

W & S K Ltd

The Hollies Dental Practice

Inspection Report

14 Park St, Chatteris, Cambridgeshire

PE16 6AF

Tel: 01354 692151

Website:

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Overall summary

We undertook an announced focused inspection at The Hollies Dental practice on 24 July 2017. The inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 14 February 2017 had been made.

We inspected the practice against two of the five questions we ask about services: is the service safe and is it well-led?

During our inspection we spoke with the practice manager, one dentist and reviewed a range of documentation.

Are services Safe?

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

Are services Well-led?

We found that this practice was providing well-led care in accordance with the relevant regulations.

Key findings

The provider had failed to address many of the shortfalls we had identified at our previous inspection. However, immediately following this second inspection, the provider sent us sufficient evidence to demonstrate that the practice was now safe and adequately well-led.

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

- Embed newly implemented improvements into the practice and ensure they are sustained in the long term

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?

Are services Safe?

We found that this practice was providing safe care in accordance with the relevant regulations. The provider had taken sufficient action to address many of the shortfalls we identified during our previous inspection. For example, medical emergency equipment and medicines now met national guidelines; staff rehearsed medical emergency simulations; procedures to manage significant events had been implemented; staff rehearsed fire evacuations; prescriptions issued to patients were now monitored and the quality of radiographs was recorded. Plans were in place to upgrade the practice's decontamination room to better manage infection control.

We consider the provider to be compliant with regulation 12 of The Health and Social Care Act 2008- Safe Care and Treatment.

No action



Are services well-led?

The provider had failed to take action to address some of the shortfalls we had identified during our previous inspection. For example, dentists did not routinely use rubber dams to protect patients' airways, staff did not receive regular appraisal of their performance, infection control policies had not been updated to reflect current guidance, and no action had been taken to improve accessibility at the practice. However, immediately following this second inspection the provider sent us adequate information to demonstrate that he now complied with the breach in regulation.

We consider the provider to be compliant with regulation 17 of The Health and Social Care Act 2008- Good Governance.

No action



Are services safe?

Our findings

At our previous inspection in February 2017, we identified a number of shortfalls, which showed that the practice was not safe. During this inspection we noted the following improvements had been implemented since then:

- The practice had implemented its own significant event policy and log. Significant events were a standing agenda item at the staff meeting and the manager checked the log each week to see if any new incidents had been recorded.
- Sharps' injury protocols had been put on display in areas where they were used such as treatment rooms.
- Certificates we viewed showed that all staff had completed basic life support training in March 2017.
- Missing medical emergency equipment such as a spacer device and child's oxygen face mask had been obtained, and all airways we checked were in date for safe use. The practice had obtained buccal midazolam and aspirin, and was now monitoring the fridge temperature where glucagon was stored.
- Although employment information for the visiting sedationist was not available during this inspection, it was sent to us the next day.
- Full fire evacuations were now rehearsed in the practice. At the most recent one, some staff had failed to evacuate the building, mistaking the fire alarm for a car

alarm. In light of this, the practice manager told us she would conduct another one soon. We viewed evidence which showed that regular checks of fire exits, smoke alarms and torches were now undertaken.

- Equipment used to clean the practice was now stored safely and colour coded correctly to help reduce the spread of infection.
- At our previous inspection we had a number of concerns about the practice's decontamination procedures, which arose primarily from the shortage of space in the area. The practice had decided to re-site its decontamination room upstairs to a larger area and we viewed the building plans in place for this. The practice manager told us she hoped it would be completed by the end of the year at the very latest.
- A system to manage national patient safety alerts had been implemented: the manager now printed them off and kept them in a specific folder for staff to view.
- Prescriptions issued to patients were now logged so that they could be tracked effectively, although we noted they were still not being stored securely to prevent their theft.
- We viewed a small sample of dental care records and saw that the quality of radiographs was being recorded.

As a result of this, we consider the provider had taken adequate action to meet the breach in regulation.

Are services well-led?

Our findings

Governance arrangements

There remained a number of areas identified at our previous inspection where the provider had failed to make improvements to the service. However, following this inspection, the provider took action to rectify the outstanding shortfalls. For example, an AED was purchased the day following this inspection; all staff undertook

safeguarding training, a Legionella risk assessment was booked for 8 August 2017, a DBS check for one dental nurse which had not been obtained at our last inspection, was requested the day following this inspection; a portable hearing loop was ordered and staff rehearsed an emergency medical simulation. Appraisal dates were arranged for all staff.

As a result of this, we consider the provider had taken adequate action to meet the breach in regulation.