

Dr Monica Bijlani

# Brilliant Dental Limited

## Inspection Report

28 Weymouth Street  
London  
W1G 7BZ

Tel: 07802349619

Website: [www.monicadental.co.uk](http://www.monicadental.co.uk)

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## Overall summary

We undertook a follow up focused inspection of Brilliant Dental Limited on 20 December 2019. This inspection was carried out to review in detail the actions taken by the registered provider to improve the quality of care and to confirm that the practice was now meeting legal requirements.

The inspection was led by a CQC inspector who was supported by a specialist dental adviser.

We undertook a comprehensive inspection of Brilliant Dental Limited on 28 October 2019 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. We found the registered provider was not providing safe or well led care and was in breach of regulation of 12 - Safe care and treatment and Regulation 17 - Good governance under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. You can read our report of that inspection by selecting the 'all reports' link for Brilliant Dental Limited on our website [www.cqc.org.uk](http://www.cqc.org.uk).

As part of this inspection we asked:

- Is it safe?
- Is it well-led?

When one or more of the five questions are not met we require the service to make improvements.

### **Our findings were:**

#### **Are services safe?**

We found this practice was providing safe care in accordance with the relevant regulations.

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 28 October 2019.

#### **Are services well-led?**

We found this practice was providing well-led care in accordance with the relevant regulations.

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 28 October 2019.

#### **Background**

Brilliant Dental Limited is in the City of Westminster in London and provides private treatment to adults and children.

Car parking spaces, including some for blue badge holders, are available near the practice.

The dental team includes a dentist and a dental nurse. The practice has two treatment rooms, one of which incorporates a decontamination area.

The practice is owned by an individual who is the principal dentist there. They have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

# Summary of findings

During the inspection we spoke with the dentist. We looked at practice policies and procedures and other records about how the service is managed.

## **Our key findings were:**

- The provider had undertaken an audit of antibiotic medicines prescribed. However, improvements were still required to ensure this information was analysed for learning.
  - The provider had carried out an audit of patient dental care records to check that necessary information was being recorded.
  - The practice was clean and the worksurfaces in the treatment rooms and the corridor were now clutter-free.
  - The practice had replaced previously missing medication from the medical emergency kit. However, improvements were required in regard to ensuring the kit had all the recommended sizes of masks for self-inflating bags.
  - We noted that work was underway to the electricians of the practice to rectify issues identified in the unsatisfactory electrical installation condition report.
- The dentist and nurse had undertaken appropriate training including safeguarding, BLS and infection control.
  - There were appropriate recruitment procedures in place.
  - There were appropriate arrangements for the servicing of equipment used at the practice.
  - Audits had been undertaken including on Disability access, radiography and infection control.

There were areas where the provider could make improvements. They should:

- Review the practice protocols regarding audits for prescribing of antibiotic medicines taking into account the guidance provided by the Faculty of General Dental Practice.
- Take action to ensure the availability of equipment in the practice to manage medical emergencies taking into account the guidelines issued by the Resuscitation Council (UK) and the General Dental Council.

# Summary of findings

## The five questions we ask about services and what we found

We asked the following question(s).

**Are services safe?**

No action ✓

**Are services well-led?**

No action ✓

# Are services safe?

## Our findings

We found that this practice was providing safe care and was complying with the relevant regulations.

At our previous inspection on 28 October we judged the practice was not providing safe care and was not complying with the relevant regulations. We told the provider to take action as described in our requirement notice. At the inspection on 20 December 2019 we found the practice had made the following improvements to comply with the regulation(s):

- The practice had replaced missing medication from medical emergency kit. However, improvements were required in regard to ensuring the kit had all the recommended sizes of masks for self-inflating bags. We spoke to the provider about this and they told us that arrangements would be made to purchase the missing masks.

- At the last inspection we found that there was an unsatisfactory electrical installation condition report for the property the practice was located in. At this inspection we found work was underway to the electricians of the practice to rectify issues identified in the unsatisfactory electrical installation condition report. The landlord for the building the practice was located in told us a new report would be issued once the work was completed.
- We saw evidence of Hepatitis B checks that had been undertaken for the nurse.
- The practice had undertaken a sharps risk assessment.
- The X-ray units had been serviced in November 2019.
- The practice had an appropriate Control of Substances Hazardous to Health (COSHH) file.

These improvements showed the provider had taken action to comply with the regulations when we inspected on 20 December 2019.

# Are services well-led?

## Our findings

We found that this practice was providing well led care and was complying with the relevant regulations.

At our previous inspection on 28 October 2019 we judged the provider was not providing well led care and was not complying with the relevant regulations. We told the provider to take action as described in our requirement notice. At the inspection on 20 December 2019 we found the practice had made the following improvements to comply with the regulations.

- The dentist and nurse had undertaken appropriate training including safeguarding, BLS and infection control.
- There were appropriate recruitment procedures in place. This included for example recording employment history and undertaking criminal record checks.
- There were appropriate arrangements for the servicing of equipment used at the practice for example the X-ray equipment had been serviced in November 2019 and the provider kept records of when the next service was due for equipment.

- At the last inspection the dentist had not shown an understanding of the requirements to report Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) incidents. At this inspection the provider was able to explain these requirements and had an understanding of them.
- There were systems in place to check out of date medicine and materials.
- There were governance systems in place to update policies and procedures. For example, the infection control policy had been updated in November 2019.
- There was an appropriate safeguarding policy in place.
- At the previous inspection we found that audits were not being carried out. At this inspection we found audits had been undertaken including Disability access, radiography and an infection control audit that had been undertaken in October 2019.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulations when we inspected on 20 December 2019.