

Dr. Karl Nightingale

Watch Dental Clinic - Benton

Inspection report

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Overall summary

We undertook a follow up desk-based inspection of Watch Dental Clinic - Benton on 1 March 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 had access to a specialist dental adviser.

We undertook a comprehensive inspection of Watch Dental Clinic - Benton on 12 October 2021 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 regulations 17 and 19 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 Watch Dental Clinic - Benton 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 inspection we asked:

- Is it well-led?

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 improvements in relation to the regulatory breaches we found at our inspection on 12 October 2022.

Summary of findings

Background

The provider has two dental practices and this report is about Watch Dental Clinic - Benton.

Watch Dental Clinic - Benton is in Newcastle Upon Tyne 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 a principal dentist, a practice manager, three associate dentists and four dental nurses, who also carry out reception work. The practice has two treatment rooms and is entirely on ground floor level.

During the inspection we communicated with the practice manager who provided evidence of practice procedures and other records relating to how the service is managed.

The practice is open:

Monday to Friday: 9am to 6pm.

There were areas where the provider could make improvements. They should

- Take action to ensure the practice's fire risk assessment is adequate and fire safety management is effective.

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 the inspection on 1 March 2022 we found the practice had made the following improvements to comply with the regulations:

- Improved leadership, governance and management at the practice.
- Improved systems to assess and manage health and safety risks to patients and staff.

Leadership capacity and capability

Leadership and management systems in the practice had improved. The practice manager used a compliance package to help with the governance for the practice. Alerts and reminders were scheduled to ensure required tasks, (for example, inspections, servicing or training), were carried out on time.

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

We saw the practice had effective processes to support and develop staff, including delegating additional roles and responsibilities to staff. Staff had specific training to support these roles, for example in Legionella control and fire safety checks.

Culture

Staff discussed their training needs during annual appraisals. The practice manager put into place arrangements to ensure staff training was up-to-date and reviewed at the required intervals.

Governance and management

Governance processes had improved within the practice, with systems of accountability to support good management.

We saw there were clear and effective processes for managing risks, issues and performance.

Improvements were found in undertaking recruitment checks, risk assessing staff whose immune status to Hepatitis B was unknown, servicing of equipment, Legionella control, and electrical safety.

A fire risk assessment was completed following our initial inspection. This was not suitable for healthcare premises and did not reflect all fire safety requirements. Following advice from a fire officer, the practice manager assured us they would review their fire risk assessment and safety procedures.

Continuous improvement and innovation

The practice had reviewed and improved their systems and processes for learning, continuous improvement and innovation.

Quality assurance processes, including audits of radiographs, were completed to encourage learning and continuous improvement.

The provider had also made further improvements in:

- The practice's protocols and procedures for the use of X-ray equipment
- Carrying out audits for prescribing of antibiotic medicines.