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Skintek Dental, Laser & Aesthetic Clinic

Inspection Report

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Overall summary

We carried out an announced follow-up inspection at Skintek Dental, Laser and Aesthetic Clinic on the 31 May 2017. This followed an announced comprehensive inspection on the 19 January 2017 carried out as part of our regulatory functions where breaches of legal requirements were found.

After the comprehensive inspection, the practice wrote to us to say what actions they would take to meet the legal requirements in relation to the breaches.

We revisited Skintek Dental, Laser and Aesthetic Clinic and checked whether they had followed their action plan.

We reviewed the practice against two of the five questions we ask about services: is the service safe and well-led? This report only covers our findings in relation to those requirements.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Skintek Dental, Laser and Aesthetic Clinic on our website at www.cqc.org.uk.

Background

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.

The follow-up inspection was led by a CQC inspector who had access to remote advice from a specialist dental advisor.

During our inspection visit, we checked that points described in the provider's action plan had been implemented by looking at a range of documents such as risk assessments, staff files, policies and staff training.

Our key findings were:

- Staff knew how to deal with medical emergencies. Appropriate medicines and life-saving equipment were available.
- The practice had infection control procedures which reflected published guidance. There were systems in place to ensure that all equipment used to sterilise instruments was being validated as per national guidelines; and maintained as per manufacturer's recommendations.
- The practice had systems to help them manage risk.

Summary of findings

- The practice had staff recruitment procedures and all staff were meeting the requirements of their professional registration.
- There was effective leadership at the practice and systems were in place to share information and learning amongst the team.
- The practice had systems in place to seek feedback from patients who were complimentary about the service they received.

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?

At our previous inspection we had found that the practice was not identifying and mitigating all risks to service users. Risks that were identified in risk assessments were not always acted upon. There were shortfalls in the arrangements the practice had to deal with medical emergencies, infection prevention and control and in recruiting staff.

At our follow-up inspection on the 31 May 2017 we found that action had been taken to improve these shortfalls. The practice had purchased an automated external defibrillator (AED) and all medicines and equipment required in a medical emergency were present and in date. Infection prevention and control procedures carried out at the practice were in line with national guidance.

No action



Are services well-led?

At our previous inspection we had found that the governance systems at the practice required review. The practice did not have effective systems to assess, monitor and mitigate the risks relating to managing medical emergencies, infection prevention and control at the practice and staff recruitment and training.

At our follow-up inspection we found that action had been taken to ensure that the practice was well-led. Governance systems were in place to ensure that policies and procedures were kept up to date, staff were completing all necessary training and information was shared effectively with staff.

No action



Are services safe?

Our findings

Reporting, learning and improvement from incidents

Staff we spoke with had a good understanding of the reporting of injuries, diseases and dangerous occurrences regulations (RIDDOR) 2013 and were clear in the actions they should take should a serious incident happen at the practice.

Reliable safety systems and processes (including safeguarding)

The principal dentist acted as the safeguarding lead and as a point of referral should a safeguarding issue be encountered. A policy was in place for staff to refer to which contained the necessary contact details and protocol should a member of staff identify a person who may be the victim of abuse or neglect. This had been updated in February 2017. All staff had received training in safeguarding children and vulnerable adults and we saw documentation to support this.

Medical emergencies

Since the last inspection in January 2017 the practice had purchased its own automated external defibrillator (AED). The Resuscitation Council UK guidelines recommend that dental practices have immediate access to an AED.

The practice had also reviewed its medical emergency equipment and medicines and now had access to all equipment as set out in the Resuscitation Council UK guidelines and all emergency medicines as set out in the British National Formulary (BNF) guidance for dealing with common medical emergencies in a dental practice. The practice had clear systems in place for logging the checks made on the equipment and medicines, for example, checking that medicines and emergency oxygen cylinders were in date.

The practice had a medical emergencies policy to underpin the procedures they would need to undertake and all staff had received training in medical emergencies and basic life support.

Staff recruitment

The staff team consisted of the principal dentist, one dental nurse who provided reception cover when needed and one receptionist. Both clinical staff had current registration with the General Dental Council, the dental professional's

regulatory body. The practice had a recruitment policy and procedure to help them employ staff. This reflected relevant legislation. We looked at all staff recruitment files which were complete. Staff had necessary documents to demonstrate immunisation against Hepatitis B and the practice had carried out Disclosure and Barring Service checks (DBS) as required.

Monitoring health and safety and responding to risks

The practice's health and safety policies and risk assessments were up to date and reviewed yearly to help manage potential risk. These covered general workplace and specific dental topics. We saw clear action plans to reduce the identified risks and documentation that these had been completed. The practice had current employer's liability insurance and checked each year that the clinicians' professional indemnity insurance was up to date.

A dental nurse worked with the dentist when they treated patients.

Infection control

The practice now had an up to date infection prevention and control policy and procedures to keep patients safe. They followed guidance in The Health Technical Memorandum 01-05: Decontamination in primary care dental practices (HTM01-05) published by the Department of Health. Staff completed infection prevention and control training every year. The practice had suitable arrangements for transporting, cleaning, checking, sterilising and storing instruments in line with HTM01-05. The records showed equipment staff used for cleaning and sterilising instruments was maintained and used in line with the manufacturers' guidance. The practice had carried out an infection prevention and control audit in February 2017. This showed that the practice was meeting the required standards.

The practice had procedures to reduce the possibility of Legionella or other bacteria developing in the water systems, in line with a risk assessment. All necessary actions had been completed.

Equipment and medicines

Are services safe?

We saw servicing documentation for the equipment used. Staff carried out checks in line with the manufacturers' recommendations. The practice maintained a thorough schedule of maintenance for all equipment used in the practice.

Are services well-led?

Our findings

Governance arrangements

The principal dentist had overall responsibility for the management, clinical leadership and day to day running of the practice. Staff understood the management structure and their roles and responsibilities.

The practice had policies, procedures, risk assessments and information governance arrangements to support the management of the service and to protect patients and staff. These included arrangements to monitor the quality of the service and make improvements.

Leadership, openness and transparency

Staff were aware of the duty of candour requirements to be open, honest and to offer an apology to patients if anything went wrong. Staff told us that the principal dentist encouraged them to raise any issues and they felt confident they could do this. The practice held meetings where staff could raise any concerns and discuss clinical and non-clinical updates. Immediate discussions were arranged to share urgent information.

Learning and improvement

The practice had quality assurance processes to encourage learning and continuous improvement. These included audits of dental care records, X-rays and infection prevention and control. They had clear records of the results of these audits and the resulting action plans and improvements.

Staff discussed learning needs, general wellbeing and aims for future professional development informally. Staff were due to receive formal appraisals.

Staff told us they completed mandatory training, including medical emergencies and basic life support, each year. The General Dental Council requires clinical staff to complete continuous professional development.

Practice seeks and acts on feedback from its patients, the public and staff

Staff commented that they felt confident to provide feedback and that the principle dentist was open to feedback and suggestions.

The practice utilised a phone based feedback survey which sent patients a text message asking for them to rate the service and to give feedback. Results for this survey were made available to us. Patients consistently rated the dentist as 'excellent' and commented on the ease of getting an appointment and the professional and friendly service.