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The Forge Dental Surgery

Inspection report

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Overall summary

We undertook a follow up focused inspection of The Forge Dental Surgery on 5 July 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 carried out by a CQC inspector.

We had previously undertaken an inspection of The Forge Dental Surgery on 28 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 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 The Forge Dental Surgery 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 was 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 22 February 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 22 February 2023.

Background

The Forge Dental Surgery is in Bourton-on-the-Water and provides private dental care and treatment for adults and children.

The practice is based on the first floor and is not accessible to wheelchair users.

There is a stairlift for patients who find stairs a barrier.

The dental team includes 2 dentists, 1 student dental nurse, 1 dental hygienist and a qualified dental nurse who also is the practice manager.

The practice has 2 treatment rooms of which one is in use.

During the inspection we spoke with 1 dentist, 1 dental nurse and a student dental nurse.

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

The practice is open:

- Monday - Wednesday 9am to 5pm
- Thursday 9am to 4pm

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

- Take action to ensure the suitability of the premises and ensure all areas are fit for the purpose for which they are being used. In particular electrical safety and clinical flooring seals.
- Take action to ensure audits for prescribing of antibiotic medicines, taking into account the guidance provided by the College of General Dentistry, are completed in full.

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



Are services well-led?

No action



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 5 July 2023, we found the practice had made the following improvements to comply with the regulations:

Cleaning

- Cleaning equipment storage arrangements followed national guidance.
- A decontamination room worktop-to-wall seal was complete.
- The latest infection control audit was carried out appropriately.

Clinical Waste

- Clinical waste was stored securely.
- A clinical waste bin in the decontamination room was foot operated.

Sharps

- Sharps injury information was available in the treatment room.
- Sharps injury information in the decontamination room included an occupational health advice telephone number.
- Immunity to Hepatitis B status was known for all clinical staff.
- Sharps boxes throughout the practice were used appropriately in line with sharps regulations.

Medical Emergencies

- Midazolam was available.
- An oxygen cylinder of the correct size was available.
- The glucagon expiry date had been adjusted to reflect the 'non-refrigerated' storage arrangements.
- Emergency medicines were checked correctly.
- There were no 'out of date' medicines present in the emergency bag.
- All staff had evidence to confirm they carried out basic life support training in the previous 12 months.

Control of Substances Hazardous to Health (COSHH)

- COSHH risk assessments were available for all relevant substances.
- COSHH products were stored securely and labelled appropriately.

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 5 July 2023, we found the practice had made the following improvements to comply with the regulations:

Fire Safety.

- An emergency fire escape at the rear of the practice was signed appropriately.
- A fire risk assessment was carried out by a someone who could demonstrate competence in fire safety management.

Radiography

- Annual mechanical test certificates were available for the X-ray machine.
- A current three yearly physics test certificate was available for the X-ray machine.

Lone working

- The cleaner worked when the practice was closed. A lone worker risk assessment had been carried out.

Professional Indemnity

- Clinicians had professional indemnity cover in place to treat patients.

Recruitment

- Effective procedures were followed to help them employ suitable staff.

Patient Safety Alerts

- Patient safety alert relevant to dentistry were received and acted appropriately.

Data protection

- Patient records were stored securely in the administration office and the rear staff area of the practice.
- A General Data Protection Act (GDPR) compliant accident book was available.

Staffing

- Staff received the training necessary to enable them to carry out the duties.

We noted areas that remained outstanding which included:

- Floors-to-skirting board seals in clinical rooms were not complete. The provider showed us quotes for repairs, but these remained outstanding.
- Three five yearly electrical installation (fixed wiring) tests had been carried out for different areas of the practice building:
 - Results of the first test was satisfactory.
 - Results of a second test was unsatisfactory.
 - We were unable to determine the result of the third test because pages 1 and 2 were not available.
- Antimicrobial audits were not completed in full to demonstrate that dentists were following current guidance and legislation.

The provider assured us they would carry out remedial actions as soon as practicably possible.