

# Dr H Kafil Practice Limited

# N12 Dental Care

## Inspection Report

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### Overall summary

We undertook a follow up focused inspection of N12 Dental Care on 29 November 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 remotely by a specialist dental adviser.

We undertook a comprehensive inspection of N12 Dental Care on 16 October 2019 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 17 was in breach of regulation 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 N12 Dental Care on our website [www.cqc.org.uk](http://www.cqc.org.uk).

As part of this inspection we asked:

- 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 area where improvement was required.

#### **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 breach we found at our inspection on 16 October 2019

#### **Background**

N12 Dental Care is in Barnet and provides NHS and private dental treatment to adults and children.

There is level access for people who use wheelchairs and those with pushchairs. Car parking spaces are available near the practice.

The dental team includes the principal dentist, three associate dentists, three dental nurses, one trainee dental nurse, one dental hygienist and two receptionists. The practice has four treatment rooms.

The practice is owned by a company and as a condition of registration must have a person registered with the 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 N12 Dental Care is the principal dentist.

The practice is open: Mondays to Fridays 8.30am to 5.30pm

# Summary of findings

## **Our key findings were:**

- The practice had infection control procedures which reflected published guidance and there were arrangements for minimising the risks associated with Legionella.
- The provider had thorough staff recruitment procedures.
- Staff knew how to deal with emergencies. Appropriate medicines and life-saving equipment were available.
- The practice had made improvements to its leadership.
- The practice had carried out a Disability Access audit.
- The practice had asked patients for feedback about the services they provided and there were now systems in place for ongoing patient feed to take place.

# 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 our previous inspection on 16 October 2019 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 29 November 2019 we found the practice had made the following improvements to comply with the regulation.

- There was a defined management structure, and improvements had been made to the oversight and management of systems for the day to day running of the practice.
- There were arrangements to monitor, review and improve the quality of the services provided through acting on the findings of audits and reviews.
- Staff knew how to deal with emergencies. Appropriate medicines and life-saving equipment were available.

- Improvements had been made in relation to the management and maintenance of the premises; the five-year fixed electrical wire safety check had been carried out and recommendations completed.
- The practice had made improvements to the procedures to reduce the possibility of Legionella or other bacteria developing in the water systems. The Legionella risk assessment had been reviewed. We noted that all outstanding recommendations had been actioned.
- An Antimicrobial prescribing audit had been carried out, taking into account the guidance provided by the Faculty of General Dental Council.
- There was now a system in place for receiving and acting on national alerts related to equipment and medicine safety alerts.
- The practice had carried out a Disability Access audit.
- NHS prescriptions were stored as described in current guidance.

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 29 November 2019