

Dr. Farzad Ramezani

Brentfield Dental Centre

Inspection report

10 Kingfisher Way
Brentfield Road, Neasden
London
NW10 8TF
Tel: 02084517226
www.brentfielddentalcentre.com

Date of inspection visit: 9 August 2022
Date of publication: 27/09/2022

Overall summary

We undertook a follow up focused inspection of Brentfield Dental Centre on 9 August 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 was supported by a specialist dental adviser.

We undertook a focused inspection of Brentfield Dental Centre on 16 May 2022 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 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 Brentfield Dental Centre dental practice 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 breach we found at our inspection on 16 May 2022.

Summary of findings

Background

Brentfield Dental Centre is in Neasden, in the London borough of Brent, and provides NHS and private dental care and treatment for adults and children.

There is level access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces, including dedicated parking for people with disabilities, are available near the practice. The practice had made reasonable adjustments to support patients with additional needs.

The dental team includes the principal dentist, one trainee dental nurse, one receptionist, a part-time hygienist and a qualified dental nurse, who also carries out practice management duties. The practice has two treatment rooms a joint reception/waiting area and a separate decontamination room.

During the inspection we spoke with the dentist, the qualified 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:

Monday to Thursday 9am to 5.30pm.

Friday 9am to 3.30pm.

Saturday from 9am to 1.30pm by appointment only.

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 regulation.

At the inspection on 9 August 2022 we found the practice had made the following improvements to comply with the regulations:

- A Legionella risk assessment had been carried out on 1 June 2022.
- We saw evidence that systems and processes had been put in place to carry out monthly hot and cold outlets temperatures checks.
- The provider had implemented a log to record the daily flushing of Dental Unit Waterlines (DUWLs) and the weekly flushing of infrequently used outlets.
- Emergency equipment and medicines were available in accordance with guidance and they were checked regularly to ensure they were in date and suitable for use.
- The provider had procured a new oxygen cylinder that had been serviced, and systems were now in place for it to be checked at appropriate intervals.
- Dental records were legible and complete, and they accurately reflected the assessments carried out and treatments provided to patients. Electronic dental care records were now being used and the templates had been adapted to aid record keeping. Dental care records we looked at included reason for patients' attendance, diagnosis, intraoral and soft tissue checks, external examination, Basic Periodontal Examination (BPE), X-ray justification, X-Ray grading and reporting in line with the College of General Dentistry (CGDent) guidelines. Improvements could be made to ensure that the new grading system for dental radiographs was implemented in line with the relevant guidance.

The provider had also made further improvements:

- The provider had introduced monthly meetings with the manager of the medical centre they share the premises with to ensure that they had up to date records and information relating to the management of regulated activities.
- The provider had adapted an effective monitoring system to ensure that all documentation in relation to recruitment was recorded and maintained appropriately. Updated Disclosure and Barring Service (DBS) checks and Hepatitis B antibody blood test results were available for all members of staff. We saw evidence that recruitment checks for the hygienist appointed since the last inspection had been carried out in line with the relevant legislation and a structured induction had been completed.
- A sharps risk assessment had been undertaken and it included all types of sharps used and the practice specific control measures to mitigate the risks arising from the use of these.
- A safer sharps system had been implemented and staff had started using disposable matrix bands for endodontic treatment.