

Mr Clive Lewis

Redhill Dental Care

Inspection report

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Overall summary

We undertook a desk-based review of Redhill Dental Care on 26 November 2020. This was carried out to review the actions taken by the registered provider to improve the quality of care and to confirm that the practice was now meeting legal requirements.

We had undertaken a comprehensive inspection on 6 August 2019 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 effective or well-led care in accordance with the relevant regulations 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 Redhill Dental Care on our website www.cqc.org.uk.

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.

As part of this review we asked:

- Is it effective?
- Is it well-led?

Background

Redhill Dental Care is in Wellingborough, Northamptonshire and provides NHS treatment to children and private treatment to adults.

There is level access for people who use wheelchairs and those with pushchairs. Car parking spaces, including one for blue badge holders, are available immediately outside the practice.

The dental team includes one dentist, one dental nurse, one receptionist and a practice manager. The practice has two treatment rooms and a separate decontamination room.

Summary of findings

The practice is owned by an individual who is the principal dentist there. They have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

Our key findings were:

- All staff at the practice had received training on the Mental Capacity Act (2005) and the associated regulations.
- The provider had an effective system in place to audit different aspects of dental care. A log had been implemented to ensure that actions identified during the audit process were completed.
- Systems were in place to ensure clinicians took into account guidance and legislative requirements for the completion of patient dental care records.
- Risk assessments had been undertaken for a wider scope of safety issues.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services effective?

No action



Are services well-led?

No action



Are services effective?

(for example, treatment is effective)

Our findings

At our previous inspection on 6 August 2019 we judged the practice was not providing effective care in accordance with the relevant regulations. We told the provider to take action as described in our requirement notice. During this review, we found the provider had made the following improvements to comply with the regulation:

- The provider demonstrated that they had implemented a new process for ensuring that audits were regularly undertaken and did not fall from recommended timescales. Dental dam use, antibiotic prescribing and record keeping were now included in the provider's audit framework. Actions from these audits were recorded and a system was in place to ensure that actions were completed.
- Staff had received training on the Mental Capacity Act (2005). The staff we spoke to showed a clear understanding of the importance of gaining and recording consent. A template had been added to the computerised record keeping system to ensure that this was not missed on patients' records.

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

Are services well-led?

Our findings

At our previous inspection on 6 August 2019 we judged the practice was not providing well-led care in accordance with the relevant regulations. We told the provider to take action as described in our requirement notice. During this review, we found the provider had made the following improvements to comply with the regulation:

- We viewed the audits that had been completed since the inspection. These included analysis and clear action plans. The resulting improvements were listed in the audit conclusions.
- The provider had implemented a significant event reporting process, and the staff we spoke to had a good understanding of how this could be used to learn from incidents.
- Meeting agendas and minutes were now recorded to evidence how issues and risks were discussed and managed.
- All members of staff had now received an annual appraisal.
- A risk assessment had been performed to improve the safety of staff who were lone workers.
- On our previous inspection we found that not all appropriate information was held relating to staff immunity to hepatitis B. This information was sent to us following the inspection.

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