

Dr Hindocha Limited

Total Dental Care - New Parks Dental Surgery

Inspection report

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Overall summary

We undertook a follow up focused inspection of Total Dental Care - New Parks Dental Surgery on 27 February 2024. 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 Total Dental Care – New Parks Dental Surgery on 10 November 2023 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 and well-led care and was in breach of regulations 12 and 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 Total Dental Care - New Parks Dental Surgery 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. We then inspect again after a reasonable interval, focusing on the areas where improvement was required.

As part of this inspection we asked:

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

Our findings were:

Are services safe?

Summary of findings

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 10 November 2023.

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 10 November 2023.

Background

Total Dental Care - New Parks Dental Surgery is in Leicester and provides NHS and private dental care and treatment for adults and children.

There is step free access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces, including dedicated parking for disabled people, are available near the practice. The practice has made reasonable adjustments to support patients with access requirements.

The dental team includes 3 dentists, 1 qualified dental nurse, 2 trainee dental nurses, a practice manager and 2 receptionists. The practice has 3 treatment rooms.

During the inspection we spoke with 2 dentists, 2 dental nurses, 2 receptionists and the practice manager. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open:

Monday to Friday from 9am to 5.30pm.

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 the inspection on 27 February 2024, we found the practice had made the following improvements to comply with the regulations:

- The provider had made improvements to the premises and equipment. At the previous inspection we found black mould present in the air conditioning unit in a treatment room. The practice had invested in new air conditioning units in 2 treatment rooms.
- We were provided with evidence of a 5 yearly electrical safety certificate.
- We were provided with evidence that the emergency lighting had been serviced.
- At the previous inspection we found the practice was not compliant with HTM0105 in relation to infection control. We found treatment areas and flooring in clinical rooms were dirty. We found at this inspection that all treatment rooms were clean and dust free. The practice had improved oversight of cleaning by implementing weekly deep cleaning of treatment rooms. Mops used to clean flooring in clinical rooms were stored correctly.
- The practice had implemented changes to waste handling protocols. We saw waste was segregated, disposed of correctly and included the practice details on clinical waste bins. Waste amalgam was disposed of correctly.
- At this inspection we saw a process in place to support safe management of prescriptions. The practice system was able to identify lost or missing prescriptions immediately.
- The provider had ensured that fire safety processes were effective and in line with Fire Safety Legislation. The practice had an external fire risk assessment completed in December 2023 and recommended actions had been completed.
- The practice had invested in a new fire detection and alarm system in January 2024. We saw evidence that regular checks of the fire alarm system and emergency lighting and fire drills were conducted.
- Procedures to reduce the possibility of legionella or other bacteria developing in water systems had improved. We noted that monthly checks of hot and cold-water temperatures, descaling of taps and flushing of dental unit water lines and low use taps were now completed. The practice had actioned all recommended actions from the external legionella risk assessment in July 2022.
- A health and safety risk assessment was completed by an external company in December 2023. We saw recommended actions had been completed.
- Staff were following procedures to ensure the practice was compliant with the Health and Safety (Sharp Instruments in Healthcare Regulations 2013). A sharps risk assessment was completed in December 2023 which accurately reflected the processes in place. The practice were transitioning to safer sharps at the time of our inspection.
- Staff had completed hands on basic life support training in November 2023 and could demonstrate how to operate lifesaving equipment.
- The practice completed an infection control audit in November 2023. We saw that this accurately reflected areas of risk and the practice had an action plan to continually improve.
- We found the systems and processes in place to ensure safe use of radiography equipment were effective for example:
- We saw evidence that the practice was registered with the Health and Safety Executive (HSE) for the use of X-ray equipment.

Are services safe?

- At the previous inspection we found the protective sheathing on an X-ray button was stripped exposing electrical wires. We saw that this had been replaced.
- Actions and recommendations from performance checks of the X-ray equipment had been actioned.

These improvements show the practice had taken sufficient action to comply with regulations when we inspected on 27 February 2024.

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 27 February 2024, we found the practice had made the following improvements to comply with the regulation(s):

- Systems and processes were more established with staff. The practice used a compliance system to improve oversight of governance systems. We saw that quality and assurance and monitoring and mitigating risk was conducted. For example, the practice had sought an external fire and health and safety risk assessment and recommended actions had been addressed.
- A timetable for completing required audits and servicing of equipment was in place.
- A disability access audit was completed in November 2023, the broken handrail found at the previous inspection had been replaced. Staff were aware of how to access translation services. The audit accurately reflected processes in place and the practice had an action plan to continually improve.
- The practice had not recruited any new employees at the time of our inspection. We saw the practice had improved oversight of recruitment. The practice compliance system was used to upload required pre-employment checks prior to staff commencing employment. We saw staff who did not have all required pre employment checks such as references had risk assessments in place.