

Dr Farheen Rehman

Queens Head Dental Surgery

Inspection report

340 Londonderry Road
Oldbury
B68 9NB
Tel: 01215441133

Date of inspection visit: 15 October 2020
Date of publication: 10/11/2020

Overall summary

We undertook a desk-based review of Queens Head Dental Surgery on 15 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 13 August 2019 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 Queens Head Dental Surgery on our website www.cqc.org.uk.

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

Queens Head Dental Surgery is in Oldbury, West Midlands and provides NHS and private treatment to adults and children.

There is level access for people who use wheelchairs and those with pushchairs. Car parking spaces, including one for blue badge holders, are available immediately outside the practice.

The dental team includes one dentist, one dental nurse, one dental hygienist and one receptionist. The practice has two treatment rooms and a separate decontamination room.

Summary of findings

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.

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 inspection on 13 August 2019 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 the practice's updated whistleblowing policy. Staff had signed a form to confirm that they had read and understood the document.
- We viewed training certificates which confirmed that the practice team had received practical training in emergency resuscitation and basic life support. Furthermore, emergency equipment and medicines had been made available as described in recognised guidance and were visually checked by staff.
- The provider sent us evidence of the monthly instrument storage and rotation check completed by staff. This showed that staff were checking that dental instruments were stored in accordance with HTM 01-05.
- On our previous inspection we found that the dental delivery cart in one treatment room was damaged and this would make effective cleaning difficult. During this review we examined the risk assessment that had been created and the daily checks that were recorded to evidence the effective cleaning of this item.
- We viewed a written log showing that staff completed visual checks on the practice's X-ray equipment at suitable intervals.
- We viewed copies of risk assessments required by The Control of Substances Hazardous to Health Regulations 2002.
- On our previous inspection we found that the effectiveness of the Hepatitis B vaccination was missing for one member of staff. The provider sent us the required documentation following the visit.
- Annual fire alarm and emergency lighting testing had been completed in November 2019. Staff had received fire safety training.
- A fixed wiring electrical safety check had been undertaken in August 2019.

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 inspection on 13 August 2019 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:

- We viewed the audits that had been completed since the inspection. These included analysis and clear action plans. The resulting improvements were listed in the audit conclusions.
- We viewed certificates which demonstrated that staff had undertaken training in the interpretation of the results of validation tests for the ultrasonic cleaning bath.
- We also viewed a certificate showing that staff had received training in how to ensure that clinical waste was stored securely.
- The provider had updated their recruitment policy to ensure that recruitment procedures were followed in a consistent manner.

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