

Miss Atena Shirafkan

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Inspection report

341 Kilburn High Road
London
NW6 7QB
Tel: 02076256060
www.lemogeclinic.co.uk

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Overall summary

We undertook a follow up inspection of Miss Atena Shirafkan on 14 April 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 Miss Atena Shirafkan on 13 January 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 regulations 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 Miss Atena Shirafkan 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?

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

Summary of findings

The provider had made improvements in relation to the regulatory breach we found at our inspection on 13 January 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 breach we found at our inspection on 13 January 2023.

Background

Miss Atena Shirafkan is located in Kilburn in the London Borough of Brent and provides private dental care and treatment for adults.

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

The dental team includes 1 dentist, 1 dental nurse, 1 trainee dental nurse and a practice manager. The practice has two treatment rooms.

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

The practice is open:

Monday to Friday from 9am to 5pm

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 14 April 2023 we found the practice had made the following improvements to comply with the regulations:

- There were effective arrangements to protect patients and staff against the risk of the Hepatitis B virus. All clinical staff had Hepatitis B vaccines and evidence of the effectiveness of the vaccine.
- The practice had systems to assess and mitigate the risk of fire. A fire safety risk assessment was carried out in February 2023 and areas identified where improvements were required had been acted on. Fire safety equipment was tested regularly and fire safety evacuation exercises were carried out and recorded. All staff had completed training in fire safety awareness.
- There were systems to assess and mitigate the risk of Legionella growth in the practice water systems in line with a risk assessment. There were arrangements to monitor water temperatures to minimise the risk of Legionella growth in the practice water systems.
- There were systems to manage medicines safely. Medicines were stored in accordance with the manufacturer's instructions.

The practice had also made further improvements:

- The practice had implemented audits for prescribing of antibiotic medicines taking into account the guidance provided by the College of General Dentistry.
- The practice had implemented a system to ensure patient referrals to other dental or health care professionals were centrally monitored to ensure they were received in a timely manner and not lost.

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 14 April 2023 we found the practice had made the following improvements to comply with the regulations:

- Infection prevention and control audits were completed accurately and used as part of a system to monitor and improve infection control procedures at the practice.
- Audits of dental radiographs were carried out in accordance with relevant guidance to assess, monitor and improve the quality of dental X-rays.
- There were systems to maintain records in relation to the recruitment and training for staff. Staff records included proof of identity for all staff, and evidence of registration with the General Dental Council for relevant staff.
- Records in relation to training, continuous professional development and staff appraisal were available for all staff.

The practice had also made further improvements:

Improvements had been made to the practice protocols regarding auditing patient dental care records to check that necessary information is recorded.