**Request for Documents prior to and during your inspection**

**Please ensure you send to the inspector prior to our inspection:**

1. Statement of Purpose (SoP)
2. Action plan following results / findings from any patient survey carried out within the last 12 months
3. Summary of complaints for last 12 months, along with actions taken as a consequence and how learning was implemented
4. Summary of SEAs (serious adverse events or similar untoward incidents, ‘never events’ etc) within the last 12 months, action taken and how learning was implemented
5. Evidence that the quality of treatment and services have been monitored within the last 12 months eg by clinical audits (please send evidence of 2 completed clinical audit cycles and a summary of any other audits. Please include evidence of actions / outcomes taken as a result of these)
6. Recruitment policies and procedures (e.g. how are staff recruited and vetted before commencing work, arrangements for EEA doctors and foreign doctors and what induction do they receive)
7. Staff list and establishment structure (Lead roles for GPs & responsibilities of all staff, special interests of staff i.e. safeguarding/infection control/dignity champion). This must include number of current staff by role and WTE (whole time equivalent). Please ensure you include:
* Number of GPs in total; how many GPs are partners; & how many of each gender.
* Number of GP sessions per week (on average); & how many WTEs this provides.
* Number of practice nurses; & how many WTEs their total working hours provide.
* Number of practice nurses who are non-medical prescribers; & total number of sessions they offer per week (on average).
* Number of Health Care Assistants/phlebotomists employed; & how many WTEs their total working hours provide.
1. Staff training matrix (please also include their professional qualifications and any training provided in the last 3 years) ie training record for all current staff.
2. Evidence and examples of the quality of care provided for the six population groups maximum 1,000 words (see list of groups in text of formal letter of notification of inspection)

**Where possible, please also send prior to our inspection:**

1. Staff rota – including use of locums

Please include typical times of Appointment sessions (eg 8.30am until 11.00am and 3.30pm until 6pm); & typically how many appointment slots in each consultation session.

1. Safeguarding policy for all patient groups & evidence of all safeguarding referrals in last 12 months; and details of children in need referrals in last 12 months
2. Practice Vision / Mission / Values statement(s) for the practice

**To help you plan for the inspection the following documents might be required during our inspection:**

1. Information pack for new Patients.
2. Copies of patient participation group meeting minutes + actions taken by practice as a result of feedback from PPG.
3. Quality auditing documentation. Could include:
* Audits of patient records.
* Suggestion box comments/thank you notes,
* Results of annual quality assurance audits/questionnaires (plus action plan created following feedback from the patients).
* Clinical audits with impact for patient care
* Significant events audit
* Complaints Books. Patient comments and Thank you notes.
* Checks made on emergency drugs and equipment (including oxygen)
* The report generated from your own QA processes.
1. Quality assurance policy
2. Copies of whistle blowing and safeguarding policies.
3. Recruitment policy.
4. MCA / Best Interest policy + Evidence of Best Interest decisions.
5. Supervision policy.
6. Harassment/bullying policy.
7. Equalities policy.
8. Whistleblowing policy.
9. Complaints Policy.
10. Accident and incident policy/procedure
11. Clinical governance policy.
12. Medical emergency policy.
13. Medicines management policy.
14. COSHH & Fire policies.
15. Chaperone policy.
16. Emergency / major incident response or business continuity plans / policy.
17. Induction plan for new staff.
18. Clinical supervision records for clinical staff & Supervision records for non-clinical staff.
19. Staff meeting records (last three meetings).
* Clinical meeting minutes
* Record of staff annual appraisals (for last 2 years).
* Evidence of GP’s revalidation.
1. Staff recruitment records for the staff on duty on inspection day.
2. Immunisation records for staff who require them.
3. Record of general cleaning undertaken or checks made by the practice on the cleaning contracted.
4. Audits of building security.
* Record of Legionella checks (for last year including certificates).
* Cleaning schedule record for the practice
* Records of daily tests and checks
* Hygiene & Infection control audits (for last 12 months).
* Maintenance record log/book.
* Fire alarm log book.
* Auditing documentation in relation to the environment and equipment, infection control etc. e.g.
* Clinical audits with impact for patient care & any action plans developed.
1. Maintenance programme. For example; electrical, heating, gas, water.
2. Environmental risk assessments, including COSHH & Fire.
3. Business development plan
4. Practice accreditation or quality awards

Please email documents to the inspector Roger Harrison at:

**roger-w.harrison@cqc.org.uk** one week before the inspection. (If possible, please use “zip” file to reduce email size and where the policies are on your website please indicate this). Where documents are too large to email please have them available with the practice manager on the day(s) of our inspection.

 RWHAug2016