

Genix Healthcare Ltd

Genix Healthcare Dental Clinic – Garforth

Inspection Report

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Overall summary

We undertook a follow up inspection of Genix Healthcare Dental Clinic – Garforth on 12 December 2019. 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 had remote access to a specialist dental adviser.

We undertook a follow up inspection of Genix Healthcare Dental Clinic – Garforth on 28 March 2019 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 Genix Healthcare Dental Clinic – Garforth on our website www.cqc.org.uk.

As part of this inspection we asked:

- Is it well-led?

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.

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 breach we found at our inspection on 28 March 2019.

Background

Genix Healthcare Dental Clinic – Garforth provides NHS and private treatment to adults and children.

There is one small step at the front entrance to the practice. The provider has a portable ramp available to facilitate access into the practice for wheelchair users and for pushchairs. Car parking spaces are available near the practice.

Summary of findings

The dental team includes nine dentists, ten dental nurses, two dental hygiene therapists, four receptionists and a practice manager. They are supported by an operations manager. The practice has eight treatment rooms.

The practice is owned by a company and as a condition of registration must have a person registered with the Care Quality Commission as the registered manager. Registered managers 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 registered manager at Genix Healthcare Dental Clinic – Garforth is the practice manager.

During the inspection we spoke with one dentist, one dental nurse, one dental hygiene therapist, the area operations manager 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 and Thursday from 8:45am to 5:00pm

Tuesday and Wednesday from 8:45am to 7:30pm

Friday from 8:45am to 4:00pm

Saturday from 8:45am to 2:00pm

Our key findings were:

- Improvements had been made to the process for managing the risks associated with the use of radiation and Legionella.
- Improvements had been made to the recruitment processes. Further improvements should be made.
- Improvements had been made to the process for validating the autoclaves.

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

- Implement an effective recruitment procedures to ensure that appropriate checks are completed prior to new staff commencing employment at the practice.

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 our previous inspection on 28 March 2019 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 12 December 2019 we found the practice had made the following improvements to comply with the regulation:

- Improvements had been made to the process for managing the risks associated with the use of radiation. We saw the control panels for the X-ray machines had been moved to inside the surgeries, and are no longer accessible to unauthorised users. In addition, warning lights had been installed to indicate when the X-ray machine was in use. Locks had been placed on the adjoining doors between the two surgeries to prevent access when an X-ray was being taken. Staff were familiar with the process to follow when taking an X-ray.
- A new Legionella risk assessment had been carried out in October 2019. This had some actions including cleaning the taps to ensure limescale did not build up and to remove some dead legs. We saw evidence of monthly checklists for checking and cleaning of the taps. In addition, we saw evidence that a plumber had been booked to remove the dead legs.

- Staff described how they validated the autoclaves. These reflected guidance as laid out in the Health Technical Memorandum 01-05: Decontamination in primary care dental practices (HTM 01-05). We saw that the data loggers were regularly downloaded. Both autoclaves have been serviced and validated by a competent person.
- We discussed staff recruitment with the registered manager and the area operations manager. We checked staff recruitment documents to corroborate our findings. We looked at six staff recruitment records. We noted there was no Disclosure and Barring Service (DBS) check for the newly recruited receptionist. We were told that the current company policy was not to get a DBS check for receptionists. We were told this policy was due to be updated in January 2020 and all receptionists without a valid DBS check would get one. We were provided with verbal and written confirmation of this.

The practice had also made further improvements:

- A registered manager had been appointed who was responsible for managing the service.

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 12 December 2019.