

Bhageerutty Smiles Limited

Bhageerutty Smiles

Inspection Report

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Date of inspection visit: 2 May 2019
Date of publication: 06/06/2019

Overall summary

We undertook a follow up focused inspection of Bhageerutty Smiles on 2 May 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 Care Quality Commission (CQC) inspector who was supported by a specialist dental adviser.

We previously undertook a comprehensive inspection of Bhageerutty Smiles on the 30 April 2018 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, effective or well led care in accordance with the relevant regulations 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 Bhageerutty Smiles 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.

As part of this inspection we asked:

- Is it safe?

- Is it effective?

- Is it well-led?

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 breach we found at our inspection on 30 April 2018.

Are services effective?

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

The provider had made improvements in relation to the regulatory breach we found at our inspection on 30 April 2018.

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 breach we found at our inspection on 30 April 2018.

Background

Summary of findings

Bhageerutty Smiles is located in Lambeth. The practice has some parking nearby. The dental team includes two dentists, a trainee dental nurse and a receptionist. The practice has two treatment rooms.

The practice is owned by a company and as a condition of registration must have a person registered with the Care Quality Commission as the registered manager. Registered managers have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run. One of the dentists was the practice manager.

During the inspection we spoke with two dentists, a trainee dental nurse and a receptionist. We checked practice policies and procedures and other records about how the service is managed.

The practice is open:

- Monday to Friday 9.30 am to 5.00 pm

Our key findings were:

- Improvements had been made so that infection prevention and control audits were carried out in line with current guidance.
- Staff knew how to deal with emergencies. Appropriate medicines and life-saving equipment were available.
- The provider had suitable safeguarding processes and staff knew their responsibilities for safeguarding vulnerable adults and children.
- The provider had a staff recruitment procedure in place.
- There were systems in place to suitably records patients consent.
- The provider had effective leadership and a culture of continuous improvement.
- Staff felt involved and supported and worked well as a team.
- The provider had suitable information governance arrangements.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services safe?

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

No action



Are services effective?

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

No action



Are services well-led?

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

No action



Are services safe?

Our findings

At our previous inspection on 30 April 2018 we judged the practice was not providing safe care in accordance with the relevant regulations. We told the provider to take action as described in our requirement notice. At the inspection on 2 May 2019 we found the practice had made the following improvements to comply with the regulations:

- Infection control procedures were being followed by the practice staff and were in line with current guidance.

The practice had also made further improvements:

- The practice used rubber dam for root canal treatment taking into account guidelines issued by the British Endodontic Society.

- The practice had a system for recording, investigating and reviewing incidents and significant events. There had been no incidents recorded since the last inspection, but the practice staff understood how to log incidents and there was a log book to record any incidents if and when they would occur.
- Emergency medical equipment, for example such as the Automated External Defibrillator (AED), that was not at the practice at the previous inspection was available at this one,

These improvements showed the provider had taken action to comply with the regulations: when we inspected on 2 May 2019.

Are services effective?

(for example, treatment is effective)

Our findings

At our previous inspection on 30 April 2018 we judged the practice was not providing effective care in accordance with the relevant regulations. We told the provider to take action as described in our requirement notice. At the inspection on 2 May 2019 we found the practice had made the following improvements to comply with the regulations:

- There were now systems to suitably monitor and record patient consent for treatments undertaken. The provider followed relevant guidelines in relation to recording consent.

The practice had also made further improvements:

- The practice had improved the storage of dental care records to ensure they are stored securely. All records were kept in lockable cupboards.
- The practice had improved their protocols for patient assessments to ensure they followed current legislation and took into account relevant nationally recognised evidence-based guidance.

These improvements showed the provider had taken action to comply with the regulations: when we inspected on 2 May 2019.

Are services well-led?

Our findings

At our previous inspection on 30 April 2018 we judged the provider was not providing well led care and was not complying with the relevant regulation. We told the provider to take action as described in our requirement notice. At the inspection on 2 May 2019 we found the practice had made the following improvements to comply with the regulation.

The practice's governance systems and processes had been reviewed and strengthened to ensure compliance in accordance with the fundamental standards of care. We found:

- There were arrangements in place to audit the practice's infection prevention control procedures in accordance with current guidelines. The last audit had been undertaken in April 2019. We noted that these audits were carried out every six months and the findings of the audits were shared, reviewed and acted on to ensure that risks were identified and mitigated.
- There were arrangements to assess and improve quality in relation to dental radiographs through audits. We noted that dental radiograph audits had been carried out in May 2019. The results of these audits had been analysed and actions taken where needed to make improvements.

- The service now had clear systems to ensure effective oversight of risks relating to equipment and emergency medical equipment. For example, there were records for the maintenance of the sterilisation equipment.

The practice had also made further improvements:

- There were arrangements for the on-going assessment, supervision and appraisal for permanent staff. We saw appraisal records for the dental nurse and the receptionist.
- There were systems in place to ensure that permanent staff undertook periodic training and updates in areas relevant to their roles, and for ensuring that clinical staff undertook continuing professional development as per the General Dental Council's professional standards. We looked at the training records for the principal dentist, the dental nurses and the receptionist and noted that these staff had undertaken training in safeguarding vulnerable adults and children, infection control, basic life support and medical emergencies.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation when we inspected on 2 May 2019.