

Ishak Practices Ltd

Highbury Dental Care

Inspection Report

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Overall summary

We undertook a focused inspection of Highbury Dental Care on 18 February 2020. 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 Highbury Dental Care on 16 September 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, effective or well led care and was in breach of regulations 12, 17 and 19 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 Highbury Dental Care on our website www.cqc.org.uk.

As part of this inspection we asked: Remove as appropriate:

- Is it safe?
- Is it effective?
- Is it well-led?

Our findings were:

Are services safe?

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 16 September 2019.

Are services effective?

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

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 16 September 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 16 September 2019.

Background

Highbury Dental Care is in the Bulwell area of Nottingham and provides NHS and private treatment for adults and children.

Summary of findings

There is level access to the practice for people who use wheelchairs and those with pushchairs and an automatic front door. Car parking spaces, including dedicated parking for people with disabilities, are available near the practice.

The dental team includes two dentists, three dental nurses who also had reception duties. The practice has three treatment rooms and centralised decontamination facilities.

The practice is owned by an organisation 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 Highbury Dental Care is one of the providers, they are not based at Highbury Dental Care.

During the inspection we spoke with the provider. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open: Monday: from 9am to 8pm, Tuesday to Thursday: from 9am to 5pm and Friday: from 9am to 2pm.

Our key findings were:

- The safeguarding policy had been reviewed and now clearly identified who was the safeguarding lead.
- Staff recruitment records were in accordance with Schedule 3 of the Health and Social Care Act 2008 Regulations.
- The fire risk assessment had been reviewed and outstanding actions had been completed.
- Since the last inspection in September 2019, radiography audits had been completed for all dentists working at the practice.
- The local rules for all X-ray machines had been reviewed and updated.
- There was evidence that every member of staff had been immunised against the Hepatitis B virus and had immunity.
- Medical emergency equipment had been reviewed and all equipment identified in national guidance was available.
- Risk assessments had been completed for each substance identifiable under the Control of Substances Hazardous to Health (COSHH) regulations.
- Since the last inspection in September 2019, two infection prevention and control audits had been completed.
- A tracking system for NHS prescriptions had been devised and was ready to be put into use.
- Antimicrobial audits had been completed in September 2019.
- The system for recording significant events had been reviewed and significant events discussed in a staff meeting with all staff.
- The arrangements for identifying sepsis had been reviewed. Posters were on display and staff had received training.
- A new dentist had been recruited to address the issue of cancelled appointments.
- Duty of candour policy was discussed with all staff in September 2019. A new policy had been introduced in January 2020.
- The system for audits had been reviewed, and two members of staff had been recruited to specifically complete audits within the organisation.

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 effective?	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 our previous inspection on 16 September 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. At the inspection on 18 February 2020 we found the practice had made the following improvements to comply with the regulation.

- The provider had reviewed the safeguarding policy and ensured only the latest policy was available for staff. This policy clearly identified who was the safeguarding lead at Highbury Dental Care.
- We saw staff recruitment records for all five members of staff currently employed at the practice. The recruitment records contained all of the information required by Schedule 3 of the Health and Social Care Act 2008 Regulations. This included photographic identification, references, and the staff members' employment histories.
- A new fire risk assessment had been completed by an external company in January 2020. Outstanding actions from the previous fire risk assessment had been completed. This included fitting of a fire door to the room containing the compressor. Fire drills had been held and recorded in November 2019 and January 2020.
- Records showed both dentists had completed radiography audits in September 2019 and one of the dentists had completed a further audit in February 2020.

- The local rules for all X-ray machines had been reviewed and updated. They now identified digital X-rays were being used, which staff could take X-rays and who the Radiation Protection Supervisor was. The practice had also introduced a monitoring system to check individual dentists did not take more than 150 radiographs per week. This number and above would increase the risk to staff caused by radiation.
- We reviewed the staff files and saw evidence that every member of staff had been immunised against the Hepatitis B virus and had immunity.
- Medical emergency equipment had been reviewed and all equipment identified in national guidance was available. This included a full set of clear face masks in sizes 0-4 for the self-inflating bag which were sealed and stamped with a use by date.
- Risk assessments had been completed for each substance identifiable under the Control of Substances Hazardous to Health (COSHH) regulations. These to accompany the product data safety sheets we saw at our previous inspection in September 2019.
- Since the last inspection in September 2019, two infection prevention and control (IPS) audits had been completed. Issues identified at our previous inspection in respect of IPS audits had been addressed.
- The practice had developed a tracking system for NHS prescriptions. This recorded the number of every prescription in the practice and increased the security of NHS prescriptions held at the practice.

These improvements showed the provider had taken action to comply with the regulation when we inspected on 18 February 2020.

Are services effective?

(for example, treatment is effective)

Our findings

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

At our previous inspection on 16 September 2019 we judged the practice was not providing effective care and was complying with the relevant regulations. We told the provider to take action as described in our requirement notice. At the inspection on 18 February 2020 we found the practice had made the following improvements to comply with the regulation.

- The system for recording significant events had been reviewed, with the introduction of a new analysis sheet to record and interpret the information. Significant events and near events had been discussed in a staff meeting in September 2019 with all staff.

- The arrangements for identifying sepsis had been reviewed. Posters were now on display within the practice, and staff had received sepsis training.

The practice had also made further improvements:

- At our last inspection in September 2019 we saw that dentists were not completing antimicrobial prescribing audits. Guidance from the Faculty of General Dental Practice identifies antimicrobial prescribing audits should be completed at least annually. Records showed they had been completed in September 2019. Following the inspection, the provider had employed two members of staff specifically to complete audits within the organisation, this will include antimicrobial prescribing audits.

These improvements showed the provider had taken action to comply with the regulation when we inspected on 18 February 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 16 September 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 requirement notice. At the inspection on 18 February 2020 we found the practice had made the following improvements to comply with the regulation.

- During our last inspection in September 2019 we were informed by some patients they had had appointments cancelled at short notice. The provider explained one of the dentists had been on long-term sick leave which

had contributed to this problem. This dentist was due to return to work within the coming days and another new dentist had been recruited to address the issue of cancelled appointments.

- The system for audits had been reviewed at the practice. Two members of staff had been recruited to specifically complete audits within the organisation, and the provider told us they were confident this would make a big difference to how audits were completed and would ensure greater consistency.

The practice had also made further improvements:

- Duty of candour policy was discussed with all staff in September 2019. A new policy had been introduced in January 2020.

These improvements showed the provider had taken action to comply with the regulation when we inspected on 18 February 2020.