

Mr. Paiam Azari

Days Lane Dental Practice

Inspection Report

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Date of inspection visit: 6 October 2017

Date of publication: 17/10/2017

Overall summary

We carried out this announced follow-up inspection on 6 October 2017. The inspection was led by a Care Quality Commission (CQC) inspector who was supported by a specialist dental adviser.

At the previous comprehensive inspection on 20 April 2017 we found the registered provider was providing safe, effective, caring and responsive, care in accordance with relevant regulations. We judged the practice was not providing well-led care in accordance with regulation 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 Days Lane Dental Practice on our website www.cqc.org.uk.

The provider submitted an action plan to tell us what they would do to make improvements. We undertook this

inspection on 6 October 2017 to check that they had followed their plan. We reviewed the key question of well-led. We also reviewed the key question of safe, as we had made recommendations to the provider relating to this key question.

Our findings were:

Are services safe?

We found that this practice was providing safe care in accordance with the relevant regulations.

Are services well-led?

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

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?

We found that this practice was providing safe care in accordance with the relevant regulations..

The provider had made improvements with regard to reviewing their protocol for dealing with significant events, receiving and sharing safety alerts, and ensuring dentists use rubber dam for root canal treatment.

No action



Are services well-led?

We found that this practice was providing well-led care in accordance with the relevant regulations. The provider had made improvements to address shortfalls and regulatory breach we identified during the previous inspection on 20 April 2017.

The provider had implemented systems to assess, monitor and improve the quality of the service, such as undertaking comprehensive audits. They ensured appropriate policies were in place and all staff were aware of various roles and responsibilities.

The provider had established an effective system to assess, monitor and mitigate various risks.

No action



Are services safe?

Our findings

At the previous inspection on 20 April 2017, we found the provider was providing safe care though they needed to make improvements.

During this inspection on 6 October 2017, we found the provider had created a comprehensive policy and recording form for managing significant events. The provider had updated staff on this new protocol during a

meeting and staff we spoke with demonstrated a good understanding of this. The provider had established a system to ensure safety alerts from the MHRA would be shared with staff, acted on and stored for future reference.

We found the provider had purchased rubber dams and dentists we spoke with confirmed they were using them. The provider had updated staff on the protocol to follow wherever rubber dam could not be used.

These improvements demonstrated the provider had taken action to address the shortfalls we identified when we inspected their practice on 20 April 2017.

Are services well-led?

Our findings

At the previous inspection on 20 April 2017, we found the practice was not providing well led care.

During this inspection on 6 October 2017 we found all staff had a good awareness of their various roles and responsibilities. The practice ensured staff followed recognised national guidance when cleaning and disinfecting dental instruments.

We checked the practice's policies and found there was a comprehensive safeguarding policy in place and other policies had been reviewed and appropriately updated.

The provider had carried out an assessment to mitigate any risks associated with the use of sharps in the practice, and ensured they were following their recruitment policy by making the necessary background checks on new staff prior to them commencing employment at the practice.

The provider had conducted a new infection control audit in July 2017 and a new radiograph audit in August 2017. Plans were in place to carry out the infection control audit every six months in line with national guidance. We checked dental care records to confirm the dentist was grading dental radiographs.

These improvements demonstrated the provider had taken action to address the shortfalls and regulatory breach we identified when we inspected their practice on 20 April 2017.