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Karma Dental Care - London

Inspection report

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Overall summary

We undertook a follow up desk-based inspection of Karma Dental Care - London on 9 February 2022. 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 had access to a specialist dental adviser.

We undertook a comprehensive inspection of Karma Dental Care - London on 22 September 2021 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 well-led care and was in breach of regulations 17 and 18 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 Karma Dental Care - London 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 inspection we asked:

- Is it well-led?

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 breaches we found at our inspection on 22 September 2021.

Summary of findings

Background

Karma Dental Care Centre is in Fulham, in the London Borough of Hammersmith and Fulham and provides private dental care and treatment for adults and children.

The practice is located close to public transport links and car parking spaces are available near the practice. The dental team includes four dentists, a hygienist, a dental nurse, two trainee dental nurses, a receptionist and a practice manager. The practice has three treatment rooms.

On the day of the inspection we spoke with the principal dentist, a dental nurse and the practice manager. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday and Tuesday from 9.30am to 5.30pm.

Wednesday from 9.30am to 7.30pm.

Thursday from 9.30 am to 5.00pm.

Friday from 8.30am to 5.30pm.

Saturday from 10.00am to 2.00pm.

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

- Take action to implement recommendations in the practice's fire safety risk assessment and ensure ongoing fire safety management is effective.

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



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 9 February 2022 we found the practice had made the following improvements to comply with the regulations:

The practice ensured equipment was safe to use and maintained and serviced according to manufacturers' instructions.

Improvements were still needed to ensure the facilities were maintained in accordance with regulations. In particular, a fire risk assessment was carried out in line with the legal requirements and some fire safety protocols were in place; however, we could not be assured all recommendations made in the fire risk assessment had been actioned and the risks fully mitigated.

The practice had policies and procedures in place to ensure clinical waste was segregated and stored appropriately in line with guidance.

The practice had arrangements to ensure the safety of the X-ray equipment and we saw the required radiation protection information was available.

We saw evidence the dentists justified, graded and reported on the radiographs they took. The practice carried out radiography audits following current guidance and legislation.

The practice had systems for appropriate and safe handling of medicines.

The practice had systems for referring patients with suspected oral cancer under the national two-week wait arrangements.

We saw the provision of dental implants was in accordance with national guidance.

The practice had a recruitment policy and procedure to help them employ suitable staff and had checks in place for agency and locum staff. These reflected the relevant legislation.

Newly appointed staff had a structured induction and clinical staff completed continuing professional development required for their registration with the General Dental Council.

The practice had arrangements to ensure staff training was up-to-date and reviewed at the required intervals, this included training relating to sepsis awareness and fire safety.

The provider advised us they no longer offer conscious sedation to patients.