

Mr. Robin Phillips

Deepcar Dental Care

Inspection report

334 Manchester Road
Deepcar
Sheffield
S36 2RH
Tel: 01142882121

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Overall summary

We undertook a follow up focused inspection of Deepcar Dental Care on 6 July 2021. This inspection 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 inspection was led by a CQC inspector who was supported remotely by a specialist dental adviser.

We undertook a comprehensive inspection of Deepcar Dental Care on 23 March 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 Deepcar Dental Care on our website www.cqc.org.uk.

As part of this inspection 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 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 breaches we found at our inspection on 23 March 2021.

Summary of findings

Background

Deepcar Dental Care is in Deepcar, a village to the north west of Sheffield in South Yorkshire 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. There is roadside car parking outside the practice.

The dental team includes one dentist, two dental nurses and one receptionist. The practice has one treatment room.

The practice is owned by an individual who is the principal dentist there. They have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

During the inspection we spoke with one dentist, one dental nurse and one receptionist. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open: Monday to Thursday: 9am to 1pm and 2pm to 5:45pm and Friday: 7.30am to 2.30pm.

Our key findings were:

- The practice had produced policies for recruitment, safeguarding vulnerable adults, duty of candour and consent. These policies were not in place at our last inspection visit.
- New Disclosure and Barring Service (DBS) certificates had been applied for or obtained for every member of staff.
- Staff files contained the information required by Schedule 3 of the Health and Social Care Act 2008 Regulations.
- All staff had completed basic life support training and a system had been established to monitor staff training and development.
- A new Legionella risk assessment had been completed.
- The five-year fixed wire safety check had been completed together with PAT testing of all electrical items in the practice.
- A new ultrasonic cleaner had been purchased to reduce the amount of manual cleaning of dental instruments within the practice.

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 inspection on 23 March 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 inspection on 6 July 2021 we found the practice had made the following improvements to comply with the regulation:

- Improvements had been made to systems and processes which gave the provider a better oversight of activities within the practice. For example, new policies had been introduced for recruitment, safeguarding vulnerable adults, duty of candour and consent.
- All staff had submitted new Disclosure and Barring Service (DBS) applications. The certificates for two staff members had been returned and the other two staff members were expected to receive theirs in the coming days.
- Staff files had been reviewed and contained the information required by Schedule 3 of the Health and Social Care Act 2008 Regulations. This included previously missing information/ details: for example, a photograph, proof of identity and medical history for all staff.
- All staff had completed basic life support training on 14 April 2021 and had certificates in their staff files. Additional training for consent, the Mental Capacity Act (2005) and duty of candour awareness had been completed by all staff. The provider had introduced a monitoring system to give oversight of staff training and development.
- A new Legionella risk assessment had been completed by an external company on 13 May 2021. A new system for monitoring and logging hot and cold-water temperatures had been introduced and records kept. The records showed the hot water temperature was above 55 degrees centigrade and the cold-water temperature below 20 degrees centigrade.
- A five-year fixed wire electrical safety check was completed on 25 May 2021 and a certificate was held within the practice. All portable electric appliances within the practice had been checked for safety (a PAT test) on 6 April 2021.

The practice had also made further improvements:

- At our last inspection visit in March 2021 we identified the practice was using manual cleaning to clean dental instruments. The guidance: The Health Technical Memorandum 01-05: Decontamination in primary care dental practices, (HTM 01-05), published by the Department of Health and Social Care identifies manual cleaning is the least effective recognised cleaning method as it is the hardest to validate and carries an increased risk of an injury from a sharp instrument. To reduce the risk the practice had purchased an ultrasonic cleaner in June 2021. This was equipped with a data logger to provide staff with information about the machine's performance.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with regulation 17 when we inspected on 6 July 2021