

Fulham Dental Care Limited

Fulham Dental Care

Inspection report

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Date of inspection visit: 22/02/2023
Date of publication: 15/03/2023

Overall summary

We undertook a follow up focused inspection of Fulham Dental Care on 22 February 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 Fulham Dental Care on 11 January 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 well-led care and was in breach of regulation 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 Fulham Dental Care 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. 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 well-led?

Our findings were:

Are services well-led?

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

Summary of findings

The provider had made significant improvements in relation to the regulatory breach we found at our inspection on 11 January 2023. There were now effective systems and processes to assess and monitor quality, and mitigate risks related to undertaking of regulated activities.

Background

Fulham Dental Care is in the London Borough of Hammersmith and Fulham and provides private dental care and treatment for adults and children.

The practice is within a building comprising of 3 split-levels and access to treatment rooms require the navigation of a few steps. Car parking spaces, including dedicated parking for disabled people, are available near the practice. The practice has made reasonable adjustments to support patients with access requirements.

The dental team includes 3 dentists, an orthodontic specialist, 2 dental nurses, a dental hygienist, a practice manager and a receptionist. The practice has 3 treatment rooms.

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

The practice is open:

Monday & Thursday 10am to 7pm

Tuesday & Wednesday 9am to 6pm

Friday 9am to 4.30pm

Saturday 9.30am to 3pm.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services well-led?

No action



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 22 February 2023 we found the practice had made the following improvements to comply with the regulation:

- Items that were missing from the medical emergencies equipment had been replaced. The practice had also improved the system for checks to medicines and equipment to monitor expiry dates.
- The induction process for new staff had been updated to accurately demonstrate the correct decontamination procedures as per current national guidance.
- Risks in relation to the control and spread of infections had been assessed and mitigated, in accordance with the Department of Health publication "Health Technical Memorandum 01-05: Decontamination in primary care dental practices". In particular we observed that the correct procedures were implemented. Hand hygiene was observed using a separate hand-washing facility within the decontamination room. We observed that manual scrubbing of instruments was carried out correctly. The ultrasonic bath used to decontaminate instruments was validated appropriately and all records retained.
- Radiation safety governance had been improved following our comprehensive inspection. We observed that Local Rules in respect of Ionising Radiation Regulations 2017 (IRR17) had been located and displayed and a Radiation Protection Advisor contract was in place.
- The provider carried out an accurate audit of infection prevention and control immediately following our comprehensive inspection which identified issues. We observed that steps had been taken to make improvements and a second audit carried out on 19 January 2023 confirmed these improvements were embedded.
- We looked at 6 dental records and observed that the provider had implemented robust systems to ensure good detail was consistently recorded within the patient care records. We saw that social histories and patient options were now recorded.
- We observed that the justification and reporting of radiographs was present at all times.

The practice had also made further improvements:

- The provider had improved the practice's protocols for medicines management to ensure all medicines are dispensed of safely taking into account the guidance provided by the College of General Dentistry (CGDent). Following our inspection on 11 January 2023 the provider ensured that medicines were stored securely and were labelled in accordance with the Human Medicines Regulations 2012. Patient information leaflets were routinely given with dispensed medicines.
- The practice had improved procedures for maintaining records for staff employment. Satisfactory evidence of conduct in previous employment and records of immunity to Hepatitis B were routinely collected and stored in staff records.
- The provider had improved the practice's systems for assessing, monitoring and mitigating the various risks arising from the undertaking of the regulated activities. In particular with regard to lone working.
- The provider had introduced auditing of patient dental care records following our comprehensive inspection to check that necessary information was recorded. Targeted improvements had been implemented as a result of these audits.
- The provider had implemented protocols for the use of closed circuit television cameras taking into account the guidelines published by the Information Commissioner's Office. In particular a Data Protection Impact Assessment had been completed and signage was evident within the practice.