

# Dr Webb and Partners

## Inspection report

Ilkeston Health Centre  
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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

## Ratings

### Overall rating for this location

Requires improvement



Are services safe?

Requires improvement



Are services effective?

Good



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Requires improvement



# Overall summary

We carried out an announced comprehensive inspection at Dr Webb and Partners on 11 February 2019 as part of our inspection programme.

We based our judgement of the quality of care at this service on a combination of:

- what we found when we inspected
- information from our ongoing monitoring of data about services and
- information from the provider, patients, the public and other organisations.

**We have rated this practice as requires improvement overall and good for all population groups.**

We rated the practice as **requires improvement** for providing safe services because:

- The practice did not have effective systems in place for the safe management of health and safety including an active process to identify and control areas of risk.
- Evidence of safe staff recruitment procedures required strengthening. Annual checks of professional registrations should be undertaken and documented.
- The outcomes of safety alerts required clear evidence of the follow-up actions taken to keep patients safe.

We rated the practice as **requires improvement** for providing well-led services because:

- The practice's governance arrangements required improvement to ensure that there was clarity in terms of responsibilities for site management, with the provider maintaining evidence to demonstrate their ongoing compliance with regulations.

The overall rating for this practice was **requires improvement** due to concerns in providing safe and well-led services. However, the population groups were rated as **good**.

We rated the practice as **good** for providing effective, caring and responsive services because:

- Patients received effective care and treatment that met their needs. The practice could demonstrate good patient outcomes were delivered, for example, by their achievement in the Quality and Outcomes Framework.
- Staff treated patients with kindness and respect and involved them in decisions about their care. The practice ethos was to provide an accessible and approachable patient-orientated service.
- Patients could access care and treatment in a timely way. The practice organised and delivered services to meet their patients' needs.

The areas where the provider **must** make improvements are:

- Ensure that care and treatment is provided in a safe way (Please see the specific details on action required at the end of this report).
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care. (Please see the specific details on action required at the end of this report).

In addition, the provider **should**:

- Review the need to record dates when medicines checks are undertaken to review stock levels and expiry dates. Ensure that all prescription stationery is maintained securely.
- Implement the staff induction checklist for new starters.
- Continue to collate the evidence of staff immunisations in line with Public Health England guidance.
- Ensure staff training records are updated including any evidence to support attendance at external training events.

**Details of our findings and the evidence supporting our ratings are set out in the evidence tables.**

**Professor Steve Field** CBE FRCP FFPH FRCGP  
Chief Inspector of General Practice

## Population group ratings

<b>Older people</b>	<b>Good</b>	
<b>People with long-term conditions</b>	<b>Good</b>	
<b>Families, children and young people</b>	<b>Good</b>	
<b>Working age people (including those recently retired and students)</b>	<b>Good</b>	
<b>People whose circumstances may make them vulnerable</b>	<b>Good</b>	
<b>People experiencing poor mental health (including people with dementia)</b>	<b>Good</b>	

## Our inspection team

Our inspection team consisted of by a CQC lead inspector and a GP specialist adviser.

## Background to Dr Webb and Partners

Dr Webb and partners is registered to provide regulated activities with the CQC, with the provider being a partnership consisting of two female GPs.

The practice is registered with the CQC to carry out the following regulated activities - diagnostic and screening procedures, family planning, surgical procedures, maternity and midwifery services and treatment of disease, disorder or injury.

Dr Webb and partners received a previous CQC inspection in January 2015. At that inspection, it received a rating of good overall. The full comprehensive report (published April 2015) for this inspection can be found by selecting the 'all reports' link for Dr Webb and partners on our website at

Dr Webb and partners is situated in the town of Ilkeston in Derbyshire, and is situated within a health centre which hosts some community-based health services and another GP practice.

The practice has a contract with NHS Erewash Clinical Commissioning Group (CCG) which is made up of 12 general practices. The practice provides General Medical Services (GMS) and offers a range of local enhanced services.

The practice has approximately 3,500 registered patients, and the demographics show a higher than average percentage of people in the 65+ year age group. Average


life expectancy is 79 years for men and 83 years for women, comparable to the national average of 79 and 83 years respectively. The general practice profile shows that 56% of patients registered at the practice have a long-standing health condition, compared to 55% locally and 51% nationally. The practice scored four on the deprivation measurement scale; the deprivation scale goes from one to 10, with one being the most deprived. People living in more deprived areas tend to have greater need for health services. The National General Practice Profile describes the practice ethnicity as being 98.2% white, 0.7% Asian, 0.2% black, and 0.8% mixed and 0.1% other non-white ethnicities.

In addition to the two GP partners, there is a male salaried GP working at the practice.

The nursing team consists of a nurse practitioner and a practice nurse, supported by a healthcare assistant (a receptionist works one session each week as a phlebotomist).


The non-clinical team is led by a practice manager and a business manager. The practice employs a team of six receptionists and two medical secretaries.

Medical and nursing students undertake placements at the practice.



The practice is part of the Erewash Place Alliance and one of the member practices of the Erewash Health Partnership - a super-partnership established in April 2018.

The practice opens from 8am until 6.30pm Monday to Friday. Patients can obtain late weekday appointments between 6pm-8pm, and weekend appointments on



Saturday and Sunday mornings and bank holidays, via a local extended access to GP services scheme. These appointments are available at either Ilkeston Community Hospital or Long Eaton Health Centre.

The surgery closes one afternoon on most months for staff training. When the practice is closed, out-of-hours cover for emergencies is provided by Derbyshire Health United (DHU). Patients also have access to a local minor injuries unit.

This section is primarily information for the provider

## Requirement notices

### Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment  The practice did not have effective systems in place for the safe management of health and safety including an active process to identify and control areas of risk. Evidence of safe staff recruitment procedures required strengthening. Annual checks of professional registrations should be undertaken and documented. The outcomes of safety alerts required clear evidence of the follow-up actions taken to keep patients safe.
Regulated activity	Regulation
Diagnostic and screening procedures Family planning services Maternity and midwifery services Surgical procedures Treatment of disease, disorder or injury	Regulation 17 HSCA (RA) Regulations 2014 Good governance  The practice's governance arrangements required improvement to ensure that there was clarity in terms of responsibilities for site management, with the provider maintaining evidence to demonstrate their ongoing compliance with regulations.