

# Dr Nicola Whitehouse

## Quality Report

199 Tettenhall Road  
Wolverhampton  
WV6 0DD  
Tel: 01902 575123  
Website: [www.mysurgerywebsite.co.uk](http://www.mysurgerywebsite.co.uk)

Date of inspection visit: 17 January 2018  
Date of publication: This is auto-populated when the report is published

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 safe?

Good 

# Summary of findings

## Contents

### Summary of this inspection

Overall summary

Page

2

### Detailed findings from this inspection

Our inspection team

4

Background to Dr Nicola Whitehouse

4

Why we carried out this inspection

4

Detailed findings

6

## Overall summary

### Letter from the Chief Inspector of General Practice

We previously carried out an announced comprehensive inspection at Dr Nicola Whitehouse on 22 August 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 Dr Nicola Whitehouse on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

An announced focused inspection at Dr Nicola Whitehouse was carried out on 20 September 2017. We found improvements had been made and the overall rating for the service was good with requires improvement in providing safe services. You can read the follow up inspection report from our last comprehensive inspection, by selecting the 'all reports' link for Dr Nicola Whitehouse on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was an announced focused inspection carried out on 17 January 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 20 September 2017.

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

- The results of all blood tests were not routinely obtained before giving patients' a repeat prescription for high risk medicines.
- Guidance for staff on whether any uncollected prescriptions should be referred to the GP before they were destroyed was not in place.
- An effective system was not in place to ensure that medicine reviews were completed for all patients on repeat prescriptions.
- There was a lack of clarity on the process followed to review the medicines of patients with long term conditions at the time of their annual clinical review.

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

Our key findings were as follows:

- Effective arrangements were in place to ensure the results of blood tests were obtained for all patients prescribed high risk medicines before giving patients' a repeat prescription.
- There was guidance for staff on whether any uncollected prescriptions should be referred to the GP before they were destroyed.
- Effective systems were in place to ensure that medicine reviews were completed for all patients on repeat prescriptions.
- The process for reviewing the medicines of patients with long term conditions at the time of their annual clinical review had been updated to ensure this was carried out by the GP.

# Summary of findings

**Professor Steve Field (CBE FRCP FFPH FRCGP)**

Chief Inspector of General Practice

# Dr Nicola Whitehouse

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection team was led by a Care Quality Commission (CQC) Lead Inspector with the support of a GP specialist advisor.

## Background to Dr Nicola Whitehouse

Dr Nicola Whitehouse is registered with the Care Quality Commission (CQC) as an individual GP practice. The practice is located in Wolverhampton and has good transport links for patients travelling by public transport. Parking is available at the rear of the practice. The practice is a single storey building and although the corridors are narrow the practice is accessible to patients with mobility difficulties and patients who use a wheelchair.

The practice team consists of one female GP who works full time, nine to 10 sessions per week. The GP is currently supported by a practice nurse. Clinical staff are supported by a practice manager and four administration / receptionist staff. In total there are eight staff employed either full or part time hours to meet the needs of patients. The practice also uses the same GP locums at times of absence to support the clinicians and meet the needs of patients at the practice.

The practice has a General Medical Services contract with NHS England to provide medical services to approximately 2,464 patients. It provides Directed Enhanced Services, such as childhood vaccinations and immunisations and the

care of patients with a learning disability. The practice is 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 is open Monday from 8.30am to 7.45pm, Tuesday, Wednesday and Friday, 8am to 6.30pm and Thursday 8am to 2.30pm. Appointments times for patients vary for the GP and practice nurse and include both morning and afternoon clinic sessions. Appointments with the GP are available Monday to Friday 9.30am to 12.30pm, Tuesday 4pm to 5pm, Wednesday 1pm to 3pm and Friday 3pm to 5pm. Appointments with the practice nurse are Monday 2.45pm to 7.45pm and Tuesday and Wednesday 9am to 2pm. The 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 Wolverhampton Doctors on Call Limited when the practice is closed on Thursday afternoon. At all other times when the practice is closed, patients are directed to the out of hours service Vocare via the NHS 111 service.

