

Smile Care Salford Ltd

Smile Dental Care Accrington

Inspection report

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Date of inspection visit: 27 January 2022 Date of publication: 03/03/2022

Overall summary

We undertook a follow up focused inspection of Smile Centre Accrington on 27 January 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 led by a CQC inspector who was supported by a specialist dental adviser.

We undertook a comprehensive inspection of Smile Centre Accrington on 28 September 2021 and 7 October 2021 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. A second visit was necessary to gather the information we required. We found the registered provider was not providing safe or well led care and was in breach of regulations 12, 17 and 18 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 Smile Centre Accrington 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.

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Summary of findings

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 28 September 2021 and 7 October 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 28 September 2021 and 7 October 2021.

Background

Smile Dental Care Accrington is based in Accrington, Lancashire and provides NHS and private dental care and treatment for adults and children.

The practice is not accessible to those with limited mobility. Car parking spaces are available near the practice in pay and display car parks.

The dental team includes two dentists, four dental nurses, two of whom are trainee dental nurses and one who also works as the practice manager. There is also a dental hygiene therapist and a receptionist. The practice is part of a group, and external clinical and management support is available to staff at the practice. The practice has two treatment rooms, both of which are located on the first floor.

During the inspection we spoke with two dentists, one dental nurse, members of the provider's clinical and management team, 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

(the practice is closed each day from 1pm to 2pm for lunch.)

Our key findings were:

- Foil ablation tests for the ultrasonic cleaner and steam penetration testing for the vacuum autoclave were being carried out in line with national guidance (The Health Technical Memorandum 01-05: Decontamination in primary care dental practices, (HTM 01-05).
- Heavy duty gloves were being used during the process for manual cleaning of dental instruments.
- Repairs to the suction motor unit had been completed.
- Improvements had been made to the systems for managing and tracking NHS prescriptions.
- Improvements had been made to the system for recording and monitoring significant events.
- The policies for both complaints handling and whistleblowing had been reviewed and updated.
- Protocols for medicines management had been reviewed and improvements made.
- The consent policy had been reviewed and updated.
- Management systems had been reviewed and strengthened.

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 | \checkmark |
|------------------------|-----------|--------------|
| 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 28 September 2021 and 7 October 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 27 January 2022 we found the practice had made the following improvements to comply with the regulations:

The provider had infection control procedures which reflected published guidance. The provider had introduced additional procedures in relation to COVID-19 in accordance with published guidance.

We saw the practice was visibly clean and there was an effective cleaning schedule to ensure the practice was kept clean.

Staff ensured facilities and equipment were safe, and that equipment was maintained according to manufacturers' instructions, including electrical and gas appliances.

The provider had implemented systems to assess, monitor and manage risks to patient safety. Including sharps safety and sepsis awareness.

The provider had systems for appropriate and safe handling of medicines. Particularly in relation to the storage of local anaesthetics.

The provider had implemented systems for reviewing and investigating when things went wrong.

The provider had also made further improvements:

• The consent policy had been reviewed, updated and staff informed of the changes and improvements.

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 28 September 2021 and 7 October 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 27 January 2022 we found the practice had made the following improvements to comply with the regulations:

Management systems had been reviewed and strengthened.

The provider had quality assurance processes to encourage learning and continuous improvement. These included audits of dental care records, disability access, radiographs and infection prevention and control.

The information and evidence presented during the inspection process was clear and well documented.