

Ortho-Tek Limited

Maidenhead Orthodontic Centre

Inspection report

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Date of inspection visit: 9 March 2023
Date of publication: 27/03/2023

Overall summary

We undertook a follow up focused inspection of Maidenhead Orthodontic Centre on 9 March 2023. This inspection 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.

The inspection was led by a CQC inspector who was supported by 2 specialist dental advisors.

We had previously undertaken an inspection of Maidenhead Orthodontic Centre on 13 September 2022 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 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 Maidenhead Orthodontic Centre on our website www.cqc.org.uk.

When 1 or more of the 5 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:

Summary of findings

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 13 September 2022.

Background

Maidenhead Orthodontic Centre is in Maidenhead, Berkshire, and provides NHS and private orthodontic care and treatment for adults and children.

There is step free access to the practice for disabled people and those with pushchairs.

Car parking, including dedicated parking for disabled people, is available near the practice.

The dental team includes 3 orthodontists, of which one is also the practice manager, 3 orthodontic nurses, 1 receptionist and a trainee orthodontic therapist.

The practice has two treatment rooms.

During the inspection we spoke with 2 orthodontists who were also the practice owners.

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

The practice is open:

- Monday to Friday from 9.00am to 5.30pm

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

(For example, are they well-managed and do senior leaders listen, learn and take appropriate action?)

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

At the inspection on 9 March 2023 we found the practice had made the following improvements to comply with the regulations:

Safety systems and processes, including staff recruitment, equipment and premises and radiography (X-rays)

The practice had infection control procedures which reflected published guidance.

The practice ensured equipment was safe to use and maintained and serviced according to manufacturers' instructions.

The practice ensured the facilities were maintained in accordance with regulations.

The management of fire safety within the practice was effective.

We saw a general rubbish bin at the rear of the practice which was not protected from unauthorised interference and potential arson. We have since been advised that a lockable bin will be installed on 3 April 2023.

The practice had a procedure to help them employ suitable staff and had checks in place. These reflected the relevant legislation.

Risks to patients

Emergency equipment and medicines were available and checked in accordance with national guidance

Effective staffing

Staff had the skills, knowledge and experience to carry out their roles.

Newly appointed staff had a structured induction and clinical staff completed continuing professional development required for their registration with the General Dental Council.

The practice had also made further improvements:

Staff carried out training in relation to sepsis awareness

The practice centrally monitored patient referrals to ensure they were received in a timely manner and not lost.