

## Castlegate Dental Centre

# Castlegate Dental Centre

## Inspection Report

Castlegate Dental Centre

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Date of inspection visit: 7 April 2017

Date of publication: 09/05/2017

### Overall summary

We carried out a desk based follow up inspection on 7 April 2017 of Castlegate Dental Centre.

We had undertaken an announced comprehensive inspection of this service on 23 February 2017 as part of our regulatory functions and during this inspection we found one breach of the legal requirements.

During the follow up inspection the practice produced an action plan detailing what they had prepared to meet the legal requirements in relation to the breach. This report only covers our findings in relation to those requirements.

We checked whether they had followed their action plan to confirm that they now met the legal requirements.

We reviewed the practice against one of the five questions we ask about services: is the service well led?

A copy of the report from our last comprehensive inspection can be found by selecting the 'all reports' link for Castlegate Dental Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### **Our findings were:**

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

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

#### **Background**

Castlegate Dental Centre is located in York town centre and provides private treatment to adults and children, which includes dental implants, intravenous sedation, oral surgery, restorative and cosmetic dentistry.

The practice is located on the first and second floor, access is via a set of stairs which has handrails. Wheelchair users and patients who find the stairs difficult are informed of access to the practice prior to an appointment. Car parking spaces are available in the town or a local park and ride service offers easy access.

The dental team is comprised of four dentists, four dental nurses, two dental hygienists, one dental hygiene therapist, one practice manager and two receptionists working within four treatment rooms.

The practice is open: Monday to Friday 8:30am – 5:00pm.

The principal dentist is registered with the Care Quality Commission (CQC) as an individual registered person. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the practice is run.

Our key findings were:

# Summary of findings

- The practice had addressed issues relating to having in place an effective quality assurance process for Cone Beam Computed Tomography (CBCT) imaging equipment.
- The practice had addressed issues relating to having a sharps management risk assessment in place to mitigate the associated risks.
- The practice had addressed issues relating to the availability of lifesaving equipment and replaced emergency medical items found to be expired.

# 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 well-led?**

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

Since the last inspection on 23 February 2017 the practice demonstrated to us that risk associated with the carrying on of the regulated activity had been reduced. These included implementation of monthly quality assurance procedures for the CBCT, implementation of a risk assessment to mitigate sharps injuries and the procurement of additional emergency medical equipment.

We saw that the practice had implemented quality assurance measures for the CBCT imaging equipment.

We saw that the practice had produced a risk assessment in relation to sharps management to mitigate the risks associated with the activity.

We saw that the practice had replaced expired emergency medical items and procured additional lifesaving equipment not present on the day of inspection.

**No action**



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## Detailed findings

### Background to this inspection

We undertook a desk based follow up inspection of Castlegate Dental Centre on the 6 April 2017. This desk based follow up inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 23 February 2017 had been made. We examined evidence

provided by the practice against one of the five questions we ask about services: is the service well led. This is because the service was not meeting some of the legal requirements in relation to this question.

The desk based follow up inspection was carried out by a CQC inspector who had access to a specialist dental advisor.

# Are services well-led?

## Our findings

### **Governance arrangements**

We saw that medical emergency lifesaving equipment absent during the inspection day had been ordered. The practice had located the existing portable suction and had since ordered a replacement which would now be used as a spare. We saw invoice evidence that a spare medical oxygen cylinder was ordered 24 February 2017. We also saw that all emergency medical items found to be expired had since been replaced.

We saw that a sharps/splash injury policy and separate risk assessment dated 1 March 2017 had been implemented in line with its legal obligations under Health and Safety (sharps Instrument in Healthcare) Regulations 2013.

### **Learning and improvement**

We saw evidence that monthly quality assurance on the CBCT scanner was being carried out showing test analysis and results. Ionising Radiation (Medical Exposure) Regulations 2000 and HPA-CRCE-010 Guidance on the Safe Use of Dental CBCT Equipment require a comprehensive quality assurance program to be in place.