

Mr. Mojtaba Hashemi K. Abadi

# Ardleigh Green Dental Clinic

## Inspection report

102 Ardleigh Green Road  
Hornchurch  
RM11 2LG  
Tel: 01708621020

Date of inspection visit: 17 August 2022  
Date of publication: 19/09/2022

### Overall summary

We undertook a follow up focused inspection of Ardleigh Green Dental Clinic on 17 August 2022. 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 Ardleigh Green Dental Clinic on 26 April 2022 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 Ardleigh Green dental clinic on our website [www.cqc.org.uk](http://www.cqc.org.uk).

When one or more of the five questions are not met, we require the service to make improvements and send us an action plan. We then inspect again after a reasonable interval, focusing on the areas 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.

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 26 April 2022.

# Summary of findings

## 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 26 April 2022.

## Background

This report is about Ardleigh Green Dental Clinic.

Ardleigh Green Dental Clinic is in the London Borough of Havering in North East London. The practice provides NHS and private dental care and treatment for adults and children.

The practice is easily accessible by local transportation including the London Underground. It does not have a car park, however, there is permit free parking on surrounding streets. The practice consists of three treatment rooms, reception and waiting area, a toilet and a kitchen/office area. There is level access to the practice for people who use wheelchairs and those with pushchairs.

The dental team includes the principal dentist, an associate dentist, a visiting specialist oral surgeon who places implants, three dental nurses, a dental hygienist and a receptionist. They were supported by a full-time practice manager.

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

The practice is open Monday to Friday 9:00 am to 5:30 pm; closing between 1pm and 2pm for lunch. Outside of these hours, patients are advised to contact the NHS 111 service for urgent care and treatment.

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

- Implement an effective system for monitoring and recording the fridge temperature to ensure that medicines and dental care products are being stored in line with the manufacturer's guidance.

# 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 the inspection on 17 August 2022 we found the practice had made the following improvements to comply with the regulation:

The registered persons had done all that was reasonably practicable to mitigate risks to the health and safety of service users receiving care and treatment. In particular:

Recruitment checks had been completed for the visiting clinician.

Buccal Midazolam was now available as part of their standard emergency drugs.

A fridge had now been obtained and was used exclusively to store medicines and other dental materials. Staff told us the fridge temperature was monitored daily; however, documentation was not maintained to confirm this.

Processes were now in place for the control and storage of substances hazardous to health identified by the Control of Substances Hazardous to Health Regulations 2002.

The principal dentist described to us the newly implemented system for investigating and reviewing incidents and significant events.

There was a risk assessment in place for the dental hygienist who worked without chairside support.

# 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 17 April 2022 we judged the practice was not providing well led care and was not complying with the relevant regulations. The inspection findings on the day pointed towards inefficient leadership and a lack of oversight within the practice in relation to risk management. Furthermore, systems and processes were not effectively implemented, nor, did they consistently support good governance. We told the provider to take action as described in our requirement notice.

When we undertook the follow up inspection on 17 August 2022, the following improvements to the service were demonstrable; For example:

The intra oral X-ray equipment had received mandatory quality assurance tests in line with guidance and legislation.

The provider now maintained a “referral log” to monitor service users referred to primary and secondary services. Staff articulated good understanding of the processes to follow up and monitor referrals.

The provider now had a system in place for receiving, managing and cascading safety alerts such as those reports issued from the Medicines and Healthcare products Regulatory Agency and through the Central Alerting System, as well as from other relevant bodies.

Improved processes were now in place for managing risks pertaining to control of substances hazardous to health and lone working.

At the inspection of 17 August 2022, we saw that policies had been updated, for example, the safeguarding policy now contained the correct contact for the local authority’s safeguarding team.

We saw that staff had improved the checking processes for ensuring items used for care and treatment remained in date and fit for purpose. At this inspection, we found no expired items in the treatment or stock rooms.

The practice now had quality assurance processes to encourage learning and continuous improvement.