

Mr. Harnam Kelay

H Kelay & Associates

Inspection report

1 Clevely Close
Charlton
London
SE7 8DP
Tel: 02083177983

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Overall summary

We undertook a follow up desk-based review of H Kelay & Associates on 22 March 2022. This 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 CQC inspector had access to remote support by a specialist dental adviser.

We undertook a comprehensive inspection of H Kelay and Associates on 8 November 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 and 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 H Kelay & Associates on our website www.cqc.org.uk.

As part of this inspection we asked:

- Is it safe?
- 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.

Our findings were:

Are services safe?

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

Summary of findings

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 8 November 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 8 November 2021.

Background

H Kelay & Associates is located in the Royal Borough of Greenwich and provides NHS and private dental care and treatment for adults and children.

There is ramped access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces, including dedicated parking for people with disabilities, are available near the practice.

The dental team includes the principal dentist, two associate dentists, two dental nurses and two receptionists. The practice has two treatment rooms.

The practice is owned by an individual who is the principal dentist there. They have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

During this review we looked at documents sent to us by the provider in response to concerns outlined during our comprehensive inspection.

The practice is open:

Monday to Friday from 9.00am to 6.00pm

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 that this practice was providing safe care and was complying with the relevant regulations.

At our previous inspection on 8 November 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 requirement notice.

At the inspection on 22 March 2022 we found the practice had made the following improvements to comply with the regulation(s):

Safety systems and processes, including staff recruitment, equipment and premises and radiography (X-rays)

The provider had considered the Hepatitis B vaccination status for all staff who worked at the practice.

A gas safety check had been undertaken in November 2021.

The provider had carried out a five year electrical safety test in January 2022 and the results were satisfactory.

A fire risk assessment had been carried out by a specialist company.

A legionella risk assessment had been undertaken by a specialist company.

The provider had also made further improvements:

The practice had Implemented an effective system for monitoring and recording the fridge temperature to ensure that medicines and dental care products are being stored in line with the manufacturer's guidance.

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 8 November 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 requirement notice.

At the inspection on 22 March 2022 we found the practice had made the following improvements to comply with the regulation(s):

Continuous improvement and innovation

The practice was carrying out infection control audits at regular intervals in line with guidance.

The practice had carried out a Disability Access Audit in November 2021.

The provider had also made further improvements:

The practice had Implemented a system to ensure patient referrals to other dental or health care professionals are centrally monitored to ensure they are received in a timely manner and not lost.