

Dr. Sashiruban Balachandran

Family Dental Care

Inspection report

95 Gilders Road
Chessington
KT9 2AE
Tel: 02083911333
www.familydentalcareuk.co.uk

Date of inspection visit: 4/11/2022
Date of publication: 09/12/2022

Overall summary

We undertook a follow up focused inspection of Family Dental Care on 4 November 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 who was supported by a specialist dental adviser.

We undertook a comprehensive inspection of Family Dental Care on 28 July 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 or well led care and was in breach of regulations 12, 17, 18 and 19 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 Family Dental Care 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.

Summary of findings

The provider had made improvements in relation to the regulatory breach/es we found at our inspection on 28 July 2022

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 28 July 2022

Background

Family Dental Care is in the London borough of Kingston-upon-Thames and provides NHS and private dental care and treatment for adults and children.

There is level 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 dental team includes 6 dentists, 2 dental nurses, 2 trainee dental nurses 2 dental hygienists, 3 receptionists, a compliance administrator and a practice manager. The practice has 4 treatment rooms.

During the inspection we spoke with one of the principal dentists, a dental nurse, a receptionist and the practice manager. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday to Friday 9am to 6.30pm

Saturdays 9am to 1pm

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

- Implement protocols for the use of closed circuit television cameras taking into account the guidelines published by the Information Commissioner's Office.

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 4 November 2022 we found the practice had made the following improvements to comply with the regulations:

- Emergency equipment and medicines were available and checked in accordance with national guidance. In particular, multiple doses of adrenaline to treat anaphylaxis had been put in place immediately following our inspection on 28 July 2022. The automated external defibrillator (AED) had been equipped with new adhesive pads, scissors, a razor and gloves. The temperature of the fridge where the glucagon (a medicine used to treat low blood sugar) was stored, was being monitored.
- Staff were confident that they could respond to a medical emergency as training had been implemented and scenarios were discussed at practice meetings.
- The practice had infection control procedures which reflected published guidance. In particular: a dental nurse had been appointed to oversee the decontamination processes; instruments were transported in appropriately labelled boxes, suitable personal protective equipment was worn during decontamination procedures, the instruments were scrubbed correctly in temperature monitored water and were then inspected under an illuminated magnifying light. Instruments were allowed to dry on non-linting cloths and pouched before storage in drawers with the exception of the most frequently used ones. We were assured un-used instruments were sent for re-processing at the end of the day. The instruments were visibly clean and single use items were disposed of correctly. The provider had ensured that the implant equipment was stored in the surgeries instead of the waiting area. Local anaesthetic cartridges were stored in their packaging protecting them from contamination. The Ultrasonic bath used for decontaminating instruments was validated according to guidance and a log book had been ordered to ensure the tests were safely recorded. The provider had addressed the staff to ensure they kept fingernails short and clear of varnish.
- Sharps were handled in accordance with the Health and Safety (Sharp Instruments in Healthcare) Regulations 2013. Safer sharps were available and the sharps bins were situated appropriately.
- Clinical waste was handled and stored in accordance with the Department of Health publication “Health Technical Memorandum 07-01 safe management of healthcare waste”, (HTM07-01).
- NHS prescriptions were stored securely and monitored correctly to prevent misuse or fraud. Dispensed medicines were appropriately recorded and labelled.

The provider had also made further improvements:

- The provider had implemented audits for prescribing of antibiotic medicines taking into account the guidance provided 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 4 November 2022 we found the practice had made the following improvements to comply with the regulations:

- The provider had made improvements regarding the use of closed-circuit television (CCTV), in particular we saw a privacy impact assessment and signage had been improved within the practice. Improvements were required to ensure consent was obtained and documented for the use of recording within private areas. We saw no evidence that the provider had consulted with the Information Commissioner's Office (ICO) regarding recording within private areas. We spoke with a patient who told us that they were not aware that recording within treatment rooms took place.
- The provider had recruited staff members, including a practice manager and appointed a dental nurse to oversee trainees. A renewed enthusiasm was evident within the team.
- Staff had the skills, knowledge and experience to carry out their roles. We saw that staff training was up-to-date and undertaken at the required intervals.
- Newly appointed staff had a structured induction and clinical staff completed continuing professional development required for their registration with the General Dental Council.
- Staff discussed their training needs during annual appraisals.
- The provider's recruitment procedures helped them employ suitable staff.
- The registered person ensured that all the information specified in Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was available for each person employed.
- The management of fire safety was effective. We noted improvements had been implemented. In particular, fire evacuation instructions were displayed and there was evidence of fire safety equipment checks in a log book.
- The information relating to the Control of Substances Hazardous to Health (COSHH) Regulations 2002 was managed and organised in accordance with the relevant guidance.
- The quality of the dental care records had improved, showing consistency and detail in the information recorded.
- The Infection Prevention Control (IPC) audit was carried out accurately and reflected the findings within the practice.
- Radiographic audits were being carried out at 6-monthly intervals following guidance.