

Mr. Pramod Sabharwal

High Street Dental Practice

Inspection report

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Date of inspection visit: 12/10/2023
Date of publication: 17/10/2023

Overall summary

We undertook a follow up inspection on 12 October 2023. 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 provider was now meeting legal requirements.

We had previously undertaken a comprehensive inspection of the practice on 18 April 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 well-led care and was in breach of 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 High Street 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 well-led?

Our findings were:

We found this practice was providing well-led care in accordance with the relevant regulations. The provider had made effective improvements in relation to the regulatory breach we found at our previous inspection. In general improvements were noted in dental care records, hand hygiene, staff recruitment and fire safety.

These improvements now need to be embedded and sustained in the long run.

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

Summary of findings

- Improve the security of NHS prescription pads in the practice and ensure there are systems in place to identify any missing or lost scripts.

Background

High Street Practice provides both NHS funded and private dental care and treatment for adults and children. The practice is accessible for wheelchair users although the toilet is not and there is no dedicated parking for patients on site. There are 2 treatment rooms.

The dental team includes 1 dentist, 2 trainee dental nurses, a practice manager and a receptionist who works off-site.

The practice is open on Mondays from 9am to 5pm, and on Wednesdays from 10am to 7pm.

During the inspection we spoke with the dentist and the practice manager. We looked at practice policies and procedures and other records about how the service is managed.

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.

During this inspection we found the following improvements had been made to comply with the regulations:

- Staff no longer had long painted nails and the practice manager undertook regular audits of hand hygiene to ensure standard were met.
- The flooring had been sealed in the treatment room.
- Staff were monitoring the water temperature before manually scrubbing dirty instruments.
- The dead end in the water pipes identified in the practice's Legionella assessment had been removed. Staff now regularly flushed through little used water outlets and recorded when they did this.
- Staff recruitment had improved and personnel files we viewed showed that appropriate Disclosure and Barring Service checks had been undertaken and references obtained to ensure staff were suitable for their role.
- Evidence we viewed showed that the practice's CBCT machine had been serviced and was tested appropriately. There was signage on treatment room doors to warn people that X-rays took place there and the justification for radiographs was documented on patients' notes.
- Recommendations in the practice's fire risk assessment had been implemented such as improved signage, the installing of fire-retardant ceiling in the cellar and the placement of intumescent strips around the fire doors. However, we noted one fire door that did not close properly, and fire checks had failed to identify this. Staff now regularly practiced fire evacuations.
- The sharps' risk assessment had been updated and now covered all sharp items used in the practice.
- The practice's name and address were displayed on all medicines' containers. However, we noted there was still not a robust system in place to identify any lost or missing prescriptions, and stock control could be improved.
- Dental care records we viewed had greatly improved. Since our previous inspection the dentist had undertaken specific training in dental recording and had become a member of the College of General Dentistry. He had carried out peer reviews of other dentist's records to better understand what was required.

Overall, we found the practice had implemented effective measures to address the issues we had identified during our previous inspection.