

Affinity Dental Limited

Dale Street Dental Practice

Inspection report

36 Dale Street
Milnrow
Rochdale
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Overall summary

We undertook a follow up desk-based review of Dale Street Dental Practice on 25 October 2021. This review 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 review was led by a CQC inspector.

We undertook a focused follow up inspection of Dale Street Dental Practice on 28 April 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 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 Dale Street Dental Practice on our website www.cqc.org.uk.

As part of this review we asked:

- Is it well-led?

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 or review again after a reasonable interval, focusing on the areas where improvement was required.

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 breach we found at our inspection on 28 April 2021.

Summary of findings

Background

Dale Street Dental Practice is in Milnrow, Rochdale and provides private treatment for adults and NHS and private treatment for children.

There is level access for people who use wheelchairs and those with pushchairs. A large free car park including spaces for blue badge holders, is available near the practice.

The dental team includes one dentist, four dental nurses (one of whom is the practice manager and one is the clinical director), one dental hygiene therapist and a receptionist. The practice has two treatment rooms. The dental team is supported by a company director.

The practice is owned by a company and as a condition of registration must have a person registered with the Care Quality Commission as the registered manager. Registered managers have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run. The registered manager at Dale Street Dental Practice is the clinical director.

As part of this desk-based review, we reviewed the provider's action plan and evidence submitted to us. The practice had identified where there was a shortfall and had actions in place to ensure the practice was providing well-led care in accordance with the relevant regulations.

The practice is open:

Monday 8am to 3.30pm

Tuesday 9am to 5.30pm (the dentist does not work on Tuesdays)

Wednesday 9am to 7pm

Thursday 8am to 5.30pm

Friday 9am to 5.30pm

Our key findings were:

- Evidence of immunity against the Hepatitis B virus was in place for clinical staff.
- Recruitment procedures had been updated to carry out all necessary essential checks.
- Risks relating to Legionella control, patient safety alerts and hazardous substances were acted on.

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 our previous follow up inspection on 28 April 2021 we judged the provider was not providing well led care and was not complying with the relevant regulations. We told the provider to take action as described in our requirement notice. At the review on 25 October 2021 we found the practice had made the following improvements to comply with the regulation:

- The provider ensured that evidence of the effectiveness of the hepatitis B vaccination was checked for all clinical members of staff.
- The provider had made the necessary improvements to the recruitment processes. A new staff induction checklist and personal information sheet had been introduced to ensure essential checks were in place for new staff.
- The provider had a system to receive relevant 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. Further improvement had been made by demonstrating that appropriate action was taken in response to these.
- Systems to assess the risks to patients and staff from the use of hazardous substances had been implemented to comply with the Control of Substances Hazardous to Health Regulations 2002. Product safety data sheets obtained from their supplier were risk assessed and discussed with staff.
- Legionella water temperature control was in place, we saw that hot and cold water temperatures were monitored and documented.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation when we carried out our review on 25 October 2021.