

# Sundeep Patel Waldron Dental Clinic Inspection report

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#### **Overall summary**

We undertook a focused inspection on 15 December 2020 which included a review of evidence submitted to us by the provider before the site visit. This inspection was carried out to follow up on the actions taken by the registered provider to improve the quality of care and to confirm that the practice was now meeting legal requirements.

Prior to our site visit we asked the provider to send us evidence of the improvements they had implemented. This allowed us to carry out a shorter site visit when we confirmed the required improvements to the service had been made.

The inspection was led by a CQC inspector who was accompanied by a specialist dental adviser.

We undertook a comprehensive inspection of Waldron Dental Clinic on 22 July 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 Safe or Well led care and was in breach of various regulations under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. These included Regulation 12 -Safe care and treatment, Regulation 17 - Good governance, Regulation 18 Staffing. You can read our report of that inspection by selecting the 'all reports' link for Waldron Dental Clinic on our website www.cqc.org.uk.

As part of this inspection we asked:

- 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.

#### Our findings were:

#### Are services safe?

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

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## Summary of findings

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 22 July 2019.

#### 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 22 July 2019.

#### Background

Waldron Dental Clinic is in the London Borough of Lewisham and provides private dental treatment to patients of all ages.

There is level access for people who use wheelchairs and those with pushchairs.

The dental team includes three dentists, one dental nurse, one dental hygienist, one practice manager and one receptionist. The practice has two treatment rooms.

The practice is owned by an individual who is the principal dentist there. They 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 practice is open: From 11.00am to 8.00pm Monday to Friday.

#### Our key findings were:

Improvements had been made to the decontamination process, but further improvements were still required.

Appropriate medicines and life-saving equipment were available.

Since the last inspection, the practice had stopped undertaking sedation

The practice had stopped using a wire brush to clean instruments as part of the decontamination and cleaning process.

There were areas where the provider could make improvements. They should:

Improve the practice's infection control procedures and protocols taking into account the guidelines issued by the Department of Health in the Health Technical Memorandum 01-05: Decontamination in primary care dental practices, and having regard to The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance' In particular in regards to the decontamination flow and zoning of dirty and clean areas.

## 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	$\checkmark$
Are services well-led?	No action	$\checkmark$

### Are services safe?

### Our findings

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

At our previous inspection on 22 July 2019 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 notice. When we inspected on 15 December 2020, we found the practice had made the following improvements to comply with Regulations 12.

The provider had ensured the availability of equipment in the practice to manage medical emergencies including oxygen cylinders, self-inflating bags with reservoirs for adults and children

and the appropriate number and range of masks available to use with the oxygen.

The defibrillator had been opened and was being tested.

Clamps used with dental dams were sterilised appropriately.

The practice had stopped using metal bur brushes to scrub instruments.

Dirty instruments were no longer being rinsed under running water in the same sink containing the solution for scrubbing them. There were separate arrangements for scrubbing and rising.

Sharp boxes were being handled appropriately.

However, improvements could still be made in regard to the flow from dirty to clean. Some areas were cluttered, and improvements could be made in regards to the zoning of [DC1] the clean and dirty areas.

These improvements showed the provider had taken action to comply with Regulations 12 and 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 when we inspected on 15 December 2020.

## 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 22 July 2019 we judged the provider was not providing well led care and was not complying with the relevant regulations. We told the provider to take action as described in our warning and requirement notice. At our inspection of 15 December 2020, we found the practice had made the following improvements to comply with Regulations 17 and 18.

At the last Inspection we found that not all the people providing care and treatment had the qualifications, competence, skills and experience to do so safely in regards to sedation. At this inspection we found the practice had stopped undertaking sedation.

The radiography local rules had been updated and staff had signed to confirm they had seen them in March 2020.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with Regulations 17 and 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 when we inspected on 15 December 2020.