

Dr. Narinder Sehra Acorn Dental Care Inspection report

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Overall summary

We undertook a follow up focused inspection of Acorn Dental Care on 10 August 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 Care on 20 March 2023 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 safe and well-led care and was in breach of regulations 17, 18 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 Acorn Dental Care 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 were required.

As part of this inspection, we asked:

- Is it safe?
- Is it well-led?

Our findings were:

Are services safe?

Summary of findings

We found this practice was providing safe care in accordance with the relevant regulations. The provider had made improvements in relation to the regulatory breach we found at our inspection on 20 March 2023

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 20 March 2023

Background

Acorn Dental Care is in Maidenhead and provides private dental care and treatment for adults and children.

There is step free access to the practice, at the rear of the building, for wheelchair users and those with pushchairs.

Car parking spaces, including dedicated parking for disabled people, are available at the rear of the practice.

The practice has made reasonable adjustments to support patients with access requirements.

The dental team includes 4 dentists, 4 dental nurses, 1 dental hygienist and 1 receptionist who is also the practice administrator.

The practice has 3 treatment rooms.

During the inspection we spoke with 1 dentist and 1 receptionist.

We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open:

• Monday to Friday 8am - 5pm

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services safe?	No action	\checkmark
Are services well-led?	No action	\checkmark

Are services safe?

Our findings

We found that this practice was providing safe care and was complying with the relevant regulations.

At the inspection on 10 August 2023, we found the practice had made the following improvements to comply with the regulations:

Infection Control

- Colour coded cleaning equipment was available for all areas of the practice.
- Two waiting room chairs were washable.

Radiography

- Rectangular collimators were available for all of the 3 X-ray machines.
- Local rules for the CBCT were available.
- The operator mirror for the CBCT machine was available.

Health and Safety

- Sharps boxes were used appropriately.
- A blood and body spillage kit was available.

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 10 August 2023, we found the practice had made the following improvements to comply with the regulations:

Infection Prevention and Control

- Cleaning check sheets identified who carried out the cleaning and when
- Evidence of oversight of cleaning standard checks was available.
- The infection control audit was completed correctly.
- Infection control audits were completed six monthly.

Control of Substances Hazardous to Health (COSHH)

- COSHH safety data sheets were available for COSHH relevant substances.
- COSHH products were stored securely in the kitchen.
- Sanitary bins were available in the practice.

General Data protection Requirements (GDPR)

• A GDPR compliant accident book was available.

Medicines

- Antibiotic prescribing followed current national standards.
- The most recent antimicrobial audit indicated the practice was meeting the required standards.

Sedation

• A sedation case log book was available for the in house sedationist.

Fire Safety

- The practice management demonstrated competence in fire safety management.
- The fire alarm was tested appropriately by activating call points in rotation.
- The room used to house oxygen was labelled with appropriate COSHH warning signs.

Privacy and Dignity

• Glass frosting on treatment rooms fully protect patients' privacy and dignity.

Equality Act 2010

- There was facility for disabled patients to summon help at the ramped access at the rear of the building
- Evidence of the provision of translation services was available.

Staffing

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

Recruitment

Are services well-led?

• The practice had a recruitment policy and procedure to help them employ suitable staff. These reflected the relevant legislation. One staff member had been recruited since our previous inspection and the required information was available.

The practice had also made further improvements:

- The practice had a system for receiving and acting on safety alerts.
- Antimicrobial prescribing audits were carried out..
- The practice kept detailed patient care records in line with recognised guidance.

We noted areas that remained outstanding which included:

• The wheelchair accessible toilet had a foot operated sanitary bin. We were assured this would be addressed as soon as practicably possible.