R Babbar Limited

Weston Park Dental Surgeons

Inspection report

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Overall summary

We undertook a desk based follow up focused inspection of Weston Park Dental Surgeons on 17 August 2022. 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 CQC inspector.

We undertook a focused inspection of Weston Park Dental Surgeons on 10 May 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 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 Weston Park Dental Surgeons 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 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 breaches we found at our inspection on 10 May 2022.

Summary of findings

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 May 2022.

There were areas where the provider could make improvements. They should:

- Improve the security of NHS prescription pads in the practice and ensure there are systems in place to track and monitor their use.

Background

Weston Park Dental Surgeons is in Crouch End, in the London Borough of Haringey, and provides NHS and private dental care and treatment for adults and children.

There is ramp access into the building for people who use wheelchairs or those with pushchairs. Car parking spaces, including dedicated parking for people with disabilities, are available near the practice.

The dental team includes six dentists, five dental nurses and two hygienists. They are supported by a practice manager and a receptionist. The practice has six treatment rooms and a separate decontamination room.

The practice is open:

Monday to Friday from 8.45am to 5.45pm.

Saturday from 9am to 1.30pm.

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 17 August 2022 we found the practice had made the following improvements to comply with the regulation:

- All members of staff had undertaken the nationally recommended level of safeguarding training appropriate to their role.
- A legionella risk assessment had been undertaken by an external contractor.
- Improvements had been made to minimise risks around fire safety. A fire risk assessment had been completed.
- A five-year fixed wiring check and portable appliance testing had been undertaken to ensure that the premises were safe for the provision of regulated activities.
- An antimicrobial prescribing audit had been carried out as recommended by the College of General Dentistry.

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 17 August 2022 we found the practice had made the following improvements to comply with the regulation:

- The provider had completed an infection prevention and control audit. They had implemented a system to ensure that these were undertaken six monthly in line with The Health Technical Memorandum 01-05: Decontamination in primary care dental practices (HTM 01-05) published by the Department of Health and Social Care.
- The provider had completed a radiography audit. They had implemented a system to ensure that these were undertaken six monthly in line with best practice guidelines.
- A disability audit had been undertaken in line with The Equality Act (2010).
- Improvements had been made to the overall monitoring of staff training.
- The provider had implemented a system to ensure that physical checks of emergency medicines and equipment were well documented.