

The Orthodontic Centre (Reading) Ltd

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## Inspection report

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Date of inspection visit: 12 April 2024  
Date of publication: 24/04/2024

### Overall summary

We undertook a follow up focused inspection of The Orthodontic Centre (Reading) Ltd on 12 April 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 carried out by a CQC inspector who was supported remotely by a specialist dental advisor.

We had previously undertaken a comprehensive inspection of The Orthodontic Centre (Reading) Ltd on 5 October 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 The Orthodontic Centre (Reading) Ltd on our website [www.cqc.org.uk](http://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:**

# Summary of findings

## 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 5 October 2023.

## Background

The Orthodontic Centre (Reading) Ltd is in Reading and provides NHS and private orthodontic dental care and treatment for adults and children.

There is step free access (via a portable ramp) to the practice for people who use wheelchairs and those with pushchairs.

Car parking for disabled people is available near the practice.

The practice has made reasonable adjustments to support patients' access requirements.

The dental team includes 2 specialist orthodontist, 3 dentist with specialist interest (DWSI), 5 orthodontic therapists, 7 dental nurses, 3 reception staff, 1 practice manager, 3 treatment coordinators and 1 administrator.

The practice has 8 treatment areas.

During the inspection we spoke with the compliance coordinator and the practice manager.

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

## The practice is open:

- 8.00am to 4.30pm Monday
- 8.15am to 7.00pm Tuesday and Thursday
- 8.15am to 5.30pm Wednesday
- 7.45am to 4.15pm Friday
- 8.15am to 1.00pm One Saturday per month

# 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 safe care and was complying with the relevant regulations.

At the inspection on 12 April 2024, we found the practice had made the following improvements to comply with the regulations:

### Infection control

- Manual scrubbing was carried out in line with national infection prevention and control guidance.
- A protocol for decontamination glove changes was available.
- The decontamination nurse was seen wearing the correct personal protective equipment when scrubbing instruments.
- Instruments in treatment room 5 were pouched appropriately.
- Staff clinical uniforms and outdoor clothes were stored separately in the staff room to remove the risk of cross infection.

### Risks to patients and staff

- The first floor waiting area window was fitted with a restrictor to prevent someone falling out and sustaining a serious injury.
- Staff could demonstrate how to identify and manage Sepsis in patients.

### Privacy and Dignity

- The windows to the upper floors had sufficient covering in place to protect patient privacy.
- Glass partitioning on treatment room doors was covered to protect patients' privacy and dignity.

### Equality Act

- The hearing loop was available and in use at the time of our visit.

### Fire safety

- Fire drills were carried out and records of staff present, and the evacuation time was recorded correctly.
- All staff had carried out fire safety training in the previous 12 months.

### The practice had also made further improvements:

- X-ray equipment and emergency medicines and equipment were secured when not being used to prevent unauthorised interference.