

Dr. Kamlesh Shah

Dental Surgery

Inspection report

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Overall summary

We undertook a follow up focused inspection of Dental Surgery on 2 February 2024. This inspection 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.

The inspection was led by a CQC inspector who was supported by a specialist dental advisor.

We had previously undertaken a comprehensive inspection of Dental Surgery on 9 June 2023 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, effective and well-led care and was in breach of regulations 12,13,17,18 and 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

An announced focused inspection was carried out on 7 November 2023 to review the actions taken by the provider in response to our findings of 9 June 2023. At this follow up inspection we found that while some improvements had been made, the provider was still not providing safe and well-led care and remained in breach of regulations 12, 17 and 19 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 Dental Surgery dental practice on our website, www.cqc.org.uk.

When 1 or more of the 5 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 inspection we asked:

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

Our findings were:

Summary of findings

Are services safe?

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

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 7 November 2023.

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 breaches we found at our inspection on 7 November 2023.

Background

Dental Surgery is in Colindale, in the London Borough of Barnet and provides NHS and private dental care and treatment for adults and children.

The practice is on the first floor of a high street building and is not accessible to people who use wheelchairs and those with pushchairs. Car parking spaces are available near the practice.

The dental team includes 1 principal dentist and 1 trainee dental nurse. The practice has 1 treatment room.

During the inspection we spoke with the principal dentist. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open:

Monday, Tuesday, Wednesday and Friday from 9am to 5pm.

Thursday from 9am to 12pm.

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

- Improve the security of NHS prescription pads in the practice and ensure there are systems in place to track and monitor their use.
- Take action to ensure the guidance provided by the College of General Dentistry is followed when completing dental care records. In particular, ensure that patient care records include caries, oral cancer and periodontal risk assessment and recall based on risk.
- Take action to ensure that patient assessments are in compliance with current legislation and -follow relevant nationally recognised evidence-based guidance. In particular, improve the principal dentist`s awareness of the most recent guidance in relation to the classification of periodontal diseases.

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

We found that this practice was providing safe care and was complying with the relevant regulations.

At the inspection on 2 February 2024 we found the practice had made the following improvements to comply with the regulations:

- The decontamination process described by the principal dentist was in accordance with the national guidelines as laid out in the Department of Health publication 'Health Technical Memorandum 01-05: Decontamination in primary care dental practices' (HTM01-05). Work surfaces in Surgery 1 had been de-cluttered to ensure they can be easily cleaned. Single use matrix bands were being disposed of by the clinician after use. Dental burs were sterilised and pouched after use. The rip in the patient chair had been repaired and the practice had an action plan to replace the flooring in the decontamination room to an impervious one within 6-12 months. The infection prevention and control audit had been undertaken on 14 December 2023 and this was now reflective of the arrangements within the service. Further improvements could be made to ensure weekly air leakage tests on the vacuum autoclave tests were carried out and recorded.
- The principal dentist told us that all taps and the spittoon in Surgery 1 had been de-scaled.
- There were now effective systems in place to reduce the risk of fire. Recommendations made in the fire risk assessment dated 25 June 2023 had been acted upon. Portable heaters were no longer used, and combustibles had been removed from the office. The practice had fitted a smoke detector in the storage room and fire resisting doors had been installed in line with the risk assessment recommendations. We noted that the tape had been removed from the rear fire exit and a push-bar had been installed to allow easy exit in case of a fire. Fire evacuation drills were carried out bi-annually and the principal dentist had completed fire awareness and fire marshal training. We saw records of the monthly in-house testing of the smoke detectors. Further improvements could be made to increase the frequency of smoke detector testing to weekly and to ensure that testing of the emergency lighting system was added to the practice fire safety measures.
- The practice had updated their recruitment policy and this now reflected the relevant legislation. The principal dentist told us that the member of staff whose recruitment records previously did not include photographic ID, evidence of conduct in previous employment, record of Hepatitis B vaccination and details of qualification no longer worked at the practice. The principal dentist reassured us that in the future they would request the required recruitment documentation at the point of employment in line with their practice policy.
- Medical emergency drugs and equipment were available in line with the guidance issued by the British National Formulary and the Resuscitation Council (UK). Glucagon (the emergency medicine used to treat severe low blood sugar) was stored in the fridge and the fridge temperature was now monitored effectively. The principal dentist demonstrated an adequate understanding of how to manage medical emergencies. Further improvements could be made to ensure medical emergency scenarios were discussed in practice meetings.
- The principal dentist demonstrated a good understanding of how to respond in the event of a sharps injury. The practice ensured that only the dentist disposed of contaminated sharps and the sharps risk assessment was now reflective of the arrangements within the practice and included appropriate control measures.
- The practice had made improvements to ensure that only the dentist had access to the NHS prescription pads. Further improvements could be made to have effective systems in place to monitor NHS prescription pads to ensure missing prescriptions can be identified.
- Cleaning materials were stored securely in a lockable cabinet.

Are services safe?

- We noted that dental care records were now kept securely in lockable cabinets.
- The practice had implemented a stock control system to monitor the expiry date of dental materials.

Are services well-led?

Our findings

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

At the inspection on 2 February 2024 we found the practice had made the following improvements to comply with the regulations:

- The principal dentist showed commitment to delivering safe, sustainable and high-quality care. Our discussions with the principal dentist demonstrated that they had sufficient oversight of the day-to-day activities of the practice. They had also engaged a compliance company to support their efforts in becoming compliant with the legal requirements. The dental team worked together to implement improvements.
- Information presented during the inspection was well organised and easily accessible.
- We looked at 5 patient care records. Record keeping in relation to evidence of medical and social history, intraoral and extraoral examination, justification and reporting on radiographs had improved since our inspection on 7 November 2023. However, we noted that patient care records still did not contain all information in relation to care in accordance with the relevant guidance. For example, risk assessments and recall based on risk were not always recorded. Further improvements could be made to ensure that the principal dentist implemented the staging and grading system for the classification of periodontal diseases in accordance with the guidance published by the British Society of Periodontology.
- The practice had made improvements to ensure the trainee dental nurse was suitably supported in their role. The principal dentist had regular informal meetings with the trainee nurse where they covered topics such as safeguarding, management of sharps injuries, medical emergencies, and infection prevention and control. Further improvements could be made to ensure the practice kept records of these meetings.