

BRL Dentos Ltd

Diamond Dental and Medical Clinic

Inspection report

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Overall summary

We carried out this announced inspection on 2 December 2021 under section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. We planned the inspection to follow up on concerns we identified during our inspection of the service on 19 August 2021 and to check whether the registered provider was meeting the legal requirements in the Health and Social Care Act 2008 and associated regulations.

The inspection was led by a Care Quality Commission (CQC) inspector who was supported by a specialist dental adviser.

We undertook a comprehensive inspection of Diamond Dental and Medical Clinic on 19 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 – Safe care and treatment, 17 – Good governance, 18 – Staffing and 19 - Requirements relating to workers 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 Diamond Dental and Medical Clinic on our website www.cqc.org.uk.

As part of this inspection we asked:

- Is it safe?
- Is it effective
- 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 (requirement notice only). We then inspect again after a reasonable interval, focusing on the areas where improvement was required.

Summary of findings

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 breaches we found at our inspection on 19 August 2021.

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 breaches we found at our inspection on 19 August 2021.

Background

Diamond Dental and Medical Clinic is in the London Borough of Barnet and provides private dental care and treatment for adults and children.

The dental team includes the principal dentist, two associate dentists, one visiting dentist, two dental nurses and a receptionist. The practice has four treatment rooms.

The practice is owned by a company and as a condition of registration must have a person registered with the CQC 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 Diamond Dental and Medical Clinic is the principal dentist.

During the inspection we spoke with the principal dentist, one dental nurse and the receptionist. We looked at practice policies and procedures and other records about how the service is managed.

The practice opening times are:

Monday to Sunday from 10am to 10pm.

Our key findings were:

- Infection prevention and control procedures were followed in accordance with national guidance.
- The provider had arrangements to ensure that equipment was tested, serviced and maintained in accordance with relevant guidelines.
- Staff knew how to deal with emergencies. Emergency equipment and medicines were available in accordance with the Resuscitation Council UK 2021 guidelines.
- The provider had systems to help them manage risks to patients and staff.
- The provider had effective recruitment procedures and systems to monitor staff training and learning needs.

Summary of findings

- There was effective leadership to support a culture of openness and continuous improvement, and there were effective governance systems to monitor the day to day running of the practice.

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 ✓
Are services well-led?	No action ✓

Are services safe?

Our findings

We found this practice was providing safe care in accordance with the relevant regulations.

At our previous inspection on 19 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 warning notices and requirement notice. At the inspection on 2 December 2021 we found the practice had made the following improvements to comply with the regulations:

- Improvements had been made so that all staff undertook training in safeguarding children and vulnerable adults.
- Improvements had been made to the practice infection prevention and control procedures, and these were followed in accordance with the guidance 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.
- Re-usable dental items were cleaned, sterilised and stored in accordance with guidance.
- Sterilising equipment was checked daily and serviced routinely. Records were maintained for these checks.
- The practice looked visibly clean and cleaning schedules were maintained.
- Improvements had been made to the arrangements for minimising the risk of spread of Coronavirus (COVID-19). Procedures to minimise transmission of the virus were in accordance with the current guidelines.
- The provider had implemented a system to assess and minimise risks to patients and staff through a range of health and safety risk assessments.
- There were effective procedures to reduce the possibility of Legionella or other bacteria developing in the water systems in line with a risk assessment. Dental unit waterlines were disinfected and there were arrangements to monitor hot and cold water temperatures.
- Improvements had been made to the procedures for the storage and disposal of clinical waste. We saw that sharps bins were dated when opened for use and were disposed of within three months in accordance with relevant guidance.
- There were effective arrangements to monitor the infection prevention control procedures at the practice. A system to carry out infection prevention and control audits twice a year had been implemented in accordance with published guidance. Audits were used to monitor and maintain infection prevention and control procedures and make improvements as required.
- Improvements had been made so that the practice recruitment policy and procedure was followed to help them employ suitable staff. We looked at staff recruitment records for each of the six members of staff. We saw records to show that all of the required checks, including Disclosure and Barring Service (DBS) records, in respect of conduct in previous employment (references) and records to prove identity were available for all staff. Records in relation to registration with the General Dental Council were available for all relevant staff and there were systems to check these.
- There were procedures to ensure that facilities and equipment were safe, and that equipment was maintained according to manufacturers' instructions. Records were available to show that the compressor equipment, suction equipment, endodontic rotary motor, laser equipment and the cone beam computerised tomography scanner (CBCT) had been tested in accordance with the manufacturer's instructions and relevant guidance. An amalgam separator had been installed. Improvements had been made to the systems to monitor and review dental materials used at the practice to ensure that these were disposed of once they passed the manufacturer's expiry date.
- Improvements had been made to the arrangements for assessing and minimising the risk of fire at the practice. There were procedures for testing fire safety equipment and fire evacuation exercises were carried out.
- We saw evidence the dentists justified, graded and reported on the radiographs they took. Improvements had been made to the systems to monitor and improve the quality of dental radiographs. Audits of dental radiographs were carried out taking into account current guidance and legislation. The results from the most recent audit showed that the provider has systems to monitor and improve the quality of the dental radiographs they took.

Are services safe?

- Improvements had been implemented to ensure clinical staff completed continuing professional development in respect of dental radiography and training records were maintained
- Improvements had been made to the arrangements for dealing with medical emergencies. Emergency medicines and equipment were available in accordance with the Resuscitation Council UK 2021 guidelines and there were systems to monitor these.
- Information in relation to the handling and disposal of hazardous materials was organised and easily accessible to staff.
- The provider had reviewed and improved systems for referring patients with suspected oral cancer under the national two-week wait arrangements. These arrangements were initiated by National Institute for Health and Care Excellence to help make sure patients were seen quickly by a specialist. There were systems for logging and following up on urgent referrals.
- Improvements had been made to the systems for monitoring and reviewing incidents as part of an effective risk management system.

These improvements showed the provider had taken action to comply with the regulations when we inspected on 2 December 2021.

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 19 August 2021 we judged the practice 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 warning notices and requirement notice. At the inspection on 2 December 2021 we found the practice had made the following improvements to comply with the regulations:

- Improvements had been made to the leadership and oversight arrangements for the day-to-day management of the practice.
- Improvements had been made to ensure that policies, procedures and relevant guidance and legislation was followed in relation to issues such as infection prevention and control, dealing with medical emergencies and management.
- The results of audits, risk assessments and reviews were used with actions plans as part of a system for monitoring and improving quality and safety at the practice.
- Improvements had been made to the arrangements for monitoring the completeness of dental care records.
- There were systems to monitor urgent and routine referrals to help ensure that patients received treatment in a timely way.
- Improvements had been made to the systems to monitor staff training and development needs. There were arrangements for staff induction and annual performance appraisal for staff which identified learning and development needs and included how staff would be supported to achieve their development goals.

These improvements showed the provider had taken action to comply with the regulations when we inspected on 2 December 2021.