

Dr Sima Aiyub Kothiwala

# Alma Terrace

## Inspection report

3 Alma Terrace  
Silloth  
Wigton  
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### Overall summary

We undertook a follow up focused inspection of Alma Terrace on 25 January 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 had remote access to a specialist dental advisor.

We had previously undertaken a comprehensive inspection of Alma Terrace on 20 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 Alma Terrace dental practice on our website [www.cqc.org.uk](http://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 area 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.

The provider had made improvements in relation to the regulatory breach we found at our inspection on 20 September 2022.

# Summary of findings

## Background

The provider has 3 practices and this report is about Alma Terrace.

The practice is in Silloth in Cumbria and provides NHS and private dental care and treatment for adults and children.

The practice is located in a mid-terrace converted house. The surgery is located on the first floor and accessible only by stairs. Car parking spaces are available outside the practice.

The dental team includes 1 dentist, 1 dental nurse, 1 receptionist and 1 practice manager/dental nurse. The practice has 1 treatment room.

During the inspection we spoke with the practice manager. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday, Tuesday and Thursday from 9am to 1pm and from 2pm to 7pm

Wednesday from 9am to 1pm

Friday 9am to 2pm.

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

- Take action to ensure the practice's fire safety risk assessment considers all risks and ensure ongoing fire safety management is effective.
- Review 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 relating to the fixtures and fittings in the decontamination room.

# 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 25 January 2023 we found the practice had made the following improvements to comply with the regulation:

- Since the last inspection additional fire safety equipment had been introduced and the risk assessment had been updated. Further improvements could be made to ensure the risk assessment accurately considered all the facilities and risks at the practice. We discussed the importance of ensuring the risk assessment was carried out by a competent person with the appropriate skills and knowledge to adequately assess the risks.
- Improvements had been made and NHS prescription pads were stored and monitored in accordance with guidelines.
- Improvements had been made to the system for handling patient referrals to ensure they were monitored and followed up as required. We discussed further improvements could be made to ensure the system for handling urgent referrals was embedded.

The practice had also made further improvements:

- The practice had infection control procedures which reflected published guidance, though further improvements could still be made to the fixtures and fittings in the decontamination room. The designated “clean” area for sterilised dental instruments was no longer cluttered and improvements had been made to the storage arrangements. We observed there was still no hot water available for staff to wash their hands in the decontamination room. The handwashing sink had an overflow and did not have sensor-operated or lever-operated mixer taps which was not in accordance with current national guidance. The practice manager confirmed they would look into the options for improving the facilities further.
- The practice had introduced protocols and procedures to ensure staff are up to date with their mandatory training and continuing professional development. This was available to all staff and self-employed clinicians. The practice manager had oversight of any training carried out and could request for particular topics to be completed.
- The practice had changed the storage arrangements, so medicines were no longer stored in the fridge. Appropriate changes had been made to the expiry date to ensure they were stored in-line with the manufacturer’s guidance.