

Dr. Nooshin Vasfi

Premier Smile Dental Excellence

Inspection report

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Overall summary

We undertook a follow up focused inspection of Premier Smile Dental Excellence on 2 November 2023. This inspection was carried out to review 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 advisor.

We had previously undertaken a comprehensive inspection of Premier Smile Dental Excellence on 12 July 2023 and 19 July 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 safe or well-led care and was in breach of regulation 12 and 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 Premier Smile Dental Excellence 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. 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 safe?
- Is it well-led?

Our findings were:

Are services safe?

Summary of findings

We found this practice was providing safe care in accordance with the relevant regulations.

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 12 July 2023 and 19 July 2023.

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 12 July 2023 and 19 July 2023.

Background

Premier Smile Dental Excellence is in Leighton Buzzard and provides NHS and private dental care and treatment for adults and children.

There is step free access at the rear of the practice for people who use wheelchairs and those with pushchairs. Once inside, the practice has a portable ramp to access the treatment rooms. Car parking spaces are available near the practice. Dedicated parking for people with disabilities is available at the rear of the property. The practice has made reasonable adjustments to support patients with access requirements.

The dental team includes 1 endodontist specialist, 1 dentist, 1 dental hygienist and 3 qualified dental nurses. The practice has 3 treatment rooms.

During the inspection we spoke with 1 dentist and 2 dental nurses. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open:

Monday to Friday from 8.30am to 6pm.

Saturday 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 safe?

No action ✓

Are services well-led?

No action ✓

Are services safe?

Our findings

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

At the inspection on 2 November 2023, we found the practice had made the following improvements to comply with the regulations:

- Systems to monitor fire risk were in place including maintenance of firefighting detection equipment and fire exits. The emergency lighting was serviced on 17 August 2023. An external fire risk assessment was completed on 24 July 2023 and all recommended actions had been completed, this included a new fire alarm system which was installed in October 2023.
- The 5 yearly electrical fixed wire testing was completed on 18 July 2023.
- Procedures to reduce the possibility of Legionella or other bacteria developing in water systems had improved. We noted that monthly checks of hot and cold-water temperatures were now completed accurately. A legionella risk assessment was completed by an external company on 31 July 2023. The practice had reviewed all recommended actions.
- Systems to ensure equipment was maintained and serviced at recommended intervals was in place. The compressor was serviced on 9 August 2023.
- Staff had received training in relation to the safe handling and disposal of sharps. The practice had also discussed protocols in staff meetings and information was available in surgeries. The provider had also invested in safer sharps systems.
- Systems to monitor the safe management of prescriptions was in place to include a system to identify lost or missing prescriptions.

The practice had also made further improvements:

- The practice had implemented changes to waste handling protocols. We saw waste was segregated and disposed of correctly and included the practice details on clinical waste bins.
- Rectangular collimators were available for use on each X-ray unit in compliance with The Ionising Radiations Regulations 2017 and Ionising Radiation (Medical Exposure) Regulations 2017.

These improvements show the practice had taken sufficient action to comply with regulations when we inspected on 2 November 2023.

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 2 November 2023, we found the practice had made the following improvements to comply with the regulations:

Please list here the improvements found on inspection:

- The practice had implemented new procedures in relation to receiving and acting upon safety alerts, incidents and accidents. We saw safety alerts, incidents and accidents were recorded with actions taken and learning shared amongst the practice team during staff meetings.
- Systems were in place to manage significant events. We saw the practice had recorded 7 significant events within the past 3 months. We saw learning and actions had been taken which included purchasing new equipment, seeking external advice and discussing in staff meetings.
- A timetable for completing required audits and servicing of equipment was in place.
- Systems and processes were more established with staff. Staff told us they had more time to complete their duties as the practice had increased staff to ensure the team could improve oversight of governance systems. We saw that quality and assurance and monitoring and mitigating risk was conducted. For example, the practice had completed an infection control audit, radiograph audit, record keeping audit and antimicrobial audit since our previous visit.

The practice had also made further improvements:

- The practice had improved protocols relating to recording and auditing patient dental care records to ensure necessary information was recorded.

These improvements show the practice had taken sufficient action to comply with regulations when we inspected on 2 November 2023.