

Twickenham Dental Care Limited

# Twickenham Dental Care

## Inspection report

90 Heath Road  
Twickenham  
TW1 4BW  
Tel: 02087441944  
[www.twickenhamdentalcare.co.uk](http://www.twickenhamdentalcare.co.uk)

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### Overall summary

We undertook a follow up desk-based focused review of Twickenham Dental Care on 28 June 2023. This review was undertaken to check 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 review was led by a CQC inspector who had remote access to a specialist dental advisor.

We had previously undertaken a comprehensive inspection of Twickenham Dental Care on 15 November 2022 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 Twickenham Dental Care 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 well-led?

### **Our findings were:**

#### **Are services well-led?**

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

# Summary of findings

The provider had made improvements in relation to the regulatory breach we found at our inspection on 15 November 2022.

## Background

The provider has 2 practices and this report is about Twickenham Dental Care.

Twickenham Dental Care is in London Borough of Richmond-upon-Thames and provides private dental care and treatment for adults and children. The practice offers dental implants, orthodontics and sedation services.

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 3 dentists, an orthodontist, a periodontist, an oral surgeon, a dental nurse, a dental hygienist, an orthodontic therapist and 2 receptionists. The practice has 3 treatment rooms.

During the inspection we spoke with the principal dentist. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open:

Monday 8am to 4pm

Tuesday 9am to 7pm

Wednesday 10am to 6pm

Friday 9am to 4.30pm

Saturday 9am to 4pm.

# 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 the inspection on 28 June 2023 we found the practice had made the following improvements to comply with the regulation:

- Audits of infection prevention and control had been carried out accurately, reflecting the systems and processes within the practice. These were now being carried out at 6-monthly intervals.
- Radiographic audits were completed at the recommended intervals using a sample size appropriate to the service. Improvements could be made to reflect the current radiographic grading system.
- Practice policies had been updated to reflect current guidance and legislation and a system was in place to review them at appropriate intervals.
- Systems were in place to assess staff learning and development needs.
- Recruitment checks had been carried out and records were available for all members of staff following relevant legislation.
- Immediate Life Support training had been completed by staff members who were involved with conscious sedation procedures.

Fire Safety Management had been improved and was effective.

- A fire risk assessment had been carried out on 20 February 2023 and all recommendations within the report had been actioned. We saw that appropriate periodic in-house testing of fire safety equipment was carried out and recorded. Additional emergency lighting and smoke detectors had been installed.
- Regular staff training and fire drills were taking place.
- Fire exits were clear and fit for purpose.

The practice ensured equipment was safe to use, maintained and serviced according to manufacturers' instructions. The practice ensured the facilities were maintained in accordance with regulations. In particular:

- A fixed-wiring electrical safety test had been carried out on 22 March 2023 and the condition was found to be satisfactory.
- X-ray equipment annual electro-mechanical servicing had been carried out.
- The risks from sharps usage had been adequately assessed and mitigated.

The practice had also made further improvements:

- Recruitment checks had been carried out and records were available for all members of staff following relevant legislation.
- We checked some dental records remotely and we observed that the provider had introduced templates within the patient dental care record software which prompted them to record the necessary information. Basic Periodontal Examinations, cancer checks and radiographic justifications and reports were now being routinely recorded. Paper dental records were stored securely.
- The provider had implemented a referral log which enabled effective monitoring to ensure that patients received treatment in a timely manner.