

Dr. Zeenat Ishak

Collingham Dental Practice

Inspection Report

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Overall summary

We carried out an announced comprehensive inspection of this practice on 3 November 2016. Breaches of legal requirements were found. After the comprehensive inspection, the practice wrote to us to say what they would do to meet legal requirements in relation to breaches in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3) Regulation 17: Good governance. We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to that requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Collingham Dental Practice on our website at www.cqc.org.uk.

We carried out an announced follow up inspection on 13 July 2017 to ask the practice the following key question; Are services well-led?

Our findings were:

Are services well-led?

We found that this practice was providing well-led care in accordance with the relevant regulations.

Background

Collingham Dental Practice is a dental practice providing both NHS and private dental treatment for adults and

children. The practice is located in premises close to the centre of the village of Collingham in north Nottinghamshire. There is car parking available to the front of the premises. The practice has four treatment rooms, all four of which are on the first floor, and which are accessed either by a flight of stairs or by a passenger lift.

Services provided include general dentistry, dental hygiene, crowns and bridges, and root canal treatment.

The practice is open from 9 am to 6.30pm on Monday and Wednesdays, 9 am to 5 pm on Tuesdays and Thursdays and 9 am to 2 pm on Fridays. The practice closes from Monday to Thursday for lunch from 1pm to 2 pm.

The practice owner is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons 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 has two dentists who are able to provide general dental services including endodontic (root canal) treatment. They are supported by a dental nurse, a trainee dental nurse, two part time dental hygienists and a practice manager/receptionist.

Summary of findings

Our key findings were:

- The practice had reviewed its system for receiving national patient safety and medicines alerts from the Medicines and Healthcare Products Regulatory Authority (MHRA).
- The practice had reviewed its staff recruitment procedures to ensure they were compliant with the regulations. The necessary documentation to demonstrate compliance was available for inspection.
- The practice had reviewed its risk assessment for Legionella. In addition some staff members had completed training in the risks related to Legionella to gain a better understanding of Legionella risk management.
- All dentists involved in taking X-rays were up-to-date with their radiography training.
- The practice had reviewed its systems related to fire safety. This included an updated fire risk assessment, additional staff training and records to demonstrate the necessary checks had been completed in relation to fire safety.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services well-led?

We found that this practice was providing well-led care in accordance with the relevant regulations.

The practice had a system for receiving national patient safety and medicines alerts from the Medicines and Healthcare Products Regulatory Authority (MHRA) and sharing relevant information with staff.

The practice had reviewed its recruitment procedures to ensure they complied with the regulations.

The Legionella risk assessment had been updated by an external company.

All dentists undertaking X-rays at the practice were up-to-date with radiography training.

The fire risk assessment had been updated.

No action



Are services well-led?

Our findings

Governance arrangements

Following the comprehensive inspection of this dental practice in November 2016 a number of systems had been reviewed, and policies and guidance updated in some cases with specialist external support.

The practice had reviewed its process for receiving national patient safety and medicines alerts from the Medicines and Healthcare Products Regulatory Authority (MHRA). Records showed the practice received regular alerts, kept a record and they were analysed by the principal dentist and shared with staff by the practice manager if relevant.

The practice had reviewed its staff recruitment policy and procedures to help them recruit and employ suitable staff. This had been completed to reflect the relevant legislation. We looked at eight staff recruitment files. These showed the practice followed their recruitment procedure and the regulations. We saw copies or documents in staff files to demonstrate that the necessary procedures and regulations had been followed.

The practice had engaged an external contractor to review the Legionella risk assessment in January 2017 to reduce the possibility of Legionella or other bacteria developing in the water systems. The practice had records to demonstrate they were completing quarterly dip slides as

identified in the risk assessment to check the level of bacterial growth in the water. We saw that identified staff members within the practice had completed Legionella training. There were copies of training certificates in staff files to evidence that staff had received the identified training in relation to Legionella. Records showed that regular checks of the systems and processes relating to Legionella were being completed.

The practice had suitable arrangements to ensure the safety of the X-ray equipment. This included regular servicing and maintenance of the X-ray machinery as identified in the current radiation regulations. Following the inspection in November 2016 dentists had completed further training in radiation to ensure they were up-to-date. We saw copies of training certificates which evidenced that all dentists taking X-rays at the practice had updated their training in relation to radiography in the six months prior to this inspection.

The practice had updated its fire risk assessment in January 2017. This had been completed by an external company who specialised in fire safety. A review of the systems and processes relating to fire safety following the inspection in November 2016 had seen equipment serviced and staff trained. Records showed that regular checks of systems and processes relating to fire were being completed.