



Adopted by
South West Essex PCT



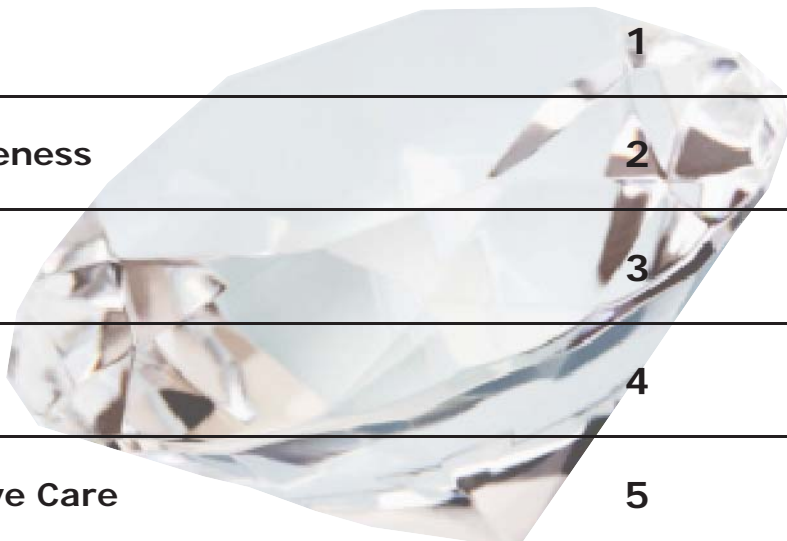
North & South Essex LMCs in association with EQUIP

Standards for better general practice

a developmental framework designed to help practices comply with standards for better health

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INTRODUCTION

The document “Standards for Better Health” produced by the Department of Health aims to move the health care system from one that is driven by targets to one in which standards are the means to deliver continuous improvement in quality.

As a consequence of this change in direction and emphasis, a number of PCTs throughout the country, including parts of Essex, are currently exploring ways of supporting the introduction of quality and performance standards to general practices.

THE FRAMEWORK

This Framework was originally produced by the LMC and PCT in Liverpool and has been modified for use in Essex by practices, PCTs and the LMCs. The Framework has been developed taking full account of the statutory requirements of the new GMS Contract, the GMC’s Good Medical Practice and the new national standards which are **mandatory** for all health care organisations including GP practices. The structure of the Framework is based on the requirements of “Standards for Better Health” and the different sections reflect each of the standards as follows:-

- ⊕ Safety
- ⊕ Clinical and Cost Effectiveness
- ⊕ Governance
- ⊕ Patient Focus
- ⊕ Accessible and Responsive Care
- ⊕ Care Environment and Amenities
- ⊕ Public Health

SUPPORT TO PRACTICES

The Framework is intended to support practices to put in place “a system of clinical governance which enables quality assurance of its services and promotes quality improvement and enhanced patient safety.”

QOF is a quality system which provides practices with financial rewards for providing high quality care in a number of clinical, organisational and patient experience domains. Clinical Governance is however much broader and this Framework encourages practices to put in place systems and processes that enable the delivery of outcomes and at the same time ensure compliance with the contractual and statutory requirements of the new GMS arrangements.

KEY BENEFITS

This document, which has been agreed by both LMCs, provides a range of benefits for all parties.

FOR PRACTICES

- ⊕ The Framework is developmental and allows practices and PCTs to performance manage the new contractual arrangements in a more supportive environment. It is acknowledged that practices may not have all components in place but this document identifies areas to be tackled.
- ⊕ PCTs will be able identify and prioritise the additional resources, facilitation and educational support required in a consistent way to enable practices to implement Development Plans agreed as part of the document.
- ⊕ Standards receive a straight yes or no answer on the basis of supporting evidence. Any serious concerns that arise about performance will be dealt with through performance management procedures that are in line with professional standards and new contract regulations.

FOR PCTS

- ⊕ All practices will be encouraged to agree Developmental Plans that enable them to achieve and improve standards as outlined in the document.
- ⊕ It enables medical practice contracts to be performance managed in line with DoH requirements.
- ⊕ Provides the ability to evidence to the Healthcare Commission the progress being made towards achieving the developmental standards referred to in "Standards for Better Health."

