

Peacock and Shrestha

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Inspection report

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Overall summary

We undertook a follow up focused of Peacock and Shrestha on 15 March 2022. 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 provider was now meeting legal requirements.

We undertook a comprehensive inspection of the practice on 20 July 2021 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 Peacock and Shrestha on our website www.cqc.org.uk.

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.

As part of this inspection we asked:

- Is it well-led?

Our findings were:

We found this practice was providing well-led care in accordance with the relevant regulations. The provider had made good improvements in relation to the regulatory breach we found at our inspection on 20 July 2021.

Background

Peacock and Shrestha is a well-established practice based in Norwich, that provides mostly NHS treatment to about 15,000 patients. The dental team includes four dentists, two dental hygienists, a practice manager and six dental nurses. The practice has six treatment rooms, not all of which were operational at the time of our inspection.

There is portable ramp access to the practice for wheelchair users.

Summary of findings

On the day of inspection, we spoke with the practice manager. We looked at practice policies and procedures and other records about how the service was managed.

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.

During this inspection we found the following improvements had been made to comply with the regulation:

- We saw a system had been implemented to ensure that treatment room taps were descaled each month, and taps we checked were free from limescale.
- A water temperature chart was available in each treatment room and all hot water temperatures were above the recommended 55 degree Celsius. There was clear instruction on the charts for staff to inform the practice manager if the water did not reach the required temperature.
- Loose and uncovered dental materials were covered in treatment room drawers we checked, and all local anaesthetics were in their blister packs to ensure their sterility.
- Staff employment references were kept securely with other recruitment information to make them easily accessible.
- All dental clinicians now used rubber dam to ensure patients' airways were protected.
- Electrical fixed wire testing had been undertaken on 18 September 2021.
- The frequency of checks on the practice's oxygen cylinder and AED had increased and now met national recommended standards. The location of the emergency medical kit had been moved to make it more accessible in the event of an incident.
- The fridge's temperature where Glucagon was kept was monitored every day to ensure it operated effectively.
- A system had been implemented to ensure that lost or missing prescriptions could be identified easily.
- We viewed detailed records of unusual incidents and events that had occurred and saw that these had been discussed at practice meetings so that learning from them could be shared. For example, following a patient trip on the stairs, staff now accompanied all patients down the stairs to remind them of the uneven step.
- Regular audits of dental care records took place and records we viewed clearly showed that patients' risk levels of caries, gum disease and oral cancer had been routinely recorded.
- A system to gather patient feedback had been implemented. We viewed a summary of responses from 40 patients which showed high levels of satisfaction with the practice.

We found the provider had implemented effective measures to address the issues we had identified during our previous inspection. These improvements need to be embedded and sustained in the long run.