

# Whitmore Reans Health Practice

## Quality Report

Whitmore Reans Health Practice  
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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 service

Good



Are services well-led?

Good



# Summary of findings

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## Letter from the Chief Inspector of General Practice

We previously carried out an announced comprehensive inspection at Whitmore Reans Health Practice on 10 October 2016 as part of our regulatory functions. The service was rated as requires improvement overall. The practice was rated as requires improvement for providing safe and well led services. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Whitmore Reans Health Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

An announced focused inspection at Whitmore Reans Health Practice was carried out on 7 August 2017. We found improvements had been made and the overall rating for the service was good with requires improvement in providing well led services. You can read the follow up inspection report from our last comprehensive inspection, by selecting the 'all reports' link for Whitmore Reans Health Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

The registered persons had not ensured there was proper and safe management of medicines. In particular:

- Effective systems were not embedded to demonstrate that all medicine and device safety alerts were appropriately managed.
- Policies and procedures did not contain information that was specific to the operation of the practice.
- Systems were not in place to monitor trends identified in significant events.

This inspection was an announced focused inspection carried out on 27 February 2018 to confirm that the practice had carried out their plan to meet the legal requirements in relation to the breaches in regulations that we identified at our previous inspection on 7 August 2017.

Overall the practice is now rated as **Good**.

Our key findings were as follows:

- Effective systems were in place to demonstrate that all medicine safety and device alerts were appropriately managed.
- Policies and procedures had been reviewed to ensure that they contained information that was specific to the operation of the practice. It was not evident that clinical staff were involved in the reviews to ensure the policies and procedures reflected current clinical guidance where appropriate.
- Systems had been put in place to monitor and act on trends identified in significant events.

The areas where the provider **should** make improvements:

- Continue to update practice policies and procedures with the support of clinical staff where appropriate.

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

# Summary of findings

## The six population groups and what we found

We always inspect the quality of care for these six population groups.

<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> 

# Whitmore Reans Health Practice

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection team was led by a Care Quality Commission (CQC) Lead Inspector.

## Background to Whitmore Reans Health Practice

Whitmore Reans Health Practice is registered to provide medical services over three sites within the Wolverhampton area. The main practice is based at Whitmore Reans Health Centre a purpose built health centre. The branches are located at, Pendeford Health Centre and Ednam Road Surgery. For this inspection a visit was made to the main practice.

The practice has a General Medical Services contract with NHS England to provide medical services to approximately 13,170 patients over the three sites. It provides Directed Enhanced Services, such as childhood vaccinations and immunisations and extended hours. The practice and branches are located in one of the most deprived areas of Wolverhampton. People living in more deprived areas tend to have a greater need for health services. The practice has a higher than average population of patients from South East Asia, the Middle East and East Europe.

The practice team consists of two GP partners and one salaried GP, two male and one female. All the GPs each work nine to ten sessions per week. The GPs are currently supported by two advanced nurse practitioners, three

practice nurses and a healthcare assistant. Clinical staff are supported by three practice managers, a property manager and 19 administration / receptionist staff. In total there are 32 staff employed either full or part time hours to meet the needs of patients across the three sites. The practice has four long term locum GPs who work on a sessional basis to support the clinicians and meet the needs of patients at the practice.

The main practice and branches are open between the following times:

- Whitmore Reans Health Centre – Main Practice  
Open between 8.30am and 1.30pm Monday to Friday, Monday 3pm to 7.30pm, Tuesday 3pm to 7pm and Wednesday to Friday from 3pm to 6.30pm.
- Pendeford Health Centre – Branch Practice  
Open Monday to Friday from 8.30am to 1pm and 2pm to 6pm on Monday, Tuesday, Wednesday and Friday. The practice is closed on Thursday afternoon.
- Ednam Road – Branch Practice  
Open between 8.30am and 6.30pm on Monday, Tuesday, Thursday and Friday and 8.30am to 7.30pm on Wednesday.

This practice does not provide an out-of-hours service to its patients but has alternative arrangements for patients to be seen when the practice is closed. Patients are directed to the out of hours service provided by Vocare via the NHS 111 service.

For further information please visit the practice website at [www.drviandpartners.nhs.uk](http://www.drviandpartners.nhs.uk)

# Are services well-led?

Good 

(for example, are they well-managed and do senior leaders listen, learn and take appropriate action)

## Our findings

**At our previous inspection on 7 August 2017, we rated the practice as requires improvement for providing well led services. This was because:**

- The registered persons had not established effective systems and processes to ensure good governance in accordance with the fundamental standards of care. In particular:
  - Effective systems were not embedded to demonstrate that all medicine safety and device alerts were appropriately managed.
  - Policies and procedures did not contain information that was specific to the operation of the practice.
  - Systems were not in place to monitor trends identified in significant events.

**These arrangements had improved when we undertook a follow up inspection on 27 February 2018. The practice is now rated as good for providing well led services.**

### Governance arrangements

At this inspection we saw improvements in the governance arrangements within the practice.

- At the inspection in August 2017 we found that practice policies and procedures had been implemented and were available to all staff. These were updated however the practice used a quality assurance tool package and we saw that the policies were not all written to ensure they were specific to the operation of the practice. At this inspection we saw that policies and procedures had been reviewed by the practice managers. These had been implemented and established as proper policies and procedures and the practice management team had assured themselves that they were operating as

intended. We found that it was not evident that clinical input was sought to confirm the content of the policies and procedures where appropriate. Policies and procedures were also not signed off by the lead GP partner as indicated in the process to be followed. We discussed this with the management team who assured us that this would be acted on.

### Managing Risks and Issues

- At the previous inspection in August 2017 we found that a system which included a lead person had been put in place to manage all safety alerts. However we found that although the system had been reviewed the arrangements were not fully effective to provide assurances that all medicine and devices safety alerts were received into the practice. At this inspection we found that the practice leaders had oversight of national and local safety alerts. A folder containing recent safety alerts was available. This showed that there was a system for receiving and acting on safety alerts. One of the advanced practice nurses was responsible for disseminating safety alerts and there were systems in place to ensure they were acted on. The lead GP partner had oversight of Medicines and Healthcare products Regulatory Authority (MHRA) alerts. Details of the action taken was recorded and where no action was required this was also documented. The practice acted on and learned from external safety events as well as patient and medicine safety alerts.
- There was a system for recording and acting on significant events and incidents. Staff understood their duty to raise concerns and report incidents and near misses and felt supported by the management team to do so.
- At this inspection we found that there were adequate systems for reviewing and investigating when things went wrong. The practice identified themes and took action to improve safety in the practice.