Aziz Dent Ltd Bridgford Dental Practice

Inspection Report

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Overall summary

We carried out an announced comprehensive inspection of this practice on 29 June 2016. Breaches of legal requirements were found. After the comprehensive inspection, the practice wrote to us to say what they would do to meet legal requirements in relation to braches in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3) Regulation 17: Good governance. We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to that requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Bridgford Dental Practice on our website at www.cqc.org.uk

We carried out an announced follow up inspection on 16 March 2017 to ask the practice the following key questions; Are services well-led?

Our findings were:

Are services well-led?

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

Background

Bridgford Dental Practice is a dental practice providing mostly private dental treatment. The practice is located in premises close to the centre of West Bridgeford on the outskirts of Nottingham. There is a small car park available to the front of the practice; otherwise there is pay and display or roadside parking in the area. The practice has three treatment rooms, all three of which are on the ground floor.

The practice provides regulated dental services to both adults and children. The practice provides mostly private dental treatment (70%). Services provided include general dentistry, dental hygiene, crowns and bridges, and root canal treatment.

The practice's opening hours are – Monday to Friday: 9 am to 5 pm. The practice is closed for one hour for lunch.

Access for urgent treatment outside of opening hours is by telephoning the practice and following the instructions on the answerphone message. Nottingham Emergency Dental Services offers an out-of-hours service.

The principal dentist is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons 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

The practice has three dentists; one dental hygienist; three qualified dental nurses; one trainee dental nurse and a receptionist.

Our key findings were:

- All staff had received additional training in infection control procedures.
- Equipment used at the practice had been reviewed and where necessary replaced.

- New equipment had been purchased.
- The practice had introduced a system to deal with the issue of rusty instruments.
- Infection control procedures had been audited and a specialist review of the audit had been carried out.
- Record keeping had been improved to ensure a clear audit trail.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services well-led?

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

All staff had received additional training in infection control procedures. Equipment used at the practice had been reviewed and where necessary replaced. New equipment had been purchased to make systems more robust. The practice had identified the main source of rusty instruments and introduced a system to remove the problem. Infection control procedures had been audited and a specialist review of the audit had been carried out. Record keeping in respect of infection control had been improved to ensure a clear audit trail.

No action

Bridgford Dental Practice Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the registered provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

On 29 June 2016 we carried out an announced, comprehensive inspection and identified concerns with

regard to the well led areas of the practice. As a result we issued the provider with a requirement notice to address those concerns. The provider sent the Care Quality Commission (CQC) an action plan on 30 August 2016 which identified the steps to be taken to address the issues.

We carried out a focused inspection on 16 March 2017 to check that the concerns had been addressed and compliance achieved.

The inspection team consisted of a CQC inspector with remote access to a dental specialist adviser.

Are services well-led?

Our findings

Governance arrangements

During our inspection of 29 June 2016 we identified that infection control procedures were not being followed. This resulted in the potential for cross infection between patients. Dental instruments were not cleaned effectively; and the systems and processes for monitoring that cleaning had been effective had not identified the problem.

At this focused inspection visit on 16 March 2017 we saw the provider had taken a number of steps to address the issues highlighted:

Following the inspection in June 2016 the provider held a full staff meeting to discuss with staff the findings of the inspection on 8 September 2016.

The provider contacted Health Education East Midlands (HEEM) for clinical advice. HEEM are involved in post graduate medical education locally.

The provider reviewed every dental instrument in the practice and disposed of every instrument that was damaged or rusty. New replacement instruments were purchased. Stainless steel burs (drill bits for dental drills) were replaced with single use burs. The stainless steel burs had been reused and had been identified as the primary cause of the rust on the dental instruments. The practice had introduced a system where the dental nurse working in the decontamination room signed the newly sterilized pouches. This enabled an audit trail so that any issue with instruments that had been processed could be traced back to the individual dental nurse for discussion.

The practice carried out a full infection control audit on 29 September 2016. This audit scored 95% and served as a baseline for the practice to work from. The provider also consulted a company who specialised in infection control to analyse the infection control audit. The company provided training to the staff team on 18 October 2016.

Every dental nurse working at the practice attended a full day infection control training course at the Queens Medical Centre. In addition all staff completed on-line infection control training.

All equipment used in the infection control procedures was reviewed and a new digital thermometer purchased for use in the manual cleaning procedures. The brushes used in this process were also replaced with long handled brushes as recommended in the Department of Health's guidance, 'Health Technical Memorandum 01-05 (HTM 01-05): Decontamination in primary care dental practices.'

Systems for monitoring the infection control procedures had been made more robust with improved record keeping and targeted audits introduced.