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Mouthmatters

Inspection report

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Date of inspection visit: 20 July 2021
Date of publication: 18/08/2021

Overall summary

We undertook a follow up desk-based review of Mouthmatters on 20 July 2021. This 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 who had remote access to a specialist dental adviser.

We undertook a comprehensive inspection of Mouthmatters on 21 February 2020 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 safe or well led care and was in breach of regulations 17, 18 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 Mouthmatters on our website www.cqc.org.uk.

As part of this review we asked:

- Is it safe?
- Is it well-led?

When one or more of the five questions are not met we require the service to make improvements. We then inspect or review again after a reasonable interval, focusing on the areas where improvement was required. The provider sent evidence to us of the improvements made in July 2020. The review of the information and evidence submitted was delayed due to CQC processes during COVID-19.

Our findings were:

Are services safe?

We found this practice was providing safe care in accordance with the relevant regulations.

Summary of findings

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 21 February 2020.

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 breaches we found at our inspection on 21 February 2020.

Background

Mouthmatters is near the centre of Chester. The practice provides private dental care for adults and children. Visiting dentists provide advanced gum disease and root canal treatments, and dental implants at the practice.

The provider has a portable ramp available to facilitate access to the practice for people who use wheelchairs and for people with pushchairs.

Car parking is available near the practice.

The dental team includes two dentists, two dental hygienists and a dental nurse. The dental team is supported by a practice manager. The practice has three treatment rooms.

The practice is owned by an individual who is the principal dentist there. They have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

During the review 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:

Monday to Friday 8.30am to 5.00pm

Our key findings were:

- Checks were introduced to ensure appropriate medicines and life-saving equipment were available.
- The practice implemented systems to obtain evidence of up to date training for all staff and maintain oversight of this.
- Recruitment processes were improved. A checklist was used to ensure essential checks were carried out for new staff members.
- There were processes for staff to report significant events and incidents.
- Systems to audit infection prevention and control and radiographic quality were in place.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

| | |
|-------------------------------|--------------------|
| Are services safe? | No action ✓ |
| Are services well-led? | No action ✓ |

Are services safe?

Our findings

We found that this practice was providing safe care and was complying with the relevant regulations.

At our previous inspection on 21 February 2020 we judged the practice was not providing safe care and was not complying with the relevant regulations. We told the provider to take action as described in our warning notice. At the review on 20 July 2021 we found the practice had made the following improvements to comply with the regulations:

- A system had been introduced to carry out and document weekly checks of the medical emergency equipment.
- Sepsis awareness training was undertaken by the principal dentist and discussed with staff to ensure their understanding. Sepsis prompts were provided for