FOR LMCS

- ⊕ Demonstrates a continuing commitment to work constructively with PCTs in supporting practices to provide a range of high quality, accessible services for patients.

If in doubt about the purpose of this document contact the LMC office or your local representative.



Domain 1 - Safety

KEY: CF = Competency Framework for practice management (Annex C nGMS Contract)
 C & SR = Contractual and statutory requirements (Annex B nGMS Contract)
 QOF = Quality and Outcomes Framework indicators (nGMS Contract)

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
1	CF QOF Ed 7 & Ed 10	SIGNIFICANT EVENT AUDIT / REPORTING	<p>a. There is an effective policy and pathway for identification and reporting of significant events.</p> <p>b. Staff are trained and regularly participate in SEA systems.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Folder of reported events and agreed actions</p> <p>Notes of practice meetings</p>

Domain 1 - Safety

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
2	CF C & SR QOF Mgmt 1	<p>PATIENT PROTECTION</p> <p><i>Individual healthcare professionals should be able to demonstrate that they comply with the national child protection guidance, and should provide at least one critical event analysis regarding concerns about a child's welfare if appropriate.</i></p>	<p>a. Prompt action is taken on patient safety notices, alerts and communications.</p> <p>b. There is a system for reporting incidents and near misses.</p> <p>c. The practice has a written risk assessment procedure.</p> <p>d. Staff participate in Risk Management Training.</p> <p>e. There is an effective child and vulnerable adult protection procedure.</p> <p>f. The practice participates in the annual EQUIP Child Protection audit</p> <p>g. Staff are trained in Child Protection and Patient Protection procedures.</p> <p>h. Contact details of PCT Child Protection Advisers and social services are accessible to all staff.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Policy attached</p> <p>Examples</p> <p>Procedure</p> <p>Who / when</p> <p>SET procedure available in practice</p> <p>Submission</p> <p>Details</p> <p>Notice</p>



Domain 1 - Safety

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
3	CF C & SR QOF Mgmt 4	INFECTION CONTROL <i>The premises, equipment and arrangements for infection control and decontamination meet the minimum national standards.</i>	a. There is an effective infection control policy and system which pays due regard to risk assessment and is environmentally friendly.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Policy attached
			b. Staff follow NICE Clinical Guidelines – Infection Control – prevention of healthcare associated infection in primary and community care.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Latest infection control audit
			c. There are clear up to date procedures for the cleaning, disinfection, inspection, packaging, disposal, sterilisation, transporting and storing of reusable medical equipment and devices.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Procedure
			d. Staff are trained on the use and decontamination of equipment.	YES <input type="checkbox"/> NO <input type="checkbox"/>	When / where
4	CF QOF Mgmt 7	EQUIPMENT	a. There are equipment monitoring and maintenance schedules according to manufacturers instructions.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Schedules

Domain 1 - Safety

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
5	C & SR	MEDICINES	a. There is a Practice Medicines policy which consists of the following:	YES <input type="checkbox"/> NO <input type="checkbox"/>	Policy attached
	C& SR	<i>The practices adhere to the requirements of the Medicines Management Act for storage, prescribing, dispensing, recording and disposal of drugs including controlled drugs.</i>	1) A written up to date controlled drugs policy for the management of controlled drugs in practices that keep controlled drugs.	YES <input type="checkbox"/> NO <input type="checkbox"/>	
	C & SR	<i>Batch numbers are recorded for all vaccines administered.</i>	2) A written guideline for the safe and secure handling of medicines in practice in line with the Medicines Management Act of 1968.	YES <input type="checkbox"/> NO <input type="checkbox"/>	
	C & SR	<i>Vaccines are stored in accordance with the manufacturers' instructions.</i>	3) A written procedure for managing the drugs kept in the Doctor's bag and the upkeep of the bag.	YES <input type="checkbox"/> NO <input type="checkbox"/>	
	C & SR QOF Meds 2	<i>For vaccines and immunisations, fridges in which vaccines are stored have a maximum thermometer daily readings take place on working days</i>	4) A written policy on prescription security in the practice.	YES <input type="checkbox"/> NO <input type="checkbox"/>	
			5) A written policy for the handling administration and storage of vaccines.	YES <input type="checkbox"/> NO <input type="checkbox"/>	



