

Apple Dental Care

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Inspection Report

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Overall summary

We undertook a follow up focused inspection of Apple Dental Care on 6 August 2019. 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 comprehensive inspection of Apple Dental Care on 11 March 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 regulations 12 safe care and treatment, 17 good governance and 18 staffing 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 Apple Dental Care 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 and send us an action plan (requirement notice only). We then inspect again after a reasonable interval, focusing on the areas where improvement was required.

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 11 March 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 6 August 2019.

Background

Apple Dental Care is in the London Borough of Hammersmith. The practice provides predominantly NHS and some private treatments to patients of all ages.

The practice is located on the ground and lower ground floor of purpose adapted premises. The layout of the building did not afford the provision of step free access or accessible toilet facilities.

The practice is situated close to public transport bus services.

Summary of findings

The dental team includes the principal dentist who owns the practice, three associate dentists and three dental nurses. The clinical team are supported by a practice manager and a receptionist.

The practice is owned by a partnership between the principal dentist and the practice manager 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 Apple Dental Care was the practice manager.

During the inspection we spoke with the practice manager, one 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:

Mondays between 9am and 7pm,

Tuesdays to Friday between 9am and 6pm and

Saturdays between 9.40am and 1.30pm.

Our key findings were:

- The provider had improved the practice infection control procedures so that they reflected published guidance.
- There were effective arrangements for dealing with medical emergencies and appropriate medicines and equipment were available.
- There were effective arrangements for assessing and mitigating risks to patients and staff.
- There were systems to ensure that staff were supported and undertook appropriate training.
- There were arrangements for receiving and responding to patient safety alerts, recalls and rapid response reports issued from the Medicines and Healthcare products Regulatory Agency (MHRA) and through the Central Alerting System (CAS), as well as from other relevant bodies, such as Public Health England (PHE).
- The practice had protocols to ensure that patient referrals were monitored suitably.

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 our previous inspection on 11 March 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 6 August 2019 we found the practice had made the following improvements to comply with the regulation:

- The practice had reviewed and improved the arrangements for ensuring that equipment to manage medical emergencies was ready for use taking into account guidelines issued by the Resuscitation Council (UK). The recommended emergency medicines and equipment were available and there were arrangements to check these to ensure that they were in date and ready for use.
- The arrangements for assessing and mitigating risks in relation products identified under Control of Substances Hazardous to Health (COSHH) 2002 Regulations had been improved. There were risk assessments and information to help staff minimise and deal with accidental exposure to these items.

- The practice had improved the arrangements for ensuring that infection prevention and control risk assessments were carried out having regard to The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance'. There were systems in place to assess and minimise risk associated with the use and disposal of dental sharps.

The provider had also made further improvements:

- The practice had reviewed the arrangements for receiving and responding to patient safety alerts, recalls and rapid response reports issued from the Medicines and Healthcare products Regulatory Agency (MHRA) and through the Central Alerting System (CAS), as well as from other relevant bodies, such as Public Health England (PHE). There were systems to review safety alerts and share any relevant safety information with the practice team.

These improvements showed the provider had taken action to comply with the regulation when we inspected on 11 March 2019.

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 11 March 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 6 August 2019 we found the practice had made the following improvements to comply with the regulations.

- The practice had made improvements to the governance arrangements so that the outcomes from reviews, internal and external risk assessments were acted on to help identify and mitigate risks and to improve quality and safety within the practice.
- The practice information governance and data protection policies had been reviewed and updated so that they were in compliance with General Data Protection Regulations requirements (GDPR) (EU) 2016/679.

- There were systems in place to ensure that staff undertook training in areas relevant to their roles including training in basic life support, safeguarding children and vulnerable adults, and training in infection control and dental radiography. Records which we looked at showed that clinical staff were up to date with their continuing professional development and all staff undertook training updates periodically.

The provider had also made further improvements:

- The practice had reviewed its protocols for making and monitoring patient referrals to other dental services. There were systems to ensure that urgent and routine referrals were followed up to ensure that patients received prompt treatment.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulations: when we inspected on 6 August 2019.