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Bloomsbury Dental Practice

Inspection Report

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Overall summary

We undertook a follow up focused inspection of Bloomsbury Dental Practice on 7 March 2019. 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 Bloomsbury Dental Practice on 24 July 2018 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 regulation 17 – Good governance 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 Bloomsbury Dental Practice on our website www.cqc.org.uk.

- Is it safe?
- Is it well-led?

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.

Our findings were:

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 breach we found at our inspection on 24 July 2018.

Background

Bloomsbury Dental Practice is in Bloomsbury in the London Borough of Camden. The practice provides private treatment to patients of all ages. There is step free access to the practice and the practice has four dental surgeries, one of which is located on the ground floor. The practice is situated close to public transport bus and London underground services.

The dental team includes the principal dentist and two dentist partners, three dental nurses and two dental hygienists. The clinical team are supported by a receptionist.

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

Summary of findings

During the inspection we spoke with each of the two associate dentists, one dental nurse and the receptionist. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Mondays to Fridays between 9am and 5.30pm.

Late evening appointments are available up to 7pm by request on Tuesdays and Thursdays.

Our key findings were:

- There were arrangements to monitor and improve quality in relation to dental radiography though a system of audits.
- There suitable systems in place to deal with medical emergencies. The recommended life-saving equipment and medicines were available and staff had completed training in medical emergencies. Improvements were needed so that staff were confident in setting up emergency equipment for use.
- The practice's sharps procedures were in compliance with the Health and Safety (Sharp Instruments in Healthcare) Regulations 2013.

There were areas where the provider could make improvements. They should:

Review staff training & availability of equipment to manage medical emergencies taking into account guidelines issued by the Resuscitation Council (UK), and the General Dental Council (GDC) standards for the dental team. This refers to ensuring that staff are confident and competent in setting up emergency equipment for use.

Review the practice's protocols for completion of dental care records taking into account guidance provided by the Faculty of General Dental Practice regarding clinical examinations and record keeping.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services well-led?

No action

We found that this practice was providing well-led care and was complying with the relevant regulations.

We found that this practice was providing well-led care and was complying with the relevant regulations.

Improvements had been made to ensure that the recommended emergency medicines and equipment were available and that staff had undertaken training in basic life support. Improvements were needed so that staff were confident in setting up emergency equipment for use as needed.

The practice had reviewed the arrangements for assessing the quality of dental radiographs through audits and reviews.

There arrangements for assessing and mitigating the risks associated with the use and disposal of dental sharps had been reviewed.

Are services well-led?

Our findings

At our previous inspection on 24 July 2018 we judged the provider was not providing well led care and was not complying with the relevant regulation. We told the provider to take action as described in our requirement notice. At the inspection on 8 March 2019 we found the practice had made the following improvements to comply with the regulation.

The practice governance systems and processes had been reviewed and strengthened to ensure compliance in accordance with the fundamental standards of care and we found:

- There were arrangements in place to ensure that the recommended emergency medicines and equipment were available to use in the event of a medical emergency. There were arrangements in place to regularly check emergency medicines and equipment to ensure that they were available, in date and ready for use.
- Staff training records which we were provided with showed that staff had undertaken training in basic life support.

The practice had also made further improvements:

- There arrangements for assessing and mitigating the risks associated with the use and disposal of dental sharps had been reviewed. There were procedures in place and staff followed relevant safety regulation when using needles and other sharp dental items.

There were some areas where improvements were needed:

- Improvements were needed so that all relevant staff were confident in setting up emergency equipment for use as needed. One dental nurse who we spoke with was unable to demonstrate that they could set up the oxygen or the Automated External Defibrillator ready for use promptly.
- Improvements were needed so that dental care records were complete taking into account guidance provided by the Faculty of General Dental Practice regarding clinical examinations and record keeping. We looked at a sample of dental care records. We found that details in relation to patient assessments including basic periodontal examinations, charting, review of medical histories and details of discussions had with patients including risks and benefits of propose treatment were not recorded.

The improvements made showed the provider had taken action to improve the quality of services for patients and comply with the regulation when we inspected on 7 March 2019.