

Dr. Bryan Wilson

# Inglemire Dental Surgery

## Inspection Report

522 Inglemire Lane  
Hull  
Humberside  
HU6 8JL  
Tel: 01482 804080  
Website:

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### Overall summary

We undertook a follow up desk-based inspection of Inglemire Dental Surgery on 11 December 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.

The inspection was led by a CQC inspector.

We undertook a comprehensive inspection of Inglemire Dental Surgery on 29 August 2019 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 Inglemire Dental Surgery on our website [www.cqc.org.uk](http://www.cqc.org.uk).

As part of this inspection we asked:

- Is it well-led?

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.

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

#### **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 29 August 2019.

#### **Background**

Inglemire Dental Surgery is in Hull and provides NHS and private treatment to adults and children.

There is level access via a portable ramp for people who use wheelchairs and those with pushchairs. Car parking spaces are available near the practice.

The dental team includes two dentists, six dental nurses, two receptionists and a practice manager. The practice has two treatment rooms.

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.

The practice is open:

Monday, Thursday and Friday from 9:00am to 5:00pm

Tuesday from 9:00am to 7:00pm

Wednesday from 9:00am to 3:00pm

# Summary of findings

We were sent records about how the service is managed and how improvements had been made to systems and processes to ensure compliance with the regulations.

**Our key findings were:**

- Improvements had been made to the recruitment procedure.
- Improvements had been made to the system for monitoring staff training.

# 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 our previous inspection on 29 August 2019 we judged the provider was not providing well led care and was not complying with the relevant regulations. We told the provider to take action as described in our requirement notice. At the inspection on 11 December 2019 we found the practice had made the following improvements to comply with the regulation:

- Improvements had been made to the recruitment process. New Disclosure and Barring Service (DBS) checks had been carried out for the members of staff who required them and for those who only had basic

checks. In addition, photographic identification was available and held on file. Titre levels which were not present for members of staff at the inspection in 29 August 2019 were now present.

- A system had been put in place to ensure staff were up to date with 'highly recommended' training as per General Dental Council professional standards. We were sent evidence that staff had all completed safeguarding training and infection prevention and control training. The practice manager described the system they had in place to ensure staff training was monitored.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation when we inspected on 11 December 2019.