

Artiste Ltd

Artiste Studios -L'Orthodontiste

Inspection report

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Overall summary

We undertook a follow up focused inspection of Artiste Studios L'Orthodontiste on 13 October 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 Artiste Studios L'Orthodontiste on 16 June 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 and 18 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 Artiste Studios L'Orthodontiste dental practice on our website www.cqc.org.uk.

When one or more of the 5 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?

Summary of findings

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 16 June 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 16 June 2022.

We noted that the provider had completed a considerable amount of work to ensure that the practice now meets the regulations and that the improvements are sustainable moving forward.

Background

Artiste Studios L'Orthodontiste is in the London Borough of Hammersmith and Fulham and provides 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. Metered parking spaces are available near the practice and it is also located close to public transport services.

The dental team includes 5 dentists, 4 trainee dental nurses who perform dual roles as receptionists. The practice has 3 treatment rooms.

During the inspection we spoke with the principal dentist and 2 trainee dental nurses. 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 6pm

Saturdays by prior appointment

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	\checkmark
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 13 October 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, medical oxygen and an automated external debfibrillator (AED) had been put in place immediately following our inspection on 16 June 2022. In addition, the medicine used to treat Status epilepticus (Oromucosal Midazolam) had been obtained. The temperature of the fridge where medicines were stored was monitored.
- A fire risk assessment had been carried out in line with the legal requirements and the management of fire safety was effective. For example, fire safety checks were carried out at recommended intervals. In addition, the five-year fixed wiring electrical safety test had been carried out following remedial works and the result of this was satisfactory. Portable Appliance Testing (PAT) had been carried out to ensure the safety of electrical devices.
- The practice had arrangements to ensure the safety of the X-ray equipment and we saw the required radiation protection information was available. The three-yearly performance tests had been carried out.
- The practice had infection control procedures which reflected published guidance. in particular: wrapped instruments were stored appropriately in treatment room drawers, domestic household gloves were available for decontamination procedures and records were available to demonstrate that the autoclave and the washer disinfector was validated, maintained and used in line with the manufacturers' guidance. Local anaesthetic cartridges were stored in their packaging protecting them from contamination and cotton wool rolls were kept in closed containers.
- A legionella risk assessment had been undertaken by a competent person and records were available to demonstrate that water testing and the appropriate management and disinfection of dental unit water lines were being carried out.
- Cleaning equipment was available and stored appropriately.
- Handling of sharps was in accordance with the Health and Safety (Sharp Instruments in Healthcare) Regulations 2013: Safer sharps were in use and being disposed of by the qualified clinicians. Sharps bins were located appropriately. Improvements could be made to ensure all sources of sharps injuries were risk-assessed.
- 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 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 13 October 2022 we found the practice had made the following improvements to comply with the regulations:

- 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 practice had arrangements to ensure staff training was up-to-date and reviewed at the required intervals.
- The practice had implemented effective systems for monitoring the medicines and equipment used for the treatment of medical emergencies taking into account relevant guidance.
- There were effective systems for assessing the risks relating to the handling and disposal of sharps, the storage and control of substances hazardous to health, fire, legionella and radiography.
- Use of Closed-Circuit Television (CCTV) at the practice was in accordance with General Data Protection Regulation. A privacy impact statement had been completed and we saw a policy demonstrating how data was stored and how to deal with information requests. Appropriate signage had been installed and the practice website had been updated to provide the required privacy information.
- Feedback, including complaints, was recorded in a clear manner and staff dealt with them positively and efficiently.
- The Infection Prevention Control (IPC) audit was carried out accurately and reflected the findings within the practice.
- The practice had implemented a system to monitor patient referrals to ensure patients were seen in a timely manner.
- Recruitment checks had been carried out and records were available for all members of staff following relevant legislation.
- The practice had a system of clinical governance in place which included policies, protocols and procedures that were accessible to all members of staff and were reviewed on a regular basis.
- We saw there were clear and effective processes for managing risks, issues and performance.