Domain 1 - Safety

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
5 Cont	C & SR QOF Recs 8	<p><i>For vaccines and immunisations, staff involved in administering vaccines are trained in the recognition of anaphylaxis and able to administer appropriate first-line treatment when it occurs.</i></p> <p><i>For vaccines and immunisations, consent to immunisation, or contraindications if they exist are recorded in the records. For vaccines and immunisations, consent to immunisation, or contraindications if they exist are recorded in the records.</i></p>	<p>a. Vaccines – document following information:</p> <ul style="list-style-type: none"> » Vaccine name » Dose given » Site administered » Batch number » Expiry date <p>b. Appropriate practice staff attend CPR and anaphylaxis training.</p> <p>c. There is a up to date practice anaphylaxis shock kit.</p> <p>d. Written consent and contraindications are recorded in the Personal Child Health Records and in practice patient records.</p> <p>6) A comprehensive written practice policy on repeat prescribing</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Policy attached</p> <p>Date last checked</p>
6	C & SR	<p>MEDICAL PROTECTION</p> <p><i>All professionals working in the practice are covered by appropriate indemnity insurance.</i></p>	<p>a. Professional staff hold adequate insurance against liability arising from negligent performance of clinical services.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Renewal dates</p>

Domain 2 – Clinical and Cost Effectiveness

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
7	CF	CLINICAL EFFECTIVENESS / EVIDENCE BASED PRACTICE	<p>a. The practice collaborates with PCT Clinical Effectiveness Plans</p> <p>b. There is a process for identifying and acting upon nationally agreed best practice (NSF's and other national guidance e.g. NICE technology appraisals)</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	Submissions to EQUIP audits
8	CF	CLINICAL AUDIT	<p>a. The practice collaborates with PCT Clinical Audit Plans</p> <p>b. There is a practice system for prioritising, conducting, reporting and acting on clinical audits.</p> <p>c. Audits undertaken address issues of local concern to patients and the practice team.</p> <p>Professional Standards: GMC – Good Medical Practice Maintaining Performance: Take part in regular audit</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Audit folder</p> <p>Audit folder</p>



Domain 3 – Governance

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
9	C & SR	<p>GOVERNANCE ARRANGEMENTS</p> <p><i>All practices have in place systems of clinical governance, which enable quality assurance of its services and promote quality improvement and enhanced patient safety.</i></p> <p><i>The underpinning structures within the practice, which will assure embedding of clinical governance through a nominated clinical governance lead.</i></p>	<p>a. The practice has a named Clinical Governance Lead who will co-ordinate clinical governance activities.</p> <p>b. Regular multidisciplinary meetings are held to discuss all clinical governance issues.</p> <p>c. The practice has identified at least one example of best practice to the PCT this year.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Who?</p> <p>Minutes</p> <p>Example</p>

Domain 3 – Governance

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
10	CF QOF Ed 4	EMPLOYMENT, INDUCTION AND TRAINING	a. There is a practice induction and training programme for new staff.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Programme
	C & SR QOF Mgmt 10	<i>The practice complies with current legislation on employment rights and discrimination.</i>	b. CRB checks are undertaken for all staff according to current regulations.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Summary
	C & SR	<i>All staff have written terms and conditions of employment conforming to or exceeding the statutory minimum.</i>	c. Employees are provided with information, which conforms to Section 1 of the Employment Rights Act 1996.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Sample
			d. Staff have a written job description, contract of employment including disciplinary procedure.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Sample
			e. The practice has a complaints procedure for cases of discrimination, harassment and victimisation.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Procedure attached
			f. Staff supervision arrangements comply with relevant professional standards and guidelines.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Explanation



