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Wiese & Associates - Cottenham

Inspection Report

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Overall summary

We undertook a focused inspection of Cottenham Dental Practice on 28 June 2019. 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.

We had undertaken a comprehensive inspection 11 December 2018 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 care in accordance with the relevant regulations 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 Cottenham Dental Practice on our website www.cqc.org.uk.

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.

As part of this inspection we asked:

- Is it safe

Our findings were:

Are services safe?

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 11 December 2019. These must be embedded and sustained in the long-term.

Background

Wiese and Associates Dental Practice is a well-established practice based in Cottenham that provides mostly private dental treatment to about 2,200 patients. The dental team includes three part-time dentists, two dental nurses and two reception staff. There is a practice manager based at the provider's other service who assists in the running of the practice. There is one treatment room.

The practice opens on Mondays to Fridays from 9 am to 5.30 pm, and on Saturday mornings by arrangement.

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.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services safe?

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

Comprehensive action had been taken to address the shortfalls we had identified at our previous inspection. For example, fire and legionella risk management was more robust, prescriptions and patient referrals were better monitored, and infection control procedures had strengthened.

Staff had worked hard and effectively to implement these improvements.

No action



Are services safe?

Our findings

At our previous inspection on 11 December 2018, we judged the practice was not providing safe care in accordance with the relevant regulations. During this inspection we found the following improvements:

- A formal process to prevent wrong site surgery had been implemented and we viewed its protocol on the treatment room wall to make it easily accessible to clinicians.
- The recruitment policy had been updated and now included information about disclosure and barring checks for staff.
- A full fire risk assessment had been completed and staff now checked all smoke alarms and carbon monoxide monitors each week. Fire extinguishers had been re-sited and out on wall brackets to make them easier to access. Signage to indicate fire exits and that compressed gas was stored on site was now displayed. A landlord's gas safety certificate had been obtained to ensure the safety of the practice's boiler.
- The X-ray unit had been fitted with rectangular collimation to reduce patient exposure.
- Staff now undertook regular medical emergency simulations as part of their practice meetings and we viewed minutes which showed that they had practiced responding to a patient asthma attack in March 2019, and to an anaphylactic shock in May 2019. The contents of the resuscitation kit had been reviewed and re-sited in the one place for ease of access in an emergency. Daily checks of the oxygen cylinder now took place.
- A new 'hands free' illuminated magnifier glass had been purchased and units in the decontamination area had been resealed. The water temperature of water used to manually clean dirty instruments was now monitored. Daily time, steam and temperature tests were undertaken to ensure the autoclave was operating effectively. Infection control audits were undertaken every six months and results from the one undertaken in April 2019 demonstrated the practice was meeting essential standards.
- A full legionella risk had been completed in February 2019, and the practice's business manager had undertaken training in legionella management. Water testing was undertaken, and results from the test on May 2019 showed that water used was safe.
- A system to identify any loss or theft of individual prescriptions had been implemented.
- Information about local smoking cessation services had been displayed in the waiting area, making it easily accessible to patients.
- A system to monitor patient referrals was in place and the receptionist checked each week that referrals had been received.
- Grab rails had been installed in the bathroom, a chair with arms had been put in the waiting room and information about the practice had been produced in large print.

These improvements demonstrated the provider had taken effective action to comply with regulation.