

Dr. Altaaf Hathiari

44 Dental Care

Inspection report

44 Fosse Road North Leicester LE3 5EQ Tel: 01162519647 www.44dentalcare.co.uk

Date of inspection visit: 5 May 2022 Date of publication: 17/06/2022

Overall summary

We undertook a follow up focused inspection of 44 Dental Care on 5 May 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 44 Dental Care on 5 August 2021 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 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 44 Dental Care dental practice on our website www.cqc.org.uk.

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 breach we found at our inspection on 5 August 2021.

Are services well-led?

Summary of findings

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 5 August 2021.

Background

44 Dental Care is based close to the centre of Leicester and provides NHS and predominantly private dental care and treatment for adults and children.

There is a small step to access to the practice, a portable ramp is available to aid access for people who use wheelchairs and those with pushchairs. The practice is located on a busy road so is unable to offer dedicated car parking spaces. Visitors are advised to park on neighbouring streets.

The dental team includes three dentists, three dental nurses, one of whom is an apprentice, one dental hygienist, a practice manager and one visiting oral surgeon. Reception duties are covered by the dental nurses. The practice has three treatment rooms.

The practice is owned by an individual who is the principal dentist there. They have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

During the inspection we spoke with one dentist, one dental nurse 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, Wednesday and Thursday from 9am to 5pm

Tuesday from 9am to 7pm

Friday from 9am to 2.30pm

Our key findings were:

We found this practice was providing safe and well-led care in accordance with the relevant regulations. The provider had made good improvements in relation to the regulatory breaches we found at our previous inspection. These must now be embedded in the practice and sustained in the long-term.

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 | ✓ |

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 5 August 2021 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 5 May 2022 we found the practice had made the following improvements to comply with the regulation:

- Decontamination of dental instruments was carried out in a way that provided assurance they were clean and sterilised. Decontamination practices followed guidance published in The Health Technical Memorandum 01-05: Decontamination in primary care dental practices, (HTM 01-05), published by the Department of Health and Social Care.
- Improvements were made to the practice's infection control procedures and protocols, in particular in the management and monitoring of Legionella. We found that a robust system for recording checks of water temperature and ensuring that where water temperatures had not reached the recommended level was now in place and embedded in practice activities.
- Equipment to manage medical emergencies, taking into account the guidelines issued by the Resuscitation Council (UK) and the General Dental Council, was now available.
- A system of checks of medical emergency equipment and medicines was implemented.
- Substances hazardous to health identified by the Control of Substances Hazardous to Health Regulations 2002, were stored securely.
- The practice's recruitment policy and procedures were robust and reflected current guidance.

The provider had also made the following improvements;

• Repairs were carried out to work surfaces and the extraction unit in the decontamination room.

These improvements showed the provider had taken action to comply with the regulation(s): when we inspected on 5 May 2022.

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 5 August 2021 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 5 May 2022 we found the practice had made the following improvements to comply with the regulation:

- Effective governance and oversight procedures had been established and were operating in accordance with the fundamental standards of care.
- Records relating to people employed and the management of regulated activities were stored securely in line with legislation and current guidance.

The provider had also made the following improvements;

• A dedicated practice manager was recruited with responsibility for governance and oversight of the day to day running of the practice.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation: when we inspected on 5 May 2022.