

Du Toit and Burger Partnership (Stratford) Ltd Mydentist - Plaistow Road -London

Inspection report

119 Plaistow Road London E15 3ET Tel: www.mydentist.co.uk

Date of inspection visit: 9 October 2023 Date of publication: 20/10/2023

Overall summary

We undertook a follow up focused inspection of MyDentist – Plaistow Road - London on 9 October 2023. 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 MyDentist – Plaistow Road – London on 17 March 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 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 MyDentist – Plaistow Road – London 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 area 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.

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Summary of findings

The provider had made improvements in relation to the regulatory breach we found at our inspection on 17 March 2023.

Background

The provider is part of a dental group with multiple locations, and this report is about MyDentist -Plaistow Road -London. The practice is in the London Borough of Newham 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. There is limited car parking available near the practice. The practice has made reasonable adjustments to support patients with access requirements.

The dental team includes 2 dentists, 2 qualified dental nurses and 1 trainee dental nurse, 1 dental hygienist, 1 practice manager and a receptionist. A management team supports the practice team.

The practice has 3 treatment rooms.

During the inspection we spoke with 1 dentist and the receptionist. We also spoke with a member of the management team.

We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open between 9am and 5pm Monday to Friday.

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 9 October 2023, we found the practice had made the following improvements to comply with the regulation:

- The results of risk assessments in relation to fire safety and Legionella were reviewed and monitored to ensure that areas for improvement were acted on to effectively mitigate risks.
- There were arrangements to monitor fire safety checks to ensure that these were carried out in accordance with the provider's policies and other relevant guidance and legislation.
- There were arrangements to mitigate risks associated with the handling of dental sharps. The practice risk assessments included measures to mitigate risks where staff did not have evidence of effective immunity against the Hepatitis B virus.
- There were arrangements to ensure that safety alerts were shared with relevant staff as part of a system to reduce risks to patients and staff.
- There were arrangements to ensure that audits were reviewed and monitored to drive improvements in accordance with relevant legislation and guidelines.
- There were systems and oversight to ensure that practice policies and procedures were followed consistently.
- There were systems to monitor staff training and undertake performance reviews and appraisals.

The practice had also made further improvements:

- The practice's recruitment policy and procedures were followed to ensure accurate, complete and detailed records are maintained for all staff.
- Dental care records were completed, taking into account the guidance provided by the College of General Dentistry when completing dental care records.
- Audits for prescribing of antibiotic medicines were carried out taking into account the guidance provided by the College of General Dentistry.