

The Tooth Booth Group Limited

Tooth Booth Needham Market

Inspection Report

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Overall summary

We carried out this announced inspection to follow up a Warning Notice served to the providers on 29 September 2017, as they were failing to comply with Regulation 17, (1), Good governance, of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At the previous comprehensive inspection on the 17 January 2017, we found the registered provider was providing effective, caring and responsive care in accordance with relevant regulations. However, we judged the practice was not providing safe or well-led care in accordance with Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We conducted a focussed inspection on 25 September 2017, and although we noted improvements in how safe the practice was, we found the provider had made insufficient improvements to address the shortfalls we had identified in how the practice was governed.

You can read our previous report of that inspection by selecting the 'all reports' link for Tooth Booth Needham Market on our website www.cqc.org.uk.

During the inspection we spoke with one of the owners and 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:

Are services well-led?

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

The provider had made sufficient improvements to put right the shortfalls we found at our inspections on the 17 January and 25 September 2017. The provider must now ensure that the newly implemented improvements are embedded and sustained in the long-term in the practice.

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.

The improvements we noted since our previous inspection indicated that leadership and oversight within the practice had become more robust and systems were in place to ensure standards were met. This included implementing a system for recording and learning from incidents; tightening up infection prevention and control; strengthening staff recruitment procedures, assessing staff's performance and monitoring the use of antibiotics.

No action 

Are services well-led?

Our findings

At our previous inspection on 25 September 2017, we judged the practice was not providing well-led care in accordance with the relevant regulations and we issued a warning notice as a result. During this inspection we noted the following improvements:

- We found good improvement in staff's understanding of untoward events and how they could be used as learning opportunities to improve the service. Unusual incidents were now a standing agenda at practice meetings and specific reporting forms had been implemented. We reviewed recent meeting minutes where events including a prescription pad being left at a patient's house, the practice's compressor not working and a patient's faint had been discussed with all present.
- Staff now regularly undertook medical emergency simulations to ensure their knowledge and skills were kept up to date. We reviewed minutes of the staff meeting held on 3 November 2017, and noted that staff had rehearsed how to respond if a patient had an epileptic fit.
- Overflows in dental sinks had been sealed off and the sharps' bin in the decontamination room had been labelled and dated appropriately. Staff were aware that the bins had to be discarded after a period of three months.
- New work surfaces had been installed in the decontamination room and heavy lime scale had been removed around sink plugs.
- Infection control audits were now undertaken more regularly. We reviewed one audit completed on 12 October 2017, where the practice had scored 93%. Following action to address the shortfalls highlighted in the audit, the practice had scored 98% on the following audit of 6 November 2017. The practice manager was aware that the audits had to be undertaken every six months and had set this as a rostered task for this in her calendar.
- Staff were now using measuring jugs to ensure the correct dilution control when manually cleaning instruments.
- Recruitment procedures had improved. The practice manager told us she had obtained two references and an up to date DBS check for all staff working in the practice. We reviewed recruitment files for two recently employed staff and found this to be the case.
- All staff had undertaken an on-line dementia awareness course provided by the National Skills Academy to help them better understand the needs of patients living with this condition.
- An audit of anti-biotic prescribing had been undertaken to improve and monitor prescribing practices by the dentists.
- The practice had introduced a new policy whereby all locum staff received an appraisal of their performance after a period of three months.
- The practice manager had begun spot checks on staff and we viewed completed checks undertaken to ensure staff were wearing aprons when cleaning instruments and disassembling matrix bands correctly.