## Why we carried out this inspection

We previously undertook a comprehensive inspection of Dr Nicola Whitehouse on 22 August 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as requires improvement overall. The practice was rated as requires improvement for providing safe and well led services. The full comprehensive report following the inspection on 22 August 2016 can be found by selecting the 'all reports' link for Dr Nicola Whitehouse on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

## Detailed findings

An announced focused inspection at Dr Nicola Whitehouse was carried out on 20 September 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. We found improvements had been made and the overall rating for the service was good with

requires improvement in providing safe services. You can read the follow up inspection report from our last comprehensive inspection, by selecting the 'all reports' link for Dr Nicola Whitehouse on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

# Are services safe?

## Our findings

**At our previous inspection on 20 September 2017, we rated the practice as requires improvement for providing safe services. This was because:**

- The registered persons had not ensured there was proper and safe management of medicines. In particular:
  - The results of all blood tests were not routinely obtained before giving patients' a repeat prescription for high risk medicines.
  - Guidance for staff on whether any uncollected prescriptions should be referred to the GP before they were destroyed was not in place.
  - An effective system was not in place to ensure that medicine reviews were completed for all patients on repeat prescriptions.
  - There was a lack of clarity on the process followed to review the medicines of patients with long term conditions at the time of their annual clinical review.

**These arrangements had significantly improved when we undertook a follow up inspection on 17 January 2018. The practice is now rated as good for providing safe services.**

### Safety systems and processes

- At the inspection in September 2017 we found that the practice had established links with relevant community professionals to assess and manage the care of patients with a learning disability. However reviews had not been completed. At this inspection we found that the practice maintained a register of 12 patients with a learning disability. Records showed that five patients had received a health review with the support of the community learning disability nurses. Appointments had been made for the remaining seven patients.
- The practice had ensured that systems were in place for the ongoing monitoring of significant events and checks were made to ensure that any improvements made were appropriate. We saw evidence that lessons were shared and appropriate action was taken to maintain the safety of patients. The practice manager and GP received medicine and safety alerts and these were appropriately monitored.

### Safe and appropriate use of medicines

We found at the inspection in September 2017 that the arrangements for managing medicines in the practice did not always keep patients safe. At this inspection appropriate improvements had been made for example protocols had been developed and implemented to ensure that all medicine practices kept patients safe.

- At the last inspection the practice did not have systems in place for the safe management of all high risk medicines. We found at this inspection that improvements had been made to ensure all patients prescribed high risk medicines had been identified and their treatment effectively managed. We found there were shared care agreements in place with a local hospital for some patients. The GP had put effective systems in place to ensure the results of all blood tests carried out at the hospital were received and reviewed before giving patients' a repeat prescription. At this inspection we looked at examples of the practice performance with the management of high risk medicines. We saw that patients prescribed a medicine used to treat rheumatoid arthritis all had up to date tests completed before they were issued repeat prescriptions. At the last inspection the practice was prescribing a higher dose of this medicine, 10mg and not 2.5mg as recommended by national patient safety guidance. The GP had reviewed these patients and made changes to ensure these medicines were prescribed in line with the recommended guidance.
- The practice carried out regular medicines' audits, with the support of the local pharmacist advisor, to ensure prescribing was in line with best practice guidelines for safe prescribing. Blank prescription forms and pads were securely stored and a formal system had been put in place following the last inspection to monitor their use. We saw at this inspection that this monitoring had been maintained. Prescriptions that were more than two months old were removed and disposed of and the patients' records updated and coded. The practice's repeat prescribing policy included guidance for staff to refer to the GP before they were destroyed. Checks were made to ensure un-collected prescriptions were appropriately recorded in patients' records.
- The practice had reviewed their procedures to ensure medicine reviews were completed for all patients on repeat prescriptions. The GP reviewed and made any medicine changes required for patients with long term

## Are services safe?

conditions at the time of their annual clinical review. Records of reviews completed with the date were recorded so the practice could be sure if a review had been carried out.