Dr Anish R Patel

Pimlico Dental Care

Inspection Report

124a Regency Street
London
SW1P 4AP
Tel:0207 233 5600
Website:www.pimlicodental.com/

Date of inspection visit: 10 October 2016
Date of publication: 25/11/2016

Overall summary

We carried out a follow- up inspection on 10 October 2016 at Pimlico Dental Practice.

We had undertaken an announced comprehensive inspection of this service on 18 March 2016 as part of our regulatory functions where a breach of legal requirements was found.

After the comprehensive inspection, the practice wrote to us to say what they would do to meet the legal requirements in relation to the breach. This report only covers our findings in relation to those requirements and we reviewed the practice against two of the five questions we ask about services: is the service safe and well-led?

We revisited Pimlico Dental Care as part of this review and checked whether they had followed their action plan and to confirm that they now met the legal requirements.

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 safe?

No action

At our previous inspection we had found that the practice did not have effective systems in place to assess the risk of, and ensuring the practice was compliant with radiation regulations.

We carried out an inspection on the10 October 2016. Action had been taken to ensure that the practice was safe because there were now effective systems in place to assess the risk of, and ensuring the practice was compliant with radiation regulations.

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

Are services well-led?

No action

At our previous inspection we had found that the practice had not established an effective system to assess, monitor and mitigate the risks relating to the health, safety and welfare of patients, staff and visitors. They had also not ensured that their audit, risk assessment and governance systems were effective.

At our inspection of 10 October 2016 we found that action had been taken to ensure that the practice was well-led because there were now effective system to assess, monitor and mitigate the risks relating to the health, safety and welfare of patients, staff and visitors. The providers had now ensured that their audit, risk assessment and governance systems were effective.

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

Pimlico Dental Care

Detailed findings

Background to this inspection

This inspection was planned to check whether the practice was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We carried out an inspection of this service on 10 October 2016.

This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 18 March 2016 had been made. We reviewed the practice against two of the five questions we ask about services: is the service safe and is this service well-led? This is because the service was not previously meeting two of the legal requirements.

The inspection was led by a CQC inspector who was accompanied by a dental specialist advisor.

During our inspection visit, we checked that the provider's action plan had been implemented by looking at a range of documents such as risk assessments, audits, staff records, maintenance records and policies. We also spoke with staff and carried out a tour of the premises.

Are services safe?

Our findings

Reliable safety systems and processes (including safeguarding)

The practice had safety systems in place to help ensure the safety of staff and patients. This included for example having a COSHH (Control of Substances Hazardous to Health, 2002 Regulations) file, infection control protocols, procedures for using equipment safely, health and safety process, procedures and risk assessments. Risk assessments had been undertaken for issues affecting the health and safety of staff and patients using the service. This included for example risks associated with manual handling, slips and falls, radiation and use of biological agents.

Monitoring health & safety and responding to risks

The practice had arrangements in place to deal with foreseeable emergencies. A Health and Safety Policy was in place. The practice had a risk management process which was updated and reviewed to ensure the safety of patients and staff members. For example, we saw risk assessments for radiation, manual handling and infection control. The assessments included the controls and actions to manage risks. For example risk associated with biological agents advised staff to check the COSHH file. Staff we spoke with were aware of this.

Infection control

A Legionella test had been completed by the practice in May 2016 [Legionella is a bacterium found in the environment which can contaminate water systems in buildings]. The water lines were flushed daily and weekly. The practice had recently been renovated and there was still some plumbing work being completed. The principal told us that a full risk assessment would take place once the works had been completed.

There was a cleaning plan, schedule and checklist, which was regularly checked by the practice staff.

Equipment and medicines

We found the equipment used in the practice was maintained in accordance with the manufacturer's instructions. This included the equipment used to clean and sterilise the instruments. A new X-ray equipment had been installed as part of the renovation.

At the last inspection we found that prescription pads had not been stored securely. We saw that pads were now being stored safely in a locked draw.

Radiography (X-rays)

The principal dentist was the Radiation Protection Supervisors (RPS). An external organisation covered the role of Radiation Protection Adviser (RPA). The practice kept a radiation protection file in relation to the use and maintenance of X–ray equipment. There were suitable arrangements in place to ensure the safety of the equipment. Critical exams had been undertaken in June 2016. New X-ray equipment had been installed in June 2016. Evidence was seen of radiation training for staff undertaking X-rays. We saw evidence that X-rays were graded and audited as they were taken by the newly installed x-ray machine.

Are services well-led?

Our findings

Governance arrangements

The provider had governance arrangements in place for the effective management of the service. This included having a range of policies and procedures in place including recruitment and infection control. There were identified leads on specific roles such as on infection control and radiation. Staff told us they felt supported and were clear about their areas of responsibility.

The quality audits undertaken at the practice included infection control, dental records and radiography audits.

Management lead through learning and improvement

Staff told us they had good access to training. There was a system in place to monitor staff training to ensure essential training was completed each year. Staff working at the practice were now supported to maintain their continuing professional development (CPD) as required by the General Dental Council (GDC). Staff had undertaken CPD in recommended topics including safeguarding and radiation.