

The Whitebridge Clinic Limited

# The Whitebridge Clinic

## Inspection report

140 Oxford Road  
Kidlington  
OX5 1DZ  
Tel:

Date of inspection visit: 16 December 2022  
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### Overall summary

We undertook a follow-up focused inspection of The Whitebridge Clinic on 16 December 2022.

This inspection 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 inspection was carried out by a Care Quality Commission (CQC) inspector who was supported by a specialist dental advisor.

At our inspection on 5 August 2022 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 The Whitebridge Clinic on our website [www.cqc.org.uk](http://www.cqc.org.uk).

#### As part of this inspection we asked:

- 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 area where improvement was required.

#### 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 5 August 2022.

#### Background

The Whitebridge Clinic is in Kidlington and provides private dental care and treatment for adults and children.

# Summary of findings

The practice has made reasonable adjustments to support patients with additional access requirements.

The practice is based on the ground floor. The building is accessible to wheelchair users and a disabled person's parking space is available outside the entrance.

The dental team includes 3 dentists, 1 dental hygienist, 1 dental therapist, 4 qualified dental nurses, 2 trainee dental nurses, 1 receptionist, 1 treatment coordinator and a practice manager.

The practice has three treatment rooms.

During the inspection we spoke with a dentist and the registered manager.

We looked at practice policies and procedures and other records about how the service is managed.

## **The practice is open:**

- Monday 9.00am to 5.30pm
- Tuesday 9.00am to 6.30pm
- Wednesday 9.00am to 5.30pm
- Thursday 9.00am to 5.30pm
- Friday 9.00am to 4.30pm
- Saturday 9.00am to 4.30pm

# 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

At our previous inspection on 5 August 2022 we judged the provider 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 our follow-up inspection on 16 December 2022 we found the practice had made the following improvements to comply with the regulations:

### Infection Control

- Infection prevention and control audits were carried out at appropriate intervals.

### Legionella

- Hot water testing reached the recommended 50 degrees Celsius.

### Facilities

- The gas boiler was serviced at appropriate intervals.
- The wheelchair accessible WC contained an appropriate bin.

### Fire Safety

- Emergency lighting was available on the first floor or staircase.
- A carbon monoxide detector was available.
- Fire alarm testing was carried out weekly and included all of the call points in the practice building.
- A fire risk assessment was carried out by someone who demonstrated their competency in fire safety.
- Fire extinguisher servicing records were available.

### Radiography

- The practice had a Laser protection Advisor
- Local rules for the Laser were available
- A Laser policy was available.
- The x-ray machine head in one surgery had a complete cover.

### Medical Emergencies

- Portable suction was available.

### COSHH

- COSHH warning signs were present on the cleaning cupboard door.

### Medicines

- Dispensed medicines were labelled appropriately with practice's name and address.

### Recruitment

- Records were available to demonstrate that the provider carried out appropriate recruitment checks, in accordance with relevant legislation to help them employ suitable staff.