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# The Courtyard Clinic

## Inspection report

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### Overall summary

We undertook a follow up focused inspection of The Courtyard Clinic on 24 October 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 practice was now meeting legal requirements.

The inspection was led by a CQC inspector who was supported by a specialist dental adviser.

We had previously undertaken a comprehensive inspection of The Courtyard Clinic on 17 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, 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 The Courtyard Clinic dental practice on our website [www.cqc.org.uk](http://www.cqc.org.uk).

When one or more of the 5 questions are not met we require the service to make improvements and send us an action plan (requirement notice only). 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?

#### **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 17 May 2022.

#### **Background**

# Summary of findings

Courtyard Dental Clinic is in Danbury, Chelmsford, Essex and provides 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. Car parking spaces are available at the rear the practice. The practice has made reasonable adjustments to support patients with additional needs with level entry access, wide entrance doors, a specialist dental chair for those with limited mobility and a fully accessible toilet with grab rails and a call bell.

The dental team includes 1 dentist, 1 dental nurse, 1 dental hygienist and 1 visiting dentist. The practice has 1 treatment room.

During the inspection we spoke with 1 dentist. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Mondays from 9am to 5pm.

Alternate Thursdays and Fridays from 9am to 4pm.

Weekends by appointment.

# 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 24 November 2022 we found the practice had made the following improvements to comply with the regulation:

- The practice had introduced a compliance system to ensure regular audits were undertaken, reviewed and actions identified were acted on. This included audits of infection prevention and control and radiography. Other audits had been undertaken including an audit of disability access of the premises.
- The practice had introduced systems to ensure effective tracking for patient referrals. This ensured patients who were referred to other services could be identified and where required followed up.
- The practice had a system for receiving and acting on safety alerts. There were systems in place to ensure these were shared with staff at the practice.
- The practice had implemented systems to assess, monitor and manage risks to patient and staff safety. This included sharps safety, sepsis and lone working. Risk assessments for substances that were hazardous to health were undertaken and included housekeeping cleaning products used in the practice.
- Emergency equipment and medicines were available and checked in accordance with national guidance.
- The practice had systems for appropriate and safe handling of medicines. Dispensed medicines contained the appropriate practice information on the label, such as the name and address of the practice.
- Patients' dental assessments were recorded in accordance with nationally recognised evidence-based guidance.

The provider had also made further improvements:

- Antimicrobial prescribing audits were carried out to ensure clinicians were following NICE guidance .