

UK Smile Ltd

Your Dentist London

Inspection Report

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Overall summary

We undertook a follow up focused inspection of Your Dentist London on 27 February 2019. 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 was supported by a specialist dental adviser.

We undertook a comprehensive inspection of Your Dentist London on 15 August 2018 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 and was in breach of regulation 12 - Safe care and treatment and 17 – Good governance 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 Your Dentist London on our website www.cqc.org.uk.

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

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.

Our findings were:

Are services safe?

We found that this practice was providing safe care in accordance with the relevant regulations. The provider had made improvements in relation to the regulatory breach we found at our inspection on 15 August 2018.

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 breach we found at our inspection on 15 August 2018.

Background

Your Dentist London is in Victoria in the London Borough of Westminster. The practice provides private treatment to patients of all ages.

The practice has three treatment rooms, located on the ground floor; two were in use at the time of our inspection. The practice is situated close to public transport bus and train services.

The dental team includes the principal dentist and three associate dentists. Two dental nurses also work at the practice. The clinical team are supported by a compliance manager and a receptionist.

The practice is owned by a company and as a condition of registration must have a person registered with the

Summary of findings

Care Quality Commission as the registered manager. Registered managers have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run. The registered manager at Your Dentist London was the principal dentist.

During the inspection we spoke with the principal dentist, one associate dentist, one dental nurse, and the receptionist.

We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Mondays, Tuesdays, Thursdays and Fridays between 8.30am and 6pm.

Wednesdays between 10.30am and 8pm

Our key findings were:

- There were suitable safeguarding arrangements in place and staff had access to information to assist them to report concerns.
- Improvements had been made to the arrangements for ensuring that equipment used to sterilise dental instruments was serviced and maintained in line with the manufacturer's instructions.
- There were arrangements to monitor and improve quality in relation to dental radiography through a system of audits.
- There were suitable systems in place to deal with medical emergencies. The recommended life-saving equipment and medicines were available and staff had completed training in medical emergencies.
- Improvements had been made to the arrangements for assessing and mitigating Legionella risks within the practice.
- The practice infection control procedures had been reviewed and improved so that infection prevention and control audits were carried out in line with current guidance.
- Improvements had been made to the arrangements for recording, investigating, learning from incidents or significant events with a view to preventing further occurrences.
- Information in relation to safety including patient safety alerts, recalls and rapid response reports issued from the Medicines and Healthcare products Regulatory Agency (MHRA) were reviewed and shared to help monitor and improve safety.
- The practice's sharps procedures were in compliance with the Health and Safety (Sharp Instruments in Healthcare) Regulations 2013.
- Improvements had been made to the arrangements to respond to the needs of patients with disability and the requirements of the Equality Act 2010.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services safe?

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

There were suitable arrangements in place to safeguard children and vulnerable adults.

Improvements had been made to the arrangements for dealing with medical emergencies.

Improvements had been made to the practice arrangements for assessing risks and for monitoring safety.

There were risk assessments in place in relation to infection control practices, Legionella and the use and disposal of dental sharps. There were arrangements for the regular service and maintenance of the equipment.

There were arrangements for receiving, reviewing and acting on safety alerts and other information to improve safety within the practice.

No action



Are services well-led?

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

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

There was a defined management structure and improvements had been made to the oversight and management systems for the day to day management of the practice.

Improvements had been made so that they practice policies and procedures were kept under review and updated as needed to ensure that they reflected current guidance and legislation.

The practice had improved its systems to effectively assess and mitigate risks where we had identified issues. There were reviews and audits carried out to monitor and review quality and safety within the practice particularly in relation to infection control, dental sharps and Legionella.

No action



Are services safe?

Our findings

At our previous inspection on 15 August 2018 we judged the practice was not providing safe care and was not complying with the relevant regulations. We told the provider to take action as described in our requirement notices. At the inspection on 27 February 2019 we found the practice had made the following improvements to comply with the regulations:

The practice arrangements to assess and mitigate risks and ensure the delivery of safe care and treatment had been reviewed and furthered strengthened and we found:

- There were suitable safeguarding arrangements in place and staff had access to information to assist them to report concerns. We saw that staff had access to safeguarding policies and procedures and staff who we spoke with were aware of how and to whom to report concerns. Staff had access to the contact details for the local safeguarding agencies.
- Improvements had been made to the arrangements for ensuring that equipment was regularly checked, maintained and serviced in line with the manufacturer's instructions
- Improvements had been made to the arrangements for dealing with medical emergencies. We noted that the recommended emergency medicines and equipment were available for use, taking into account guidelines issued by the British National Formulary, the Resuscitation Council (UK), and the General Dental Council (GDC) standards for the dental team. There were suitable arrangements for checking emergency medicines and equipment. The majority of staff had

undertaken training in dealing with medical emergencies and additional training was planned for early March 2019 to include advanced airways management.

- The arrangements for assessing and mitigating risks had been reviewed and strengthened.
- Infection prevention and control audits were carried out every six months and the results of these were used to make improvements as needed.
- There was a Legionella risk assessment in place and suitable systems for disinfecting dental unit waterlines and monitoring water temperatures to minimise the risk of bacterial growth in the water systems.
- There arrangements for assessing and mitigating the risks associated with the use and disposal of dental sharps had been reviewed. There were procedures and a risk assessment in place and staff followed relevant safety regulation when using needles and other sharp dental items.

The provider had also made further improvements:

- The practice had reviewed the arrangements for receiving and responding to patient safety alerts, recalls and rapid response reports issued from the Medicines and Healthcare products Regulatory Agency (MHRA). There were systems for sharing relevant safety information and acting on this as needed to improve safety within the practice.

These improvements showed the provider had taken action to comply with the regulations when we inspected on 27 February 2019.

Are services well-led?

Our findings

At our previous inspection on 15 August 2018 we judged the provider was not providing well led care and was not complying with the relevant regulation. We told the provider to take action as described in our requirement notice. At the inspection on 27 February 2019 we found the practice had made the following improvements to comply with the regulation.

The practice governance systems and processes had been reviewed and strengthened to ensure compliance in accordance with the fundamental standards of care and we found:

- There were arrangements in place to review and update the practice policies and procedures so that they were relevant and reflected current guidance and legislation.

- There were arrangements to assess and improve quality of the services provided through a system of reviews and audits. The findings from these audits were shared with the practice team and used to maintain and improve quality.
- There were arrangements in place to assess and minimise risks to the health, safety and welfare of patients and staff through a system of risk assessments.

The practice had also made further improvements:

- The practice had reviewed its responsibilities under the Equality Act 2010. There was a disability access audit in place and arrangements to keep this under review.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation when we inspected on 27 February 2019.