

White House Dental Practice Limited

# The White House Dental Practice

## Inspection report

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### Overall summary

We undertook an unannounced follow up focused inspection of The White House Dental Practice on 21 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 led by a CQC inspector who was supported by a specialist dental advisor and a second CQC inspector.

We had previously undertaken a comprehensive inspection of The White House Dental Practice on 20 April 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 safe and well-led care and was in breach of regulations 17, 18 and 19 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 White House 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 areas where improvement was required.

As part of this inspection we asked:

- Is it safe?
- Is it well-led?

### Our findings were:

# Summary of findings

## 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 breaches we found at our inspection on 20 April 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 breaches we found at our inspection on 20 April 2023.

## Background

The White House Dental Practice is in Southall and provides NHS dental care and treatment for adults and children.

There is level access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces, including dedicated parking for disabled people, are available near the practice. The practice has made reasonable adjustments to support patients with specific needs.

The dental team includes 2 principal dentists, 12 associate dentists, 2 foundation training dentists, 7 dental nurses, 15 trainee dental nurses, 2 dental therapists, 2 decontamination operators, 6 receptionists 1 compliance manager and 1 practice manager who is also a qualified dental nurse. The practice has 8 treatment rooms.

During the inspection we spoke with the 2 principal dentists, 3 associate dentists, 4 dental nurses, 3 trainee dental nurses, 1 dental therapist, 1 receptionist, the compliance manager and the practice manager. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open:

Monday to Friday from 9am to 6pm

Saturday from 9am to 5pm

Sunday open for NHS 111 dental emergency service.

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

- Improve the practice's protocols and procedures for the use of X-ray equipment in compliance with The Ionising Radiations Regulations 2017 and Ionising Radiation (Medical Exposure) Regulations 2017 and taking into account the guidance for Dental Practitioners on the Safe Use of X-ray Equipment.

# 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 21 July 2023 we found the practice had made the following improvements to comply with the regulations:

- Risks related to fire had been suitably mitigated. All recommendations within the latest fire risk assessment had been actioned, in particular, additional firefighting equipment had been installed and staff training was up to date. Appropriate fire safety checks were carried out, but improvements were required to ensure they are all logged.
- The use of sharps had been assessed appropriately. Although safer sharps were not available, systems were in place to reduce the risks of injury and policies reflected this. We saw evidence that all clinical staff had adequate Hepatitis B protection. New staff who had not yet received a course of immunisations had been risk assessed and their duties were performed accordingly.
- The practice had an appropriate recruitment policy and procedure to help them employ suitable staff, including for agency or locum staff that reflected the relevant legislation. On the day of inspection, 14 staff records were checked and we observed that recruitment checks as required in the Health and Social care Act 2008 (Regulated Activities) Regulations 2014 Schedule 3 were carried out. Improvements were required to ensure employment histories and satisfactory evidence of conduct in previous employment (references) are obtained from locum agencies who supply temporary staff.
- Staff had the skills, knowledge and experience to carry out their roles. We checked 14 staff files and observed that all staff had completed training as per national guidance for safeguarding, infection control, fire safety awareness, and basic life support. In addition, we interviewed staff and we were satisfied that they knew their responsibilities with regards to safeguarding, infection control and consent and they knew how to respond to various types of medical emergencies. We were told that daily team meetings were held, where these topics were discussed.
- Newly appointed staff had a structured induction and clinical staff completed continuing professional development required for their registration with the General Dental Council.

The practice had also made further improvements:

The practice had implemented systems for environmental cleaning taking into account the guidelines issued by the Department of Health - Health Technical Memorandum 01-05: Decontamination in primary care dental practices. We saw that the cleaning equipment was suitable for clinical environments and it was stored safely.

# 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 21 July 2023 we found the practice had made the following improvements to comply with the regulations:

- The provider had made the necessary improvements following our previous visit. The leadership and teamwork demonstrated a commitment to delivering safe and high quality care. Two team members had been promoted into managerial roles, which allowed greater oversight of the large team.
- The information and evidence presented during the inspection process was clear and well documented.
- Improvements had been made to ensure there was an effective system of clinical governance in place. Policies were updated, detailed and tailored to the service. There were arrangements in place to ensure policies were regularly reviewed.
- The practice had implemented an effective system to store and monitor staff training records. Training certificates, including for safeguarding, basic life support, infection control, medical emergencies, fire safety and where applicable, radiography were available for all members of staff.
- There was an effective system in place for reviewing incidents and significant events. We also checked the complaints received by the practice and observed that these had been dealt with appropriately.
- Staff were aware of the importance of privacy and confidentiality. The practice had removed closed-circuit television from all areas. Staff password protected patients' electronic care records and backed these up to secure storage. Computer terminals were locked when not in use.
- Good quality audits of radiographs were carried out in accordance with current guidance and legislation.

The practice had also made further improvements:

- The practice had started to implement audits for the prescribing of antibiotic medicines.