

Aveley Dental

Aveley Dental Surgery

Inspection report

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Overall summary

We undertook a follow up desk-based focused review of Aveley Dental Surgery on 30 July 2020. This review was carried out to examine 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 review was led by a CQC inspector.

We undertook a comprehensive inspection of Aveley Dental Surgery on 12 March 2020 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 well led care and was in breach of regulation 17 Good Governance 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 Aveley Dental Surgery on our website.

As part of this review we asked:

•Is it well-led?

required.

Our findings were:

Are services 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 review again after a reasonable interval, focusing on the areas where improvement was 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 12 March 2020.

Background

Aveley Dental Surgery is in Aveley, South Ockenden and provides NHS and private dental care and treatment for adults and children.

There is level 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 two dentists, one lead dental nurse, one dental nurse, two trainee dental nurses, one receptionist and a practice manager. The practice has two treatment rooms.

The practice is owned by a partnership and as a condition of registration must have a person registered with the CQC as the registered manager. Registered managers have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run. The registered manager at Aveley Dental Surgery is the principal dentist.

Summary of findings

During the review we spoke remotely with the principal dentist. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open: Monday, Tuesday, Wednesday and Friday from 9am to 6pm and Thursday from 9am to 5pm.

Our key findings were:

- An infection prevention and control policy was in place which was in line with practice procedures.
- A new vacuum autoclave was in use. The practice was in the process of replacing the washer disinfector and investing in an ultra-sonic bath to be used instead of reliance on manual cleaning instruments alone.
- A dedicated hand washing sink had been installed in the decontamination room.
- Staff knew how to deal with medical emergencies. Appropriate medicines and life-saving equipment

- were available, this included a second oxygen cylinder. Medicine used in emergencies to treat serious allergic reactions was in line with recommendations in national guidance.
- Systems were in place to ensure medicines and lifesaving equipment were checked daily to ensure they were in date and in working order.
- The practice had ceased sedation services. Due to the Covid-19 pandemic, the practice had no plans to reintroduce this service until all staff training had been completed. This included Immediate Life Support (ILS) and Society for the Advancement of Anaesthesia in Dentistry (SAAD) training with airway management.
- Glucagon (a medicine used to prevent blood glucose levels dropping too low) was stored in the fridge dedicated for medical use only. The fridge maximum and minimum temperatures were monitored electronically and were uploaded onto a computer excel spreadsheet weekly.
- Sharps bins were dated and the external waste bin was locked and secured to the practice.

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

We found that this practice was providing well led care and was complying with the relevant regulations.

At our previous inspection on 12 March 2020 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 the review on 30 July 2020 we found the practice had made the following improvements to comply with the regulation:

- The practice infection prevention and control policy had been reviewed to ensure it was in line with practice procedures.
- A new vacuum autoclave was in use at the practice. The practice was in the process of replacing the washer disinfector and investing in an ultra-sonic bath to be used instead of reliance on manual cleaning instruments alone.
- A dedicated hand washing sink had been installed in the decontamination room. Sharps bins were dated and the external waste bin was locked and secured to the practice building.
- Staff knew how to deal with medical emergencies.
 Appropriate medicines and life-saving equipment were available, this included a second oxygen cylinder.
 Medicine used in emergencies to treat serious allergic reactions was in line with national guidance. Glucagon (a medicine used to prevent blood glucose levels dropping too low) was stored in the fridge dedicated for medical use only. The fridge maximum and minimum temperatures were monitored electronically and were uploaded onto a computer excel spreadsheet weekly.

Systems were in place to ensure medicines and lifesaving equipment were checked daily to ensure they were stored correctly, were in date and in working order. Staff participated in medical emergency scenario training.

• The practice had ceased sedation services. Due to the Covid-19 pandemic and lockdown staff had been unable to complete further training. The provider described how the practice had no plans to reintroduce this service until all staff training had been completed. This included Immediate Life Support (ILS) and Society for the Advancement of Anaesthesia in Dentistry (SAAD) training with airway management for staff providing treatment to patients who were under sedation. The provider confirmed that all staff will undertake the Immediate Life Support course before sedation is again offered from the service.

In addition, the partners had undertaken refurbishment of some areas of the practice. This included replacing the boiler, redecorating the reception and waiting room areas and the installation of a call bell in the patient toilet.

The practice remained open throughout the Covid-19 pandemic with a closed door policy. The registered manager detailed the systems that were in place at the practice to ensure the latest guidance was being followed to ensure patients and staff were seen in a safe environment. The provider told us that at the time of this review no aerosol generating procedures were being undertaken.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation.