

# Magdalen Medical Practice

## Quality Report

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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

Are services safe?

**Good**



# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced focused inspection of Magdalen Medical Practice on 8 April 2016. This inspection was undertaken to follow up a requirement notice we issued to the provider at our previous inspection of as they had failed to comply with the law in respect of providing safe care and treatment for patients, specifically in respect of the recruitment of staff.

We undertook this focused follow up inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to this requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

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

# Summary of findings

## The five questions we ask and what we found

We always ask the following five questions of services.

### **Are services safe?**

We found that improvements had been made following our previous inspection of date 13 October 2016.

Staff recruitment checks were in place and systems had been implemented to ensure future recruitment would meet the standards required. There was a record of the immunisation status of the staff. In addition the practice had made improvements to the security of prescriptions and had reviewed its fire safety system. Clinical audits had been completed.

**Good**



# Magdalen Medical Practice

## Detailed findings

### Our inspection team

#### **Our inspection team was led by:**

Our inspection team consisted of a CQC Inspector.

## Background to Magdalen Medical Practice

Magdalen Medical Practice is a well-established GP surgery that has operated in the area for many years. It serves approximately 13,198 registered patients and has a general medical services contract with NHS Norwich Clinical Commissioning Group.

It is the biggest single site practice in Norwich and is located in an area of average deprivation. Compared with other practices nationally, it has a higher proportion of patients aged between 60 and 85 years and a lower proportion of patients aged between 5 and 19 years. The practice consists of eight GP partners, one nurse practitioner, three nurses, and three health care assistants.

A number of reception and administrative staff support them. It is a training practice involved with the training of GPs. The practice is open between 8am-1pm, and between 2pm- 6pm Monday to Friday. Appointments are available between 8am and 12noon, and between 2pm and 6pm

## Why we carried out this inspection

We undertook a focused inspection of Magdalen Medical practice on 8 April 2016. The inspection was carried out to check that improvements had been made to meet legal requirements in respect of compliance with regulation 19 Health and Social Care Act (Regulated activities) Regulation 2014, following out comprehensive inspection on 13 October 2015.

When we inspected the practice on 13 October 2015 we were concerned about the safe care and treatment of patients in respect of fit and proper persons employed. The practice could not evidence that they had completed all necessary pre-employment checks for all staff. The practice had submitted an action plan and stated that on 1 December 2015 they had made changes and were compliant.

## Are services safe?

### Our findings

The practice had completed checks to ensure that all staff had the appropriate qualification for their role and that immunisation status was recorded for staff where this was required. Disclosure and Barring Service checks had been undertaken for all staff. A system was in place to ensure that all necessary checks would be taken for any future recruitment of staff.

The practice had made improvements that ensured prescription pads and forms were stored securely and

systems were in place to monitor their use. A system had been introduced to ensure that a signature was obtained from pharmacy representatives who collected prescriptions on behalf of patients.

The practice had reviewed its fire safety systems; the practice manager had attended a fire marshal course and had conducted an evacuation of the premises on 28 January 2016.

Clinical audits had been completed to drive and monitor improvements to services to patients. The practice planned to improve this further by keeping a log of audits started to ensure that a second cycle was completed to show and monitor improvements made.