

## M Verma & S Verma Abacus Dental Care

# M Verma & S Verma Abacus Dental Care

### Inspection Report

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### Overall summary

We carried out an unannounced comprehensive inspection of this practice on 21 January. Breaches of legal requirement were found. After the comprehensive inspection, the practice wrote to us to say what they would do to meet legal requirements in relation to the breaches.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for M Verma & S Verma Abacus Dental Care on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### **Our findings were:**

#### **Are services well-led?**

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

#### **Background**

M Verma & S Verma Abacus Dental Care is a general dental practice in the Crownhill area of Milton Keynes. The practice provides NHS and private general dentistry to adults and children.

In addition to a full range of general dentistry, a visiting dentist to the practice offers dental implants (a metal post placed surgically into the jaw bone that can be used to support a single tooth, a bridge or denture). This treatment can be carried out under conscious sedation (techniques in which the use of a drug or drugs produces a state of depression of the central nervous system enabling treatment to be carried out, but during which verbal contact with the patient is maintained throughout the period of sedation).

The premises are over two floors and consist of a waiting area, treatment room and office on the ground floor, and further waiting room, two treatment rooms and decontamination room on the first floor, although one of the treatment rooms was not in use at the time of our visit.

The practice is open from 8.30am to 5.00pm Monday, Wednesday, Thursday and Friday; from 6.00pm to 8.00pm on a Tuesday evening and alternate Saturday mornings from 9.00am to 1.00pm.

The principal dentist is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like

# Summary of findings

registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the practice is run.

## **Our key findings were:**

- The practice had overhauled the governance procedures and staff were actively engaged in the improvement and maintenance of the practice.
- Policies were updated and arranged in a way that staff could access easily.
- Clinical audit was used as a tool to highlight areas where improvements could be made, and effect those improvements.
- Dental care records were found to be comprehensive, and improvements had been highlighted and noted through the detailed clinical record keeping audit.

# Summary of findings

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Are services well-led?**

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

Comprehensive risk assessments and audits had been used to great effect to improve the service, including the safety of staff, visitors and patients of the practice.

Policies had been updated and reorganised so that they formed a relevant body of information that practice staff could reference with ease.

**No action**



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## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the practice was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

We undertook an announced focused inspection of M Verma & S Verma Abacus Dental Care on 18 August 2016.

This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 21 January 2016 had been made. We inspected the practice against one of the five questions we ask about services: is the service well-led?

The inspection was led by a CQC inspector who was accompanied by a dental specialist advisor.

# Are services well-led?

## Our findings

### Governance arrangements

The practice had overhauled their governance procedures by appointing leads in various areas including infection control and the management of complaints.

The practice had a series of policies in place which were up to date and easily accessible to aid the smooth running of the practice, although they were not always dated to ensure they remained current.

Risk assessment had become a regularly used tool to highlight areas where improvements could be made and implement those improvements. A health and safety risk assessment audit was seen to be comprehensive and all areas that could be improved had been addressed.

A new trainee dental nurse had been employed, which resolved the previous staffing concerns.

Monthly practice meetings were attended by all staff and were taken as an opportunity to discuss all aspects of the practice, as well as a learning forum with training topics brought onto the agenda. Recent topics that had been discussed included; confidentiality. Personal protective equipment, significant events and complaint. We saw the fire drills were practised during the staff meetings, and an update given by the infection control lead.

A new ultrasonic cleaner had been installed in the decontamination room. We saw that appropriate tests were being carried out to ensure its effectiveness.

Dental care records completed since our original inspection indicated that significant improvements had been made to the note keeping. The computer software had been modified to prompt the clinicians to ensure certain clinical discussions and examinations were documented. The dental care records also indicated a clear understanding of national guidelines in the care and treatment of patients.

### Learning and improvement

The practice had embraced the use of clinical audit as a tool to highlight areas where improvement could be made. An audit tracker indicated when audits were due to be completed. Clinical audits that had been completed included infection control, quality of radiographs and a comprehensive record keeping audit, in addition audits of environmental cleaning, waste, information governance and medicines had also been completed. All audits had documented learning points.

The practice team had all undertaken training in the Mental Capacity Act 2005 and medical emergencies since our last inspection. Staff were able to describe the actions they would take in the event of a medical emergency.

A dental nurse who was in training at the time of our first inspection had now qualified as a dental nurse and was taking on extra responsibility within the practice. They had also begun a management course so that they could assume more management responsibility in the coming months and years.