

Kenton Clinic

Inspection report

533a Kenton Road
Kenton
Harrow
Middlesex
HA3 0UQ
Tel: 020 8204 2255

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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 Kenton Clinic on 12 July 2019 as part of our inspection programme.

We decided to undertake an inspection of this service following whistle blowing concerns we received.

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, with a rating of requires improvement for providing safe services.

We found that:

- The practice generally provided care in a way that kept patients safe and protected them from avoidable harm. Although, we did identify some shortfalls in the provision of safe care.
- Patients received effective care and treatment that met their needs.
- 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 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 for patients.

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

- Review safeguarding training for staff to ensure it is in line with intercollegiate guidance (updated January 2019).
- Implement a system to ensure clinicians deliver care and treatment in line with current legislation, standards and evidence-based guidance.
- Develop quality improvement activity including clinical audit.
- Continue to improve national GP survey results to bring in line with local and national averages.
- Continue to develop the practice website.

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)	Good	
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, a second CQC inspector who was shadowing the inspection and a practice nurse specialist advisor.

Background to Kenton Clinic

Kenton Clinic is located at 533A Kenton Road, Harrow, Middlesex, HA3 0UQ. The surgery has good transport links and there is a pharmacy located nearby.

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

Kenton Clinic is situated within the Harrow Clinical Commissioning Group (CCG) and provides services to 3,400 patients under the terms of a general medical services (GMS) contract. This is a contract between general practices and NHS England for delivering general medical services and is the commonest form of GP contract.

The provider is partnership of a male and a female GP who registered with the CQC in April 2013. The practice employed a practice manager, practice nurse, healthcare assistant and several administration staff. The practice is currently part of a wider network of GP practices.

There are a high number of patients between 15 and 44 years and a smaller number over 65 years of age. The National General Practice Profile states that 56% of the practice population is from an Asian background, 30% from a White background with a further 14% of the population originating from black, mixed or other non-white ethnic groups. Information published by Public Health England, rates the level of deprivation within the practice population group as seven, on a scale of one to ten. Level one represents the highest levels of deprivation and level ten the lowest. Male life expectancy is 82 years compared to the national average of 79 years. Female life expectancy is 87 years compared to the national average of 83 years.

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 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>Care and treatment must be provided in a safe way for service users</p> <p>How the regulation was not being met:</p> <p>The provider had failed to ensure the proper and safe management of medicines;</p> <ul style="list-style-type: none">• The provider did not have effective arrangements in place to ensure the health care assistant administered vitamin B12 injections with the authority of Patient Specific Directions from the prescriber. <p>The provider had failed to ensure the equipment used by the service provider for providing care and treatment to a service user is safe for such use and used in a safe way;</p> <ul style="list-style-type: none">• The provider could not demonstrate that medical oxygen and the defibrillator were regularly checked to ensure they were fit for use. <p>The provider had failed in assessing the risk of, and preventing, detecting and controlling the spread of, infections, including those that are health care associated;</p> <ul style="list-style-type: none">• The provider had not ensured clinical specimens were stored appropriately, and had not ensured that all actions from the infection prevention and control audit had been completed.• The provider had not ensured that all clinical staff knew what action to take in the event of an inoculation injury. <p>The provider had failed to ensure that persons providing care or treatment to service users have the qualifications, competence, skills and experience to do so safely;</p>

This section is primarily information for the provider

Requirement notices

- The provider had not ensured that all non-clinical staff were trained in identifying deteriorating or acutely unwell patient's suffering from potential illnesses such as sepsis.

The provider had failed to ensure learning from significant events was shared with the whole practice team.

This was in breach of Regulation 12 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.