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Acorn Dental Practice

Inspection report

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Overall summary

We undertook a follow up inspection of Acorn Dental Practice on 20 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 a specialist dental advisor.

We had previously undertaken a comprehensive inspection of Acorn Dental Practice on 7 November 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 Acorn Dental Practice dental practice 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:

Are services well-led?

We found this practice was providing well-led care in accordance with the relevant regulations.

Summary of findings

The provider had made improvements in relation to the regulatory breach we found at our inspection on 7 November 2022.

Background

Acorn Dental Practice is in Acomb, York and provides 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 disabled people, are available near the practice.

The dental team includes 3 dentists, 2 qualified dental nurses, 2 trainee dental nurses, 1 dental hygienist, 1 dental hygiene therapist and 1 receptionist. The team is supported by the practice manager who was also a qualified dental nurse. The practice has 3 treatment rooms.

During the inspection we spoke with the principal dentist and the infection prevention and control lead dental nurse. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday to Friday from 8:45am to 5:30pm

Saturday from 8:45am to 12pm (generally 2 per month except for July and August)

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

- Improve the practice's infection control procedures and protocols taking into account the guidelines issued by the Department of Health in the Health Technical Memorandum 01-05: Decontamination in primary care dental practices, and having regard to The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance' In particular: the process for streaming unwrapped instruments, the use of manual cleaning detergent and effective quality assurance audit.

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 20 March 2023, we found the practice had made the following improvements to comply with the regulation:

Systems to ensure equipment and facilities were maintained and serviced were in place. The provider had undertaken a fixed electrical wiring inspection and all recommendations were being addressed.

The emergency medicines and equipment reflected recommended guidance, the system to check the medical emergency kit was effective.

Improvements had been made to ensure Infection prevention and control (IPC) systems and processes were operating in line with published guidance. The improvements included:

- A lead person was appointed to oversee IPC standards
- A dedicated handwashing sink was identified and used in line with guidance
- External validation logbooks were in use for equipment used to clean dental instruments

At the previous inspection we noted the dispensing of a cleaning solution into an unlabelled and unlidded container, this was not in line with guidance. At the follow up visit, we found the same method was in place. In addition, the practice was not 'streaming' dental instruments in line with published guidance ('streaming' refers to clean instruments kept unwrapped and ready for use, in the non-clinical area). We received confirmation after the follow up visit, that dispensing of cleaning solution into an unlabelled and unlidded container had ceased immediately, and a review of published guidance would take place to ensure the 'streaming' process was effectively implemented.

Except for the issues raised above, the infection prevention and control audit reflected current processes.

Systems were in place to ensure all clinical staff had adequate immunity for vaccine preventable infectious diseases. Risk assessments were available for those staff awaiting their immunity results.

Sharps risk management protocols were effective.

Systems to ensure the risk that could be caused from substances that are hazardous to health were effective.

Systems were in place for reporting, reviewing, and investigating incidents and accidents.

The practice had also made further improvements:

The provider had implemented systems to ensure monitoring and recording of the fridge temperature to ensure that medicines and dental care products are being stored in line with the manufacturer's guidance.

A system for responding to patient safety alerts, recalls and rapid response reports issued by the Medicines and Healthcare products Regulatory Agency, the Central Alerting System, and other relevant bodies, such as Public Health England was in place.

The provider had implemented effective systems to monitor when staff have undertaken continuous professional development as recommended by the General Dental Council professional standards.