

Dental Centre 100

Dental Centre

Inspection report

67 Askew Road
London
W12 9AH
Tel: 02087403021

Date of inspection visit: 11 January 2022
Date of publication: 11/02/2022

Overall summary

We undertook a remote focused follow up inspection of Dental Centre on 11 January 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 carried out by a CQC inspector who had remote access to a specialist dental advisor.

We undertook a comprehensive inspection of Dental Centre on 9 December 2020 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 regulation 12 and regulation 17 of the Health and Social Care Act 2008 (Regulated

Activities) Regulations 2014.

We carried out a follow up inspection on 7 July 2021 and found a number of improvements had been made, however the provider was not providing well led care and was found to still be in breach of regulation 17.

On 8 November 2021 we carried out a subsequent follow up but found there were still areas where improvements were needed and found the provider was still in breach of regulation 17. On 11 January 2022 we carried out a remote follow up inspection and found the provider had implemented systems and addressed the areas of concern we found at the previous inspections.

You can read our report of that inspection by selecting the 'all reports' link for Dental Care Centre on our website www.cqc.org.uk

When one or more of the five questions are not met we require the service to make improvements. 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?

Summary of findings

Our findings were:

Are services well-led?

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

The provider had made improvements to put right the shortfalls and had responded to the regulatory breach we found at our inspection on 8 November 2021.

Background

Dental Centre is located in the London Borough of Hammersmith & Fulham and provides NHS and private dental care and treatment for adults and children.

Car parking spaces are available in surrounding roads and the practice is located close to public transport links. The practice has one treatment room located on the first floor.

The dental team includes two dentists, a receptionist and a practice manager.

During the inspection we spoke with 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 9am - 5pm

Our key findings were:

- Staff knew how to deal with medical emergencies and appropriate life-saving equipment was available according to the national guidelines. An updated monitoring system had also been implemented to ensure all emergency medicines were available and within their use-by date.
- Systems were in place to help the provider manage risks to patients and staff including Legionella and waste management.
- Systems had been implemented to ensure NHS prescriptions were managed and stored appropriately.
- Some improvements had been made in relation to the management of fire safety and the handling of substances hazardous to health; however, we could not be assured all risks had been mitigated.

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

- Improve the practice's processes for the control and storage of substances hazardous to health identified by the Control of Substances Hazardous to Health Regulations 2002, to ensure risk assessments are undertaken and the products are stored securely.
- Review the fire safety risk assessment and ensure that any actions required are complete and ongoing fire safety management is effective.

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 this practice was providing well-led care in accordance with the relevant Regulations.

At our previous inspection on 8 November 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 11 January 2022 we found the practice had made the following improvements to comply with the regulation:

The provider had implemented systems to assess, monitor and manage risks to patient safety. Including: medical emergencies and sharps safety.

Emergency medical equipment and medicines were available and checked as described in recognised guidance.

The provider had policies and procedures in place to ensure clinical waste was segregated and stored appropriately in line with guidance.

The provider had systems for appropriate and safe handling of medicines.

Some improvements had been made in relation to the storage and management of hazardous substances however, on the day of the inspection, the information was not available for all substances and was not organised so as to be easily accessible to staff in the event of an emergency.

A fire risk assessment was carried out in line with the legal requirements and some fire safety protocols were in place; however, we could not be assured all recommendations made in the fire risk assessment had been actioned and the risks fully mitigated.

The practice had also made further improvements:

The provider had procedures to reduce the possibility of Legionella or other bacteria developing in water systems, in line with a risk assessment.