.
2011-1285433	Complainant concerned about the lack of support provided to the patient in relation to their joint pain. They were particularly concerned that a referral was not made to a specialist and were told to buy their own wrist support. Later the family also contacted surgery about the difficulty in their son changing to a different GP's patient list and were also concerned about the mental health support their son has received.	NHS England is satisfied the care and treatment the patient received has been appropriate and in line with current clinical guidelines.
2012-1298707	Complainant unhappy with the services provided to them by their medical centre relating to them being left without their regular repeat prescription and had difficulty in raising this complaint with the Practice Manager.	Medical Centre apologised for the anxiety and distress that has been caused as a result of their medication being stopped without explanation or reasoning. Their complaint will form part of doctors annual appraisal and will subsequently be discussed at a Significant Event Mtg at the practice meeting and any learning identified will be taken forward by the practice.
2101-1312941	Patient raised concerns relating to the care they received following their discharge from hospital following a Myocardial Infarction. Patient expected the Practice to contact them to arrange blood tests and to review their medication. They were also experiencing difficulty in obtaining repeat prescriptions and were unhappy about the management of a rash that had been troubling them for some time.	NHS England were happy with response from GP practice but apologised for their experiences and have provided the clinical rationale for the decisions made. NHS England determined that overall they have received appropriate GP care and treatment, however, the complaint has been partially upheld due to the delay in issuing their prescription for ramipril and timodine for which the practice have apologised.

## Concerns requiring Quality Team support

Four practices are receiving direct support in relation to:

1. Safeguarding, investigations, complaint management and risk management
2. Complaint responses
3. Phone access and communication
4. Lack of assurance

Covid-19 risk assessment identified one practice requiring further support.

The Quality and Contracting team have provided Public Health support for confirmed primary care Covid-19 cases.

Learning event around support to residential care homes during an outbreak.

Learning on best interest assessments sent to Primary Care.

## Wider Quality Team activities

- Online Quality Improvement silver training:
  - cohort 2 underway and planning to expand to cohort 3
  - GP faculty trainers supported to undertake the training
  - online bronze training now developed and tested
- Restore 2: training resources published online and roll out to PCNs and practices underway. Review of Restore 2 training support to practices underway
- PCN delivery of DES: care home groups being supported
- Primary Care Quality Improvement: resources and coaching offered
- PCN Leadership roles: work underway to develop universal Somerset offer. Sourcing leadership package for lead nurse. Coaching resources for nursing staff on offer
- Primary Care Covid-19 outbreak team: now jointly provided by Quality and Contracting teams
- Pulse oximetry roll-out: support provided
- GPN10 meetings: still taking place
- PCN Lead Nurse role: project agreed, job descriptions being finalised
- Project to develop quality and safety assurance of primary care

## Wider Quality Team activities .../continued

- CQC: meetings with new inspectors undertaken
- NHS England: regional safety meetings re-started
- **CCG/County Council:** The Quality team and Safeguarding team have developed joint process to allow local authority to report primary care concerns and incidents to the CCG for review and action

## Infection Prevention Control (IPC) Report

- Primary Care IPC Link Practitioner and Lead Nurse Meeting – January 2021
  - CCG IPC team co-hosted event with LMC Nurse Advisor and 18 Lead Practice Nurses attended. Attendees received COVID-19 IPC updates and undertaking IPC risk assessments in general practice
- The latest IPC COVID-19 guidelines and NHS England/Improvement Checklist and Monitoring Tool for the Management of COVID-19 was cascaded to practice managers

## Care Quality Commission (CQC) update Quarter 4 2020/21

**CQC visits/reports:** No CQC visits or results published for Somerset.

**Overview of CQC ratings:** No change in Somerset - no practices are rated as 'Inadequate'; three are rated as 'Requires Improvement'; one is rated as 'Outstanding'. All other practices are rated as 'Good'.

**Update from CQC:** new regulatory process restarted in November 2020 now cancelled. No further regulatory business for the foreseeable future. The CCG will provide the CQC with any key concerns. The CCG is waiting to hear about the proposed PCR of Somerset LD.

### Performance:

No change in Performance on CQC ratings due to suspension of CQC reviews during Covid-19 pandemic

### Risk:

No CQC related risks on the risk register at present

## Quality concerns with the Vasectomy Service

Since 2014, our model of assurance for this service has been via NHS England, on the basis that they were commissioning minor surgery and were provided assurance through that route. However, this assurance route is no longer a valid model as the CCG is now responsible for seeking assurance for minor surgery as well.

The governance processes relating to vasectomy services are therefore being reviewed to ensure they are fit for purpose and consideration is being given to adopting a new assurance model. This would be either:

- a GP with Extended Role (GPwER) accreditation model
- building a standalone light touch assurance programme and undertake ad-hoc accreditation at a single point

The proposal to approve a GPwER model was discussed at the Primary Care Operational Group and the quality team have requested additional time to review the details of the proposal before the contracting team engage suppliers.



# Risk/ Quality Surveillance

- The issue of demand on primary care services was raised at the Quality Surveillance group held on 26 May 2021
- There was system wide discussion and data was presented by Som FT and YDH which shows increased demand in emergency departments and on community nursing teams
- A coordinated action plan will be developed which will include looking at the impacts of virtual outpatient appointments and data collection