

# Mr Georgios Karatzopoulos

# Acle Dental Surgery

## Inspection Report

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## Overall summary

We undertook a focused inspection of Acle Dental Surgery on 24 September 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 focussed inspection of the practice on the 19 March 2019 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. We found the registered provider was still 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 Acle dental surgery on our website [www.cqc.org.uk](http://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.

## Background

Acle Dental Surgery provides mostly private treatment to about 3,000 patients. It also provides some general dental and orthodontic treatment to children commissioned by the NHS. The practice opens on Monday to Thursday from 9am to 5pm, and on Fridays from 9am to 12.30pm. It opens till 7pm on alternate Monday and Wednesday evenings.

There is ground floor level access for people who use wheelchairs and those with pushchairs.

The dental team includes one dentist, a visiting orthodontist, a dental hygienist, an implant specialist and an endodontist. There are three dental nurses and one receptionist. 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.

During the inspection we spoke with the principal dentist, one dental nurse and the receptionist. We looked at practice policies and procedures and other records about how the service is managed.

### Our findings were:

# Summary of findings

The provider had taken sufficient action to become compliant with the breach for regulation 17 that we had identified in our two previous inspections of this practice.

# 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 inspections on 12 June 2018 and 19 March 2019 we judged the practice was not providing well-led care in accordance with the relevant regulations. We told the provider to take action as described in our requirement notice. During this inspection, we found the provider had made the following improvements to comply with the regulation:

- Missing emergency medical equipment had been obtained and the practice now had appropriate syringes and a full range of clear face masks.
- There was external signage to warn that oxygen was stored on the premises.
- Sharps boxes had been labelled and dated correctly.
- We checked six treatment room drawers and noted that all items had been covered to protect them from the risk of aerosol contamination.

- We viewed log books which demonstrated that regular protein and foil testing had been undertaken for the practice's ultrasonic bath to ensure it operated effectively.
- Glucagon had been removed from the fridge and its expiry date had been amended to accommodate this.
- Prescription pads were held securely. There was a procedure in place to monitor and track individual prescriptions to identify any loss or theft.
- A basic risk assessment had been completed for the hygienist who worked without chairside support.
- A portable hearing loop to assist patients who wore hearing aids had been purchased. One staff member told us that a patient had already requested it.
- The external clinical waste bin had been secured safely.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation.