

Lynn Road Dental Practice Limited

Lynn Road Dental Practice

Inspection report

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Overall summary

We undertook a follow up focused inspection of Lynn Road Dental Practice on 20 September 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 11 May 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 Lynn Road Dental Practice 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 improvements in relation to the regulatory breach we found at our previous inspection. In general, improvements were noted in infection prevention and control, legionella management, medical emergency equipment, incident recording and staff appraisal.

Background

Summary of findings

Lynn Road Dental Practice provides both NHS and private dental care and treatment for adults and children. There is level access to the practice for people who use wheelchairs and those with pushchairs. There are ground floor surgeries and a fully accessible toilet.

Free car parking spaces, including those for people with limited mobility, are available nearby.

The dental team includes 5 dentists, 3 hygienists, a practice manager and 6 dental nurses. The practice has 4 treatment rooms.

During the inspection we spoke with the practice manager. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open on Mondays from 9am to 6pm, Tuesdays from 8.30am to 6.30pm, Wednesdays and Thursdays from 8.30am to 6pm and Fridays from 9am to 5pm. The practice also opens on a Saturday from 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.

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

- Essential weekly and quarterly checks for the practice's ultrasonic bath were now completed.
- Staff conducted appropriate water quality testing to reduce the risk of Legionella.
- All staff had undergone recent Disclosure and Barring checks to ensure they were suitable to work with vulnerable patients.
- All clinicians now used the safest types of needles and matrix bands.
- We viewed several practice risk assessments that had been reviewed and updated since our previous inspection.
- The practice's emergency medical kit now contained a full set of airways and a spacer device for inhaled bronchodilators. The practice had purchased a bodily fluid spillage kit and renewed its first aid kit.
- Anti-microbial audits were undertaken to ensure clinicians were prescribing according to national guidelines.
- Labels attached to dispensed medicines contained the practice's name and address.
- A system had been implemented to easily identify lost or missing prescriptions.
- Incidents and accidents were now a standing agenda item on all practice meetings to ensure learning from them was shared across the staff team.
- We reviewed a small sample of dental care records and saw that patients' risk of periodontal disease and tooth wear was now recorded.
- Additional staff had been employed to ensure the hygienists had chairside support if needed.
- A system to monitor patients' referrals had been implemented to ensure their timely management.
- A system to monitor staff training and ensure it was kept up to date had been implemented.
- All staff now received a regular appraisal of their performance.

Overall, 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.