

Marylebone Dental Practice Limited

# The Marylebone Dental Practice

## Inspection report

61 Paddington Street  
London  
W1U 4JD  
Tel:

Date of inspection visit: 05 October 2022  
Date of publication: 01/11/2022

### Overall summary

We undertook a follow up inspection of The Marylebone Dental Practice on 5 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 focused inspection of The Marylebone Dental Practice on 29 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 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 The Marylebone Dental Practice dental practice on our website [www.cqc.org.uk](http://www.cqc.org.uk).

When one or more of the -5 questions are not met, we 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 breaches we found at our inspection on 29 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 29 June 2022.

## **Background**

The Marylebone Dental Practice is in Westminster and provides private dental care and treatment for adults and children.

The practice is not accessible for people who use wheelchairs and those with pushchairs. Staff referred patients to other local practices if they were unable to access the building. Car parking spaces are available near the practice.

The dental team includes -4 dentists, -3 dental nurses, a dental hygienist and 2 practice managers. The practice has 4 treatment rooms.

During the inspection we spoke with 2 dentists, 2 dental nurses and both of the practice managers. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday to Friday from 9am to 5.30pm.

# 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 5 October 2022 we found the practice had made the following improvements to comply with the regulation:

- There were new fire extinguishers in place.
- A fire risk assessment had been undertaken in July 2022 by a specialist company.
- Portable appliance testing had been carried out.
- There was a five-year electrical testing of the premises. The test had identified work to be completed and an electrical contractor had carried out the work. They were awaiting a new test certificate.
- There were new Automated External Defibrillator (AED) pads and an asthma spacer to use with the asthma inhaler in the medical emergency kit.
- There was Buccal Midazolam in the medical emergencies kit to manage seizures.
- Glucagon was kept in the fridge and there were recordings of the temperature of the fridge.

# 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 5 October 2022 we found the practice had made the following improvements to comply with the regulation:

- A legionella risk assessment had been completed in September 2022.
- A radiograph audit had been undertaken in August 2022.
- An infection prevention and control audit that had been completed.
- A disability access audit had been undertaken.
- There was evidence staff had undertaken training in safeguarding, radiography, infection prevention and control, and fire safety.
- There was an induction programme to prepare staff for their role.
- The practice had systems in place to ensure clinical staff had completed continued professional development as required for their registration with the General Dental Council.
- There was a formal system in place for the appraisal and supervision of staff.

The provider had also made further improvements:

- The provider was now carrying out audits of antimicrobial prescribing.
- The provider was now carrying out audits of patient dental care records to check that necessary information had been recorded.