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Longlands Dental Practice

Inspection report

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Overall summary

We undertook a follow up focused inspection of Longlands Dental Practice on 5 October 2022. This inspection was carried out to review 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 focused inspection of Longlands Dental Practice on 30 March 2022 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 Longlands Dental Practice 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 and send us an action plan. We then inspect again after a reasonable interval, focusing on the area where improvement was required.

As part of this inspection we asked:

- Is it well-led?

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 in relation to the regulatory breach we found at our inspection on 30 March 2022.

Background

Summary of findings

The provider has 1 practice and this report is about Longlands Dental Practice.

Longlands Dental Practice is in Hemel Hempstead and provides NHS and private dental care and treatment for adults and children.

There is level access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces are available in a car park at the front of the practice. The practice has made some adjustments to support patients with additional needs.

The dental team includes 4 dentists, 5 dental nurses (including 2 trainee dental nurses), 1 dental hygienist, and a practice manager. The dental nurses also work on reception. The practice has 3 treatment rooms.

During the inspection we spoke with 2 dentists, 1 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 to Friday from 9am to 5pm.

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

- Implement an effective system of checks of medical emergency equipment and medicines taking into account the guidelines issued by the Resuscitation Council (UK) and the General Dental Council.
- Take action to ensure audits of antimicrobial prescribing are undertaken at regular intervals to improve the quality of the service.

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 regulation.

At the inspection on 5 October 2022 we found the practice had made the following improvements to comply with the regulation:

- We saw evidence that recruitment procedures were now in line with legislation. In particular, evidence of staff's satisfactory conduct in previous employment (e.g. references) was obtained prior to their employment.
- Risk assessments had been completed for hazardous cleaning products used at the practice in line with the Control of Substances Hazardous to Health Regulations 2002.
- The 5 yearly electrical fixed wiring check had been completed.
- Servicing of the autoclaves, ultrasonic bath, emergency lighting and the X-ray 3 yearly checks had been completed.
- Pads for the automated external defibrillator had been obtained and the expiry date of the medicine used to manage low blood sugar had been adjusted to reflect that it was stored at room temperature. However, the oxygen was out of date, the medicine used to manage seizures was not the recommended type and there was no spacer device. These items were ordered on the day of inspection.
- Improvements had been made to the records of patients' assessments so that they now included risk assessments for caries, periodontal disease and cancer in accordance with nationally recognised evidence based guidance.

The provider had also made further improvements:

- A risk assessment had been completed for the hygienist who worked without chairside support.
- The practice had improved their tracking of prescriptions issued although there was scope for further improvement to enable the practice to complete an antimicrobial audit.