

Mrs Sreelatha Thota

Clifton Garden Dental Surgery

Inspection report

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Goole
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Date of inspection visit: 15/01/2024
Date of publication: 19/01/2024

Overall summary

We undertook a follow up focused inspection of Clifton Garden Dental Surgery on 15 January 2024. This inspection was carried out to review 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 who was supported by a specialist dental advisor.

We had previously undertaken a comprehensive inspection of Clifton Garden Dental Surgery on 14 August 2023 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 (Good governance) 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 Clifton Garden Dental Surgery on our website www.cqc.org.uk.

When 1 or more of the 5 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:

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 14 August 2023.

Summary of findings

Background

Clifton Garden Dental Surgery is in Goole and provides NHS and private dental care and treatment for adults and children.

There is step free access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces are available near the practice. The practice has made reasonable adjustments to support patients with access requirements.

The dental team includes 2 dentists, 2 dental nurses (one of who is also the practice manager), 1 dental hygienist and a receptionist. The practice has 2 treatment rooms.

During the inspection we spoke with 1 dental nurse (who is also the practice manager). We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open:

Monday to Friday from 9am to 5pm

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 the inspection on 15 January 2024 we found the practice had made the following improvements to comply with the regulation:

- Improvements had been made to the system for ensuring an electrical installation condition report (EICR) was carried out in line with regulations. Since the previous inspection an EICR had been completed. This contained a number of actions. We saw evidence these had been addressed.
- Improvements had been made to the system for ensuring the fire alarm was serviced in line with regulations. We saw evidence the fire alarm had been serviced and any recommendations had been addressed. Staff described the system which was in place to ensure the fire alarm is regularly serviced.
- Improvements had been made to the system for ensuring controlled waste is disposed of correctly. We saw evidence that waste amalgam was now included on their waste removal contract and was being stored safely and securely.
- Improvements had been made to the system for ensuring all clinicians had sufficient medical indemnity. We saw evidence of up to date and sufficient medical indemnity for the clinicians. Staff advised us a system was in place to check the clinician's medical indemnity.
- Improvements had been made to the sharps risk assessment. This now included the risks associated with dismantling matrix bands.
- Improvements had been made to the system for ensuring staff are up to date with required training. We saw evidence all staff were up to date with their required training and the system for ensuring this had been amended.

The practice had also made further improvements:

- Improvements had been made to the detail recorded in dental care records. We saw evidence of a justification for the prescribing of antibiotics. However, more detail is required in the reporting of radiographs.