

Mr. Kamran Khan

Darwen Dental Care

Inspection report

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Overall summary

We undertook a follow up focused inspection of Darwen Dental Care on 22 March 2023. This inspection was carried out to review 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 advisor.

We had previously undertaken a comprehensive inspection of Darwen Dental Care on 19 October 2022 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 well-led care and was in breach of regulation 17 of 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 Darwen Dental Care on our website www.cqc.org.uk.

When 1 or more of the 5 questions are not met, we require the service to make improvements and send us an action plan. We then inspect again after a reasonable interval, focusing on the area where improvement was required.

As part of this inspection, we asked:

- Is it well-led?

Our findings were:

Are services well-led?

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

Summary of findings

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 19 October 2022.

Background

Darwen Dental Care is in Darwen, Lancashire and provides NHS dental care for children and private treatment for adults and children.

There is a small step to access the practice; there is a ground floor treatment room for people who use some types of mobility aid but is not wheelchair accessible due to the limited width of the passageway leading to this room. Car parking spaces, including dedicated parking for disabled people, are available near the practice in free to use car parks. The practice has made some adjustments to support patients with additional needs, for example, by provision of a handrail to aid those with walking difficulties.

The dental team includes the principal dentist and 2 dental nurses, 1 of whom was a trainee. The practice has 2 treatment rooms.

During the inspection we spoke with the principal dentist and lead dental nurse. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open: Monday to Thursday from 9am to 1pm, 2pm to 5.30pm and on Friday from 9am to 1pm.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services well-led?

No action



Are services well-led?

Our findings

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

At the inspection on 22 March 2023, we found the practice had made the following improvements to comply with the regulation:

- Prescription pads were stored securely, and systems and processes were in place to ensure individual prescriptions could be tracked and traced. The management of prescription pads was now in line with NHS Business Service Authority requirements.
- Improvements had been made in relation to governance of radiography; we saw that isolation switches for radiography equipment in both treatment rooms, had been relocated. This meant the equipment could be safely switched off in the event of any malfunction or emergency. We saw that there was now a named Radiation Protection Supervisor, and this information had been updated in Local Rules applicable to radiography equipment in each treatment room.
- Dental unit water lines on dental chairs were now being managed in line with manufacturer guidance; audit had been completed to ensure this was checked on a regular basis.
- The practice now had a stock of safety devices for protection of patient's airways, for example, dental dams. When we reviewed patient record card audit, we saw that use of safety devices was now being recorded in patient records, and if a patient declined use of this device, this was also recorded, along with any alternative safety devices offered to the patient.
- Practice staff now had access to the correct contact details for occupational health services, for use in the event of needlestick injury. These were prominently displayed in the decontamination area.
- All staff had completed training in managing medical emergencies and we saw certificates to confirm this.

The practice had also made further improvements:

- Cleaning and processing of dental instruments was now being scheduled to ensure this was carried out when patients were not in the treatment room.
- Antibiotic audit was now being completed; our review of this audit indicated that protocols for prescribing antibiotics were now being observed.
- Clinical record card audit was improved; we saw that an audit tool had been introduced to ensure all information required within patient records, was being recorded.

These improvements made by the provider meant that they were now working in compliance with the regulations.