

Whitecross Dental Care Limited

# Mydentist - Scotter Road - Eastleigh

## Inspection Report

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Hampshire

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Date of inspection visit: 02/08/2016  
Date of publication: 11/08/2016

## Overall summary

Further to the outcome of a previous inspection, carried out in November 2015, we carried out an announced focused inspection relating to the safe and well led provision of services on 2 August 2016 to ask the practice the following key questions;

Are services safe in relation to staff recruitment and infection control?

### Our findings were:

#### Are services safe?

We found that this practice was providing safe care in accordance with the relevant regulations.

#### Background

CQC inspected the practice on 20 November 2015 and asked the provider to make improvements regarding:

- Regulation 12 HSCA (RA) 2014 Safe Care and Treatment
- Regulation 19 HSCA (RA) Regulations 2014 Fit and Proper Persons employed

We checked these areas as part of this focused inspection and found these had been resolved.

Riverside Dental Practice is a dental practice providing mainly NHS and some private treatment and caters for both adults and children. The practice is situated in a converted commercial property above a veterinary practice. The practice has three dental treatment rooms with a decontamination area for cleaning, sterilising and packing dental instruments within each treatment room and a reception and waiting area.

The practice employs four dentists, a dental hygienist and four dental nurses, three of whom are in training and on a recognised training course. Supporting the clinical staff is a practice manager and four reception staff. The practice's opening hours are 8am to 8pm Monday to Friday. The practice operates a shift system with half of the staff working from 8am until 2pm and the remaining staff working from 2pm until 8pm.

The practice manager is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the practice is run.

# Summary of findings

The inspection was carried out by a CQC inspector.

## **Our key findings were:**

- Infection control procedures were robust and the practice followed published guidance.
- Staff recruitment files contained essential information in relation to Regulation 19, Schedule 3 of Health & Social Care Act 2008 (Regulated Activities) Regulations 2015.

## **There were areas where the provider could make improvements and should:**

- Amend the practice's recruitment policy so that procedures are in line with Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, specifically by undertaking health assessment checks in respect of persons prior to employment at the practice.
- Review recording processes for the validation of instrument decontamination equipment.

# Summary of findings

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Are services safe?**

We found that this practice was providing safe care in accordance with the relevant regulations.

At our previous inspection we identified risks that could compromise safe patient care and treatment with regard to staff recruitment and infection control. At this inspection we found risks in relation to these shortfalls were identified and mitigated.

Infection control procedures followed published guidance under the Health and Social Care Act 2008. Staff recruitment procedures ensured that all of the required checks for new staff were completed.

**No action**



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## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the practice was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

Further to the outcome of a previous inspection, carried out in November 2015, we carried out an announced focused inspection relating to the safe and well led provision of services on 2 August 2016. The inspection was carried out by a CQC inspector

During the inspection, we spoke with the practice manager and reviewed procedures and other documents.

To get to the heart of patients' experiences of care and treatment, we asked the following questions:

- Is it safe?

This question therefore formed the framework for the area we looked at during this inspection.

# Are services safe?

## Our findings

### Infection Control

The dental water lines were maintained to prevent the growth and spread of Legionella bacteria (Legionella is a term for particular bacteria which can contaminate water systems in buildings) they described the method they used which was in line with current HTM 01 05 guidelines. We saw that a Legionella risk assessment had been carried out at the practice by a competent person in 2014. The recommended procedures contained in the report were carried out and logged appropriately.

The practice used an ultra-sonic cleaning bath for the initial cleaning process, following inspection with an illuminated magnifier; the instruments were placed in an autoclave (a device for sterilising dental and medical instruments).

All recommended tests utilised as part of the validation of the ultra-sonic cleaning bath were carried out in accordance with current guidelines, the results of which were generally recorded in an appropriate log book.

We were shown the systems in place to ensure that the autoclaves used in the decontamination process were

working effectively. It was observed essential daily and weekly validation checks of the sterilisation cycles were carried out however the log book was not always completed.

We spoke with the practice manager who assured us weekly checks on the completion of the log books would start immediately following our visit.

### Staff recruitment

The practice had a recruitment policy which detailed the checks required to be undertaken before a person started work. For example, proof of identity, a full employment history, evidence of relevant qualifications and employment checks including references.

We looked at three staff recruitment files and records confirmed all had been recruited in accordance with the practice's recruitment policy. Staff recruitment records were ordered and stored securely.

None of the three staff had satisfactory information about any physical or mental health conditions which could be relevant to their roles. We spoke to the practice manager about this who undertook to implement a monitoring system as soon as practically possible.