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Kendrick View Dental Practice

Inspection Report

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Overall summary

We undertook a follow-up desk based focused review of Kendrick View Dental Practice on 27 July 2020.

This review was carried out to assess, 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 review was carried out by a CQC inspector who had remote access to a specialist dental adviser.

We undertook a comprehensive inspection of 13 February 2020 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 Kendrick View Dental Practice on our website www.cqc.org.uk.

When one or more of the five 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 areas where improvement was required.

This desk-based review was undertaken during the Covid 19 pandemic.

Due to the demands and constraints in place because of Covid 19 we reviewed the action plan and asked the provider to confirm compliance after a reasonable interval, focusing on the areas where improvement was required.

As part of this review 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.

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 13 February 2020.

Background

Kendrick View Dental Practice is in Reading and provides NHS dental care and treatment for children and private dental care and treatment for adults and children.

There is step free access to the practice, via a portable ramp, for people who use wheelchairs and those with pushchairs. Car parking spaces, including dedicated parking for disabled people, is at the rear of the practice.

Summary of findings

The dental team includes seven dentists, one oral surgeon, one implantologist, one periodontist, two endodontists, nine dental nurses, one trainee dental nurse, seven dental hygienists, one administrator, four receptionists and a practice manager.

The practice has nine treatment rooms.

The practice is owned by an individual who is the principal dentist. 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.

The practice is open:

- Monday 8am to 6pm
- Tuesday 8am to 5pm
- Wednesday 8am to 5pm
- Thursday 8am to 5pm
- Friday 8am to 2pm
- Saturday 8.30am to 12.30pm

Our key findings were:

- Systems and processes were put in place to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

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 13 February 2020.

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 our previous inspection on 13 February 2020 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.

The provider advised us that as a result of our inspection they had employed a compliance officer and an administrative assistant to support the practice manager with governance management.

At the follow-up desk based review on 27 July 2020 we found the practice had made the following improvements to comply with the regulations:

- Appropriate checks on emergency medicines and equipment were in place. Records of checks were seen which confirmed this.
- Systems were in place to receive and respond to patient safety alerts, recalls and rapid response reports issued by the Medicines and Healthcare products Regulatory Agency, the Central Alerting System and other relevant bodies, such as Public Health England.

- Systems were established to ensure staff followed infection prevention and control guidelines issued by the Department of Health in the Health Technical Memorandum 01-05: Decontamination in primary care dental practices. The most recent infection prevention and control audit confirmed this.
- Evidence of up to date continuing professional development (CPD) training was obtained for all staff.
- Fire safety checks were carried out to ensure fire detection systems were in working order and a risk assessment was completed by someone who had the competence to do so.
- There was an effective system to ensure all team members had completed appraisals. Appraisals for all staff were seen which confirmed this.

The practice had also made further improvements:

- Audits of patient dental care records were carried out for all dentists. Audits for all the dentists were seen which confirmed this.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulations when we carried out a follow-up desk based focused review on 27 July 2020.