

Harley Street Dental Centre Limited Harley Street Dental Centre Inspection report

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Overall summary

We undertook a follow up focused inspection of Harley Street Dental Centre on 31 July 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 had remote access to a specialist dental advisor.

We had previously undertaken a comprehensive inspection of Harley Street Dental on 4 May 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 and 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 Harley Street Dental Centre 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 and send us an action plan (requirement notice only). We then inspect again after a reasonable interval, focusing on the area(s) 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 4 May 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 4 May 2023.

Background

Harley Street Dental Practice is in London and provides private dental care and treatment for adults and children.

There are a couple of low steps to access the practice, however people who use wheelchairs and those with pushchairs can access the building. Car parking spaces, including dedicated parking for disabled people, are available near the practice.

The dental team includes a dentist and a dental nurse. The practice consists of one room, and the decontamination of instruments is carried out in the surgery. There is a waiting room that is shared with other services in the building.

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

The practice is open: 9am to 5pm Monday to Friday by appointment.

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 the inspection on 31 July 2023 we found the practice had made the following improvements to comply with the regulation:

- The medical emergency equipment was fully stocked and had all required items. This included the spacer device for inhaled bronchodilators, child and adult self-inflating bags with reservoir, size 0-4 clear face masks for self-inflating bags and oropharyngeal airways sizes 0-4.
- The compressor had been serviced in accordance with manufacturers guidance, we saw the service certificate to confirm this.
- The practice were carrying out routine daily, weekly, and monthly tests to the autoclave. Logs of the tests were maintained.
- The decontamination of dental instruments was in accordance with guidance. There was a dedicated area for decontamination. The practice had installed 2 new sinks (for washing and rinsing) and there was clear zoning for dirty to clean.

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 31 July 2023 we found the practice had made the following improvements to comply with the regulation:

- Systems were in place for infection control and radiography audits to be carried out in line with guidance.
- Dental care records were maintained in line with guidance. Risk ratings for caries, tooth wear and periodontal
 assessments were now being routinely recorded, X-rays were justified, graded and reported on, basic periodontal
 examination scores were recorded, periodontal charting was completed and treatment options were being recorded.
- There was a policy in place for obtaining consent. Patient consent to care and treatment was obtained and documented appropriately.
- The practice had procedures in place for patients to complain. This included a complaints policy and complaints log. Information was available to patients on how they could make a complaint. At the time of the visit there were no recorded complaints.

The provider had processes for providing written information to patients. They had created a patient information leaflet and put processes in place to provide patient treatment plans.