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Hitchin Dental Practice

Inspection report

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Overall summary

We undertook a desk-based review of Hitchin Dental Practice on 5 October 2020. This was carried out to review the actions taken by the registered provider to improve the quality of care and to confirm that the practice was now meeting legal requirements.

We had undertaken a comprehensive inspection on 3 March 2020 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 in accordance with the relevant regulations 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 Hitchin Dental Practice on our website .

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 review we asked:

- Is it safe
- Is it well-led

Background

Hitchin Dental is a well-established practice that offers both private and NHS treatment to about 2,500 patients. The dental team consists of a dentist, a dental nurse, a hygienist and a receptionist. There are three treatment rooms. The practice opens on Mondays to Thursdays from 9 am to 5 pm, and on Fridays from 9 am to 3 pm. There is no level access for wheelchair users. Parking is available on streets nearby.

The practice is owned by an individual who is the dentist there. He has legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

Our findings were:

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

Key findings

The provider had made sufficient improvements in relation to the regulatory breaches we found at our previous inspection. These must now be embedded in the practice and sustained in the long-term.

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

At our previous inspections on 3 March 2020 we judged the practice was not providing safe care in accordance with the relevant regulations. We told the provider to take action as described in our requirement notice. During this review, we found the provider had made the following improvements to comply with the regulation:

- We viewed training certificates which demonstrated that staff had undertaken training in the protection of vulnerable adults and children since our last inspection. In addition to this, the provider told us he had attended a recent webinar with a safeguarding consultant specialist, which he had found very useful.
- We viewed the practice's staff recruitment policy which had been reviewed in June 2020 and now included information about disclosure and barring checks.
- We viewed logs which demonstrated that staff had undertaken timed drills for evacuating the building in the event of a fire, and that smoke alarms were tested regularly. Via an on-line social media application, the provider showed us the practice's fire exit which was clear and also new fire signage that had been placed around the building.
- Fixed wire testing had been undertaken at the practice on 6 April 2020.

- The dental nurse talked us through the decontamination procedure via an on-line social media app. They were able to demonstrate that heavy duty gloves and long handled brushes were now changed weekly; that cleaning solution was measured accurately, and instruments were dated correctly. We noted that the decontamination room had been completely refurbished since our inspection to meet nationally recommended guidelines. Training certificates we viewed showed that all staff had undertaken recent training in infection control.
- We viewed the hygienist's dental chair, which had been repaired and its back panel replaced.
- We viewed logs which demonstrated that water temperatures had been monitored each month, and the gas boiler had been serviced.
- Dangerous chemicals and clinical waste bags were now stored securely, and we were shown the double locked door behind which they were kept. Clinical waste bags were labelled correctly.
- Logs we viewed demonstrated that staff now regularly checked medical emergency equipment to ensure it was fit for safe use. The fridge temperature was monitored daily to ensure it operated effectively.

These improvements showed the provider had acted to improve the quality of services for patients and comply with the regulation.

Are services well-led?

Our findings

At our previous inspections on 3 March 2020 we judged the practice was not providing well-led care in accordance with the relevant regulations. We told the provider to take action as described in our requirement notice. During this review, we found the provider had made the following improvements to comply with the regulation:

- The principal dentist had undertaken training in the Mental Capacity Act to ensure he better understood his responsibilities when treating patients who could not make decision for themselves.
- A risk assessment had been completed for the practice's hygienist who worked without chairside support.

- We were shown the practice's reception area, via an on-line social media application. We noted there was good information about translation services available for patients who did not speak English, and also about the practice's complaints' procedure.
- A portable hearing loop had been purchased to assist patients who wore a hearing aid and a ramp to assist wheelchair users.
- The provider had purchased some dental practice specific governance software. He told us this had greatly assisted him with the management of the practice. He was also supported by an external consultant who visited the practice every few months to check on a range of compliance issues.

These improvements showed the provider had acted to improve the quality of services for patients and comply with the regulation.