Domain 3 – Governance

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
11	C & SR	<p>PROFESSIONAL REGISTRATION</p> <p><i>The practice ensures that all healthcare professionals who are employed by the practice are currently registered with the relevant professional body on the appropriate part(s) of its Register(s) and that any employed general practitioner is a member of a recognised medical defence organisation and registered on a primary care performers list (or equivalent).</i></p>	<p>a. The practice ensures that the appropriate checks with statutory bodies are made before applicants take up post and during their appointment.</p> <p>Professional Standards: GMC RCGP BMA Nursing and Midwifery Council Health Professional Council</p>	YES <input type="checkbox"/> NO <input type="checkbox"/>	Registration renewal dates
12	C & SR QOF Ed 8 & 9	<p>CPD</p> <p><i>All doctors have an annual appraisal.</i></p>	<p>a. GPs participate in the national GP process (co-ordinated by PCT according to GMC guidance)</p> <p>Professional Standards: GMC Revalidation Process – Licence to practice and Revalidation Folder of Evidence</p>	YES <input type="checkbox"/> NO <input type="checkbox"/>	Dates of latest

Domain 3 – Governance

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
13	CF QOF Ed 8	PROFESSIONAL DEVELOPMENT (QOF – NURSES)	<p>a. CPD for all personnel in line with the local and national policy requirements.</p> <p>b. The practice ensures staff attend appropriate training courses as part of Personal Development Plans.</p> <p>c. Staff have access to skills update training courses.</p> <p>Professional Standards: GMC – Good Medical Practice Maintaining good medical practice – knowledge and skills up to date Royal College of General Practitioners – Portfolio of Evidence of Professional Standards for GPs</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Learning plan</p> <p>Examples</p> <p>Examples</p>



Domain 3 – Governance

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
14	CF	CLINICAL PERFORMANCE	<p>a. There is a system for the identification and remedy of poor performance and monitoring effectiveness.</p> <ul style="list-style-type: none"> • Appraisal • Confidential reporting systems • Performance Monitoring <p>Professional Standards: GMC - Good Medical Practice - Conduct or performance of colleagues GMC - fitness to practice procedures</p>	YES <input type="checkbox"/> NO <input type="checkbox"/>	Description
15	CF	ETHICS	<p>a. The practice has a system to identify staff who are not abiding by their published codes of professional practice.</p> <p>Professional Standards: GMC – Good Medical Practice - Observance of professional ethical obligations</p>	YES <input type="checkbox"/> NO <input type="checkbox"/>	

Domain 3 – Governance

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
16	CF	DISCIPLINARY & GRIEVANCE	<p>a. There is a practice disciplinary procedure and appeal system.</p> <p>Professional Standards: GPs – National Clinical Assessment Authority (NCAA)</p>	YES <input type="checkbox"/> NO <input type="checkbox"/>	Policy attached
17	CF QOF & Ed 9	PERFORMANCE REVIEW	<p>a. Staff participate in formal appraisal which results in an individual Personal Development Plan (PDP) when appropriate.</p> <p>Professional Standard: GPs – GMC Revalidation</p>	YES <input type="checkbox"/> NO <input type="checkbox"/>	Example



Domain 4 - Patient Focus

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
18	C & SR	<p>CONSENT TO TREATMENT</p> <p><i>The practice has a policy for consent to the treatment of children that conform to the current Children's Act or equivalent legislation.</i></p>	a. The practice has a policy on obtaining consent.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Policy attached
19	C & SR	<p>CONSENT TO TREATMENT</p> <p><i>For minor surgery, patients' consent to any surgical procedure including wart cauterization and joint injections is recorded.</i></p>	a. Consent is recorded in patients' records.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Audit of recent minor surgery procedures
20	C & SR	<p>PRACTICE LIST</p> <p><i>Where patients' are requesting to join the practice list, the practice does not discriminate on the ground of: race; gender; social class; age; religion; sexual orientation or appearance; disability or medical condition.</i></p>	a. The practice adheres to equalities legislation.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Practice statement
21	C & SR	<p>PATIENT INFORMATION</p> <p><i>The practice provides patients with a leaflet which is available to patients (about the practice and its services).</i></p>	<p>a. There is a practice leaflet in line with regulations.</p> <p>b. This is reviewed annually to ensure accuracy.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	Current leaflet

