

Love-Teeth Dental Practice Ltd

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Inspection report

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Overall summary

We undertook a follow up desk-based review of Love-Teeth Dental Practice on 30 November 2020. This review 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 review was led by a CQC inspector.

We undertook a comprehensive inspection of Love-Teeth Dental Practice on 5 November 2019

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 Love-Teeth Dental Practice on our website www.cqc.org.uk.

As part of this review we asked:

- Is it well-led?

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 or review again after a reasonable interval, focusing on the areas where improvement was required.

Our findings were:

Are services well-led?

Summary of findings

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 November 2019.

Background

Love-Teeth Dental Practice Ltd is in Prestwich, Manchester and provides private treatment to adults and children.

There is level access for people who use wheelchairs and those with pushchairs. A parking space for blue badge holders is available directly outside the practice, with additional on street parking near the practice.

The dental team includes seven dentists, six dental nurses (one of which assists with practice management and two of which are trainees), a dental hygienist, two dental hygiene therapists, two receptionists and a treatment co-ordinator. The practice has three treatment rooms.

The practice is owned by a company and as a condition of registration must have a person registered with the Care Quality Commission as the registered manager. Registered managers have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run. The registered manager at Love-Teeth Dental Practice Ltd is the principal dentist.

During the review we communicated with the practice manager and looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday 8.30am to 5.30pm

Tuesday 9am to 7pm

Wednesday 8.30am to 5.30pm

Thursday 8.30am to 5.30 pm

Friday 7.30am to 2pm

Sunday 10am to 1pm

Our key findings were:

- The provider had implemented systems to help them identify and manage risk to patients and staff in relation to sharps, immunity and fire safety.
- The servicing of X-ray equipment was up to date and local rules for its use reviewed.

Summary of findings

- Staff were carrying out validation of decontamination equipment in line with national infection prevention and control guidance.
- Systems to ensure staff were up to date with continuing professional development were introduced.
- Incident reporting and investigation systems were established.

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 our previous inspection on 5 November 2019 we judged the provider was not providing well led care and was not complying with the relevant regulations. We told the provider to take action as described in our requirement notice. At the review on 30 November 2020 we found the practice had made the following improvements to comply with the regulation:

- The practice had implemented systems to obtain evidence that all staff were consistently up to date with their training and their continuing professional development.
- The provider had obtained a testing kit to enable staff to validate decontamination equipment in line with the Health Technical Memorandum 01-05: Decontamination in primary care dental practices, (HTM 01-05), published by the Department of Health and Social Care. Evidence of its use was sent.
- The fire detection and emergency lighting systems were inspected and serviced on 30 January 2020 and evidence of the updated fire risk assessment, a contract for ongoing servicing and weekly testing by staff was sent to us. We saw evidence that a further inspection of the fire safety systems was booked on 16 December 2020, this visit will also include the completion of a practice zone and evacuation plan and any further remedial works deemed necessary.
- The OPG (Orthopantomogram) equipment was serviced on 27 November 2019. An OPG is a rotational panoramic dental radiograph that allows the clinician to view the upper and lower jaws and teeth and gives a 2-dimensional representation of these. The handheld X-ray machine was serviced on 4 February 2020. Local rules were updated and dosimetry was being carried out for staff in line with recommendations in the service report. Dosimetry is the measurement, calculation and assessment of the ionizing radiation dose absorbed by the human body.
- The sharps risk assessment was reviewed to ensure the risk from all sharp items was assessed and minimised.
- The provider carried out risk assessments on two clinical members of staff who could not provide evidence of immunity to vaccine preventable diseases. These staff members were assessed and received further vaccinations as appropriate from their occupational health provider.
- Incident investigation systems were now clearly established. An accident and incident book for reporting and a significant occurrences protocol were put in place.
- A system was implemented to receive and respond to patient safety alerts, recalls and rapid response reports issued by the Medicines and Healthcare products Regulatory Agency, the Central Alerting System and other relevant bodies, such as Public Health England.
- A process was implemented to ensure agency staff received an induction to ensure that they were familiar with the practice's procedures.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation when we carried out this review on 30 November 2020.