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Saxon Dental Practice

Inspection Report

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Overall summary

We carried out this inspection to follow up concerns we originally identified during a comprehensive inspection at the practice on 7 November 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions.

At a comprehensive inspection we always ask the following five questions to get to the heart of patients' experiences of care and treatment:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

When one or more of the five questions is 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.

At the previous comprehensive inspection, we found the registered provider was providing safe, effective, caring and responsive care in accordance with relevant regulations. We judged the practice was not providing well-led care in accordance with Regulation 17 and

Regulation 19 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 Saxon Dental Practice on our website www.cqc.org.uk.

During this inspection we spoke with the practice manager. We checked the decontamination room and viewed a range of paperwork in relation to the management of the practice.

Our findings were:

- The provider had made adequate improvement to put right most of the shortfalls we found at our previous inspection. The provider must ensure that all newly implemented improvements are embedded and sustained in the long-term in the practice.

There were areas where the provider could make improvements and should:

- Review protocols for the use of rubber dam for root canal treatment giving due regard to guidelines issued by the British Endodontic Society.
- Review their responsibilities to meet the needs of patients with disability and the requirements of the Equality Act 2010.
- Review systems for appraising staff and implementing personal development plans.

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 regulation.

The improvements we noted since our previous inspection indicated that oversight and governance within the practice had improved, and some systems were in place to ensure standards were met. This included implementing a system for recording and learning from incidents, tracking patient referrals, receiving national patient safety alerts, strengthening recruitment practices and rehearsing medical emergency simulations.

However, the provider had failed to address a number of other issues we had raised in our previous report such as providing staff with appraisal and personal development plans, meeting the needs of patients with disabilities, and repairing damaged surfaces in the decontamination room.

No action



Are services well-led?

Our findings

At our previous inspection on 7 November 2017, we judged the practice was not providing well-led care in accordance with the relevant regulations. We issued a requirement notice as a result.

During this inspection we noted the following improvements:

- A specific log to record any unusual events had been created, and we viewed the details of one untoward incident that had occurred at the practice since our previous visit. The practice manager told us the incident had been fully discussed with all staff to ensure learning was shared.
- The practice manager had signed up to receive safety alerts from the Medicines and Healthcare Products regulatory Authority, and was aware of recent alerts affecting dental practice.
- A sharps' risk assessment had been completed for the practice.
- Staff now practiced responding to medical emergencies and we viewed details of a simulation of a patient experiencing an asthma attack which took place on 16 January 2018. The practice manager told us she planned to conduct these simulations every three to four months with staff.
- Missing emergency medical equipment had been purchased and we viewed a full set of airways, portable suction and a paediatric self-inflating in the practice's emergency kit bag.
- Although no new staff had been employed since our previous visit, the practice now had a recruitment policy in place that reflected current legislation. We viewed samples of application forms, interview questions, an induction plan and a personnel checklist that had been implemented. All staff had now received an enhanced DBS check.
- Staff now monitored hot water temperatures on a monthly basis to ensure they were above 50 degrees Celsius. However, we noted that the water from the tap in the patients' toilet had not met this required temperature for the previous three months. No action had been taken to resolve this.
- COSHH information sheets had been completed for products used by the practice's external cleaners.
- The practice's washer/disinfector had been decommissioned, as it was no longer in use.
- The practice had introduced water temperature monitoring and dilution control when manually cleaning instruments.
- The external clinical waste bin was now attached securely to a fence post.
- Prescriptions were kept in the safe at night and their numbers logged. Information about antibiotics issued to patients was now being gathered so it could be audited effectively.
- Recommendations made by the radiation protection advisor had been actioned.
- All staff had received on-line training in the Mental Capacity Act and training certificates we viewed demonstrated this.
- A system of monitoring all patients' referrals made by the practice had been implemented so they could be tracked.
- The practice's complaints procedure had been enlarged making it more visible to patients, and reception staff had a laminated version of it they could give patients to read. A complaints log had also been introduced for minor complaints and we viewed details of ten patients' concerns.

However the provider had failed to address the following issues raised in our report:

- Not all dentists used rubber dams in line with guidance from the British Endodontic Society when providing root canal treatment, although alternative ways of protecting patients' airways were employed.
- Display screen equipment assessments had not been completed for staff who worked on reception.
- Chipped and exposed areas on work surfaces in the decontamination room had not been repaired, making them difficult to clean.
- There were no chairs with arms in the waiting areas to assist patients with limited mobility, and no portable

Are services well-led?

hearing loop to assist those who wore hearing aids. Information about the practice or patient medical histories was not available in any other languages, or formats such as large print.

- None of the staff had received an annual appraisal since our last inspection and none had personal training or development plans in place.