

Wensum Dental Practice Limited

Wensum Dental Practice

Inspection report

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Overall summary

We undertook a follow up inspection of Wensum Dental Practice on 21 September 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 provider was now meeting legal requirements.

We had previously undertaken a comprehensive inspection of the practice on 20 April 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 regulations 17 and 19 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 Wensum Dental Practice on our website 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. The provider had made effective improvements in relation to the regulatory breaches we found at our previous inspection. In general improvements were noted in infection control, staff recruitment, fire safety, patient dental care records and auditing systems.

Background

Wensum Dental Practice provides private dental care and treatment for adults and children.

Summary of findings

There is ramped access to the practice for people who use wheelchairs and those with pushchairs. There are ground floor surgeries but not a fully accessible toilet.

Car parking spaces are available on site.

The dental team includes two dentists, two hygienists, a practice manager and five dental nurses. The practice has three treatment rooms.

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

The practice is open on Mondays to Fridays 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.

During this inspection we found the following improvements had been made to comply with the regulations:

- Infection control audits were now undertaken according to national guidelines. The practice had introduced a system to ensure heavy duty gloves were changed weekly and the washer disinfectant was in the process of being plumbed in when we visited.
- The recommendation from the practice's legionella risk assessment to have the air conditioning unit serviced had been completed.
- The practice had obtained new Disclosure and Barring Service checks for all staff.
- Recommendations from the practice's radiation safety report had now been implemented, including placing trunking on wiring in surgery two and increased checks of radiation equipment.
- A fire risk assessment had been completed and its recommendations for additional signage, an electrical installation survey, emergency lighting and the removal of the toaster had been actioned.
- Portable suction and an eye wash kit had been purchased.
- A system to identify missing medicines had been introduced.
- Incidents and accidents had been added as a regular standing agenda item at all practice meetings to ensure learning from them could be shared across the staff team.
- We viewed a small sample of dental care records and noted the recording of patients' risk levels of caries, tooth wear and periodontal disease were recorded.
- A risk assessment had been completed for times when the hygienist worked alone.
- All referrals from the practice to other health care providers were actively recorded and monitored to ensure their timely management.
- The practice manager had introduced a yearly schedule to ensure that all required audits were completed within recommended timescales. We noted that the results of recent audits had been discussed at staff meetings to ensure learning was shared and to drive improvement.

Overall, we found the provider had implemented appropriate measures to address the issues we had identified during our previous inspection. These improvements need to be embedded and sustained in the long run.