Domain 4 - Patient Focus

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
22	C & SR QOF Ed 6	<p>COMPLAINTS</p> <p><i>The practice has an agreed procedure for handling patients' complaints, which complies with the NHS complaints procedure and is advertised to the patients.</i></p>	<p>a. There is a practice complaint notice / leaflet</p> <p>b. Staff are trained on the complaints procedure</p> <p>c. The procedure is in accordance with NHS complaints procedure</p> <p>d. The PCT is provided with relevant information</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Example</p> <p>Dates of training</p> <p>Procedure attached</p> <p>PCT to agree required information</p>
23	C & SR	<p>HEALTH RECORDS</p> <p><i>The practice has a system to allow patients access to their records on request in accordance with current legislation.</i></p> <p>CONFIDENTIALITY</p>	<p>a. The practice has a policy on access to medical records</p> <p>b. There is an effective policy and procedure to safeguard confidentiality and ensure compliance with statute and other guidelines</p> <p>c. Confidentiality requirements are included in all staff contracts</p> <p>d. There is a practice Caldicott Guardian</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Policy attached</p> <p>Policy attached</p> <p>Example</p> <p>Who?</p>



Domain 5 - Accessible and Responsive Care

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
24	CF	CLINICS AND HEALTH PROMOTION	<p>a. Systems and services are reviewed and updated as needed</p> <p>b. The views of patients and carers are considered when making changes to treatments and services</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Recent examples</p> <p>Patient survey findings and action plan</p>
25	CF	COMMUNITY LIAISON	<p>a. Relationships with community groups and patient participation are promoted and encouraged.</p> <p>b. There is a feedback system for users/carers e.g. suggestion box</p> <p>c. There is evidence of reflective practice in response to the user/carer feedback.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Patient forum notes</p> <p>System</p> <p>Action plan</p>

Domain 6 – Care Environment and Amenities

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
26	C & SR	<p>PREMISES</p> <p><i>Premises must be suitable for the delivery of services and sufficient to meet the reasonable needs of patients and comply with the Disability Discrimination Act</i></p>	<p>a. The practice premises have passed the quality check under the nGMS contract.</p> <p>b. The practice complies with DDA</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	Premises audit
27	CF C & SR	<p>HEALTH AND SAFETY</p> <p><i>The practice meets the statutory requirement of the Health & Safety at Work Act and complies with the current approved code of practice in management of Health and Safety at work regulations.</i></p>	<p>a. Health and Safety Policy satisfies statutory requirements.</p> <p>b. Staff participate in Health and Safety training.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Policy attached</p> <p>Dates and names</p>
28	CF	<p>FIRE SAFETY</p>	<p>a. There is an effective fire safety policy and procedures in place.</p> <p>b. The practice complies with statutory requirements and maintenance of detection/fire fighting equipment.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Fire Officer identified</p> <p>Date of latest equipment checks and fire drills</p>



Domain 6 – Care Environment and Amenities

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
29	CF	FACILITIES MANAGEMENT AND MAINTENANCE	<p>a. Cleaning and maintenance systems are in place, which meet the national standards.</p> <p>b. There are systems for the proper management of the prevention, segregation, handling, transport and disposal of waste.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	Agreement with External Contractors
30	CF	SECURITY	<p>a. The practice has security systems and policies in place.</p> <p>b. There is a zero tolerance policy regarding violence to staff.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	
31	CF	DISASTER PLANNING	<p>a. There is a comprehensive plan in place for business recovery and the continuity of service in the event of an emergency.</p> <p>b. The practice has received advice/training from the PCT on planning for emergency situations.</p> <p>c. The practice has been made aware of the resources available for managing responses to emergency situations and how to access these by the PCT.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	Business Continuity Plan

Domain 7 – Public Health

REF	KEY	STATUTORY OBLIGATIONS	EVIDENCE IN PRACTICE		EVIDENCE/PCT SUPPORT
32	CF	CLINICS AND HEALTH PROMOTION	a. Practice plans include programmes to improve and reduce health inequalities in response to NSF's and national plans.	YES <input type="checkbox"/> NO <input type="checkbox"/>	
33	CF	COMMUNITY	a. Relationships with community groups are encouraged and promoted.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Description of local links
34	CF	SOCIAL SERVICES	a. The practice has and effective relationship and communications with social care agencies.	YES <input type="checkbox"/> NO <input type="checkbox"/>	Description and assessment of quality



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