Dr John William Keen

Inspection report

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Date of inspection visit: 5 October 2023
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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	Requires Improvement
Are services safe?	Requires Improvement
Are services effective?	Requires Improvement
Are services caring?	Good
Are services responsive to people's needs?	Good
Are services well-led?	Good

Overall summary

We carried out an announced inspection at The Bedford Park Surgery from 3-5 October 2023. Overall, the practice is rated as requires improvement.

Safe – requires improvement

Effective – requires improvement

Caring – good

Responsive – good

Well-led - good

This is the first inspection of this practice since it changed its registration with CQC on 24 November 2021. Since this date, the service has been provided by Dr John William Keen as an individual provider.

Why we carried out this inspection

We carried out this inspection in line with our inspection priorities. This inspection was a comprehensive inspection including all key questions.

How we carried out the inspection

This inspection was carried out in a way which enabled us to spend a minimum amount of time on site.

This included:

- Conducting staff interviews using video conferencing.
- Completing clinical searches on the practice's patient records system (this was with consent from the provider and in line with all data protection and information governance requirements).
- Reviewing patient records to identify issues and clarify actions taken by the provider.
- Requesting evidence from the provider.
- A short site visit.

Our findings

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 found that:

Overall summary

- The practice could not demonstrate that it had effective systems in place to identify and manage risks to patients. We found that it was not managing medicines that require ongoing monitoring in line with guidelines; there were gaps in its implementation of national patient safety alerts; inconsistency in clinical coding of chronic kidney disease and it had documented relatively few medicines reviews. The practice provided information to show it was addressing these issues after the inspection.
- The practice was effectively managing other risks, including infection prevention and control; staff training and recruitment; and readiness for medical emergencies. The practice took action to safeguard patients at risk of abuse.
- The practice was generally assessing patient needs and providing effective care for patients with longer-term conditions. However, its documented management of patients with hypothyroidism was not in line with guidelines, putting patients at risk of harm. The practice provided information to show it was addressing these issues after the inspection.
- Staff dealt with patients with kindness and respect and involved them in decisions about their care.
- Patients could access care and treatment in a timely way. The practice was performing above the local and national average on the National GP Patient Survey for indicators of access.
- The way the practice was led and managed promoted the delivery of high-quality, person-centre care.

We found a breach of regulations. The provider **must**:

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

In addition, the provider **should**:

- Engage an expert consultant to carry out the next fire risk assessment to ensure this takes account of current regulations and guidelines.
- Expand its clinical audit programme to ensure it is adhering to clinical guidelines and identify any areas for improvement.

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

Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA

Chief Inspector of Health Care

Our inspection team

Our inspection team was led by a CQC inspector who spoke with staff using video conferencing facilities and undertook a site visit. The team included a second CQC inspector who attended the site visit and a GP specialist advisor who spoke with staff using video conferencing facilities and completed clinical searches and records reviews without visiting the location.

Background to Dr John William Keen

Dr John William Keen provides GP primary medical services to approximately 4000 patients at

The Bedford Park Surgery

55 South Parade

London

W4 5LH

The practice is located within the NHS North West London Integrated Commissioning Board and is part of the Acton Primary Care Network.

The service is provided by an individual GP, Dr John William Keen. The practice employs sessional GPs who provide the clinical sessions, 2 practice nurses, a GP assistant, practice manager and receptionists. It also has attached staff including a mental health practitioner and clinical pharmacists who are funded by the primary care network.

The practice opens from 8am until 6.30pm Monday to Friday. Evening and weekend appointments are also available at local extended primary care hubs. Pre-bookable and emergency appointments are available. The practice can offer telephone or face-to-face consultations as appropriate and appointments can be booked through an 'e-consult' system, by telephone or in person. The practice is aware of patients with specific communication needs and adjusts its appointment system in these cases to ensure this remains accessible.

Patients can access an out of hours service through the NHS 111 service if they need urgent advice or treatment when the practice is closed.

The practice population is 72% white, 10% Asian, 6% black, 6% mixed and 6% other according to the most recently published data. The population experiences lower than average levels of income deprivation, falling within the 9th decile of deprivation (with lower deciles being more deprived). The population is characterised by below average proportions of young adults and people aged over 80. The practice has a higher proportion of families with babies and very young children than average. The prevalence of long-term conditions in the practice population is lower than average and attendances at A&E are also relatively low.

The practice is registered with the Care Quality Commission to provide the regulated activities of diagnostic and screening procedures; maternity and midwifery services; and treatment of disease, disorder and injury.

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 were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Maternity and midwifery services Treatment of disease, disorder or injury	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment **How the regulation was not being met:** The practice was not always providing care in a way that protected patients from avoidable harm: • the practice could not show that certain medicines requiring ongoing monitoring were being prescribed in line with guidelines; • the practice had completed relatively few documented medicines reviews; • there was a gap in the system to implement national patient safety alerts in relation to informing patients about the side effects associated with SGLT2 inhibitors; • there were inconsistencies in the way the clinicians were recording cases of chronic kidney disease; • the practice did not have a consistent approach to the management of higher risk medicines when patients were not engaging with the practice; • the practice was not managing patients with hypothyroidism in line with guidelines. This was in breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.