

Kenton Clinic

Inspection report

533a Kenton Road Kenton Harrow Middlesex HA3 0UQ Tel: 02082042256 www.kentonclinicharrow.co.uk

Date of inspection visit: 19 June 2020 Date of publication: 10/07/2020

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?	Good	
Are services effective?	Good	
Are services caring?	Good	
Are services responsive?	Good	
Are services well-led?	Good	

Overall summary

This is a focused desk top review of evidence supplied by Kenton Clinic, for areas within the key question safe. This review was completed on 01 July 2020.

Upon review of the documentation provided by the practice, we found the practice to be good in providing safe services. Overall, the practice is rated as good.

The practice was previously inspected on 12 July 2019. The inspection was a comprehensive

inspection under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (HSCA). At the inspection, the practice was rated overall as 'good'. However, within the key question safe, areas were identified as 'requires improvement', as the practice was not meeting the legislation in respect of providing safe services. The practice was issued a requirement notice under Regulation 12, Safe care and treatment. For this desk top review, the provider sent us an action plan and a range of documents which demonstrated they are now meeting the requirements of Regulation 12 Safe care and treatment. These improvements have been documented under the safe section of the report. In addition to the breaches of Regulation 12 the practice had implemented a number of 'should' actions identified at the July 2019 inspection. In response to these recommendations the practice had;

- Reviewed safeguarding children and vulnerable adult training to ensure it was in line with intercollegiate guidance (updated January 2019).
- Taken action to improve national GP patient survey results to bring in line with local and national averages.
- Initiated some quality improvement activity by carrying out clinical audit.

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

The inspection team was a CQC inspector who reviewed the documentation and evidence provided by the practice.

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 practice 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.

Are services safe?

The practice is rated as good for providing safe services. At the inspection in July 2019 we found shortfalls in the provision of safe care. The following concerns were identified which were breaches of Regulation 12 Safe care and treatment;

- The practice could not demonstrate an effective system to ensure the healthcare assistant administered vitamin injections to patients with the authority of Patient Specific Directions (PSDs) from a prescriber.
- The practice could not demonstrate that medical oxygen and the defibrillator were regularly checked to ensure they were fit for purpose.
- The practice could not demonstrate that clinical specimens were stored appropriately, and they had not ensured that all actions from an infection prevention and control audit had been completed.
- The practice had not ensured that all clinical staff knew what action to take in the event of an inoculation injury.
- The practice could not demonstrate that all non-clinical staff were trained in identifying deteriorating or acutely unwell patient's suffering from potential illnesses such a sepsis.
- The practice had failed to ensure learning from significant events was shared with the whole practice team.

For this desk top review, the provider sent us evidence to show that they had addressed the breaches of Regulation 12 Safe care and treatment;

- The Practice had raised the lack of PSDs as a significant event and a PSD policy was created for staff to follow. From July 2019 the practice ensured all medicines requiring a PSD were administered in line with the new policy. For additional assurance, the practice carried out an audit of all injections administered by the healthcare assistant from July 2018 to June 2019 without a PSD and it was found that all the injections administered were clinically appropriate with no adverse events noted.
- The practice provided evidence of a system for the recording of medical oxygen and the defibrillator in the treatment room.
- The practice had reviewed their policy for specimen collection. The practice now ensured that all specimen taken are collected on the same day by the courier. No specimens were kept overnight or stored in any refrigerators at the practice.
- Needle stick injury poster had been displayed in all clinical rooms to ensure staff knew the steps to follow in the event of a needlestick injury and actions from the most recent infection prevention and control audit had been implemented.
- All staff had been trained in recognising the signs and symptoms of Sepsis and red flag posters displayed.
- The practice provided documentation to show that significant events were being discussed in monthly practice meetings, where all staff were present. Action taken and learning from significant events had been recorded in the minutes of meeting.

Are services effective?

The practice is rated as good for providing effective services. This rating was given following the comprehensive inspection in July 2019. A copy of the full report following this inspection is available on our website:

Are services caring?

The practice is rated as good for providing caring services. This rating was given following the comprehensive inspection in July 2019. A copy of the full report following this inspection is available on our website:

Are services responsive to people's needs?

The practice is rated as good for providing responsive services. This rating was given following the comprehensive inspection in July 2019. A copy of the full report following this inspection is available on our website:

Are services well-led?

The practice is rated as good for providing well-led services. This rating was given following the comprehensive inspection in July 2019. A copy of the full report following this inspection is available on our website: