

# The Medici Medical Practice

## Inspection report

3 Windsor Street  
Luton  
Bedfordshire  
LU1 3UA  
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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

Good 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

# Overall summary

We carried out an announced comprehensive inspection at The Medici Medical Practice on 30 October 2019 as part of our inspection programme.

We decided to undertake an inspection of this service following our annual review of the information available to us. This inspection looked at the following key questions:

- Safe
- Effective
- Well-led

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 good overall and good for all population groups, except working age people (including those recently retired and students) which is rated as requires improvement.**

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

- The systems in place for the appropriate and safe use of medicine were not always sufficient or followed. For example,
  - A record was not kept of blank prescriptions held by the practice.
  - Some of the patient group directions (PGDs) had not been authorised.
  - Some patients who were prescribed high risk medicines did not have appropriate blood monitoring.
  - Some recommended emergency medicines were not held in the practice and there was no risk assessment in place to mitigate this.
- We were informed that a legionella risk assessment had been completed by the landlord of the building. The practice did not have oversight of the assessment.
- Information was not readily available in the consultation and treatment rooms to direct staff on immediate actions to take in the event of a needle stick injury.

We rated the practice as **good** for providing effective services because:

- Patients received effective care and treatment that met their needs.
- The practice had taken part in national initiatives to improve patient care. Single cycle audits had been undertaken. The second cycles had not yet been completed.
- Quality and Outcomes Framework (QOF) data showed the practice was performing comparably with others locally. However, exception reporting was high in some areas.
- The practice's uptake for cervical screening and baby immunisations was below national targets. However, measures had been put in place to encourage increased uptake in these areas.

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

- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- The practice organised and delivered services to meet patients' needs. Patients could access care and treatment in a timely way.
- The practice used health care professionals other than GPs to meet the needs of their patients.
- Staff reported they were supported by the GP partners and managers in the practice.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

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

Ensure care and treatment is provided in a safe way to patients.

(Please see the specific details on action required at the end of this report).

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

- Assure themselves that the legionella risk assessment has been completed by the landlord and any mitigating actions are completed.
- Provide readily available information to direct staff on immediate actions to take in the event of a needlestick injury.
- Review exception reporting processes to ensure appropriate measures have been taken to review patients.

# Overall summary

- Continue to encourage the uptake of cervical screening and baby immunisations.
- Complete the second cycle of audits undertaken to demonstrate quality improvements.

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

**Dr Rosie Benneyworth** BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

## Population group ratings

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

## Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a GP specialist advisor and a practice nurse specialist advisor.

## Background to The Medici Medical Practice

The Medici Medical Practice provides a range of primary medical services to the residents of Luton from its location of 3 Windsor Street, Luton, Bedfordshire, LU1 3UA.

The provider is registered with CQC to deliver the Regulated Activities; diagnostic and screening procedures, family planning, maternity and midwifery services, surgical procedures and treatment of disease, disorder or injury.

The Medici Medical Practice is situated within the Luton Clinical Commissioning Group (CCG) and provides services to approximately 15,000 patients under the terms of a general medical services (GMS) contract. A GMS contract is a nationally agreed contract between general practices and NHS England for delivering general medical services to local communities.

The practice has three female GP partners and a female salaried GP. The clinical team also consists of a nurse practitioner, a minor illness nurse, two practice nurses, two physicians associates, a paramedic, a pharmacist and two health care assistants. There is a team of reception and administrative staff all led by a practice manager.

The Medici Medical Practice is a training practice which provides support and mentorship to doctors training to be GPs.

The practice population is of mixed ethnic origin with an average age range. Information published by Public Health England, rates the level of deprivation within the practice population group as three, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest.

The practice is open from 8am to 6.30pm Monday to Friday.

When the practice is closed out of hours services are provided by Herts Urgent Care and can be accessed via the NHS 111 service.

Routine appointments with a GP, practice nurse or health care assistant can also be booked through the practice for the Luton Extended Hours Service. This service operates on Monday to Friday evenings from 6pm to 9pm and on Saturdays and Sundays from 8.30am to 2.30pm.

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	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p><b>How the regulation was not being met:</b></p> <p>The systems in place for the appropriate and safe use of medicine were not always sufficient or followed.</p> <p>In particular we found:</p> <ul style="list-style-type: none"><li>• There was no log in place to record the blank prescriptions held by the practice and to track their use in the practice.</li><li>• Some of the patient group directions (PGDs) had not been authorised. There was no PGD available for the administration of the human papilloma virus (HPV) vaccination.</li><li>• The process for monitoring patients' health in relation to the use of medicines including high risk medicines was in place but not always effective. For example, we reviewed the records of:<ul style="list-style-type: none"><li>▪ nine patients who had been prescribed warfarin and found two of these did not have appropriate blood monitoring.</li><li>▪ five patients who had been prescribed azathioprine and found one did not have appropriate blood monitoring</li><li>▪ four patients who had been prescribed lithium and found one did not have appropriate blood monitoring</li><li>▪ seven patients who had been prescribed methotrexate and found one did not have appropriate blood monitoring.</li></ul></li><li>• Some recommended emergency medicines (anti-sickness medicines, dexamethasone, diuretics and glucagon) were not held in the practice and there was no risk assessment in place to mitigate this.</li></ul> <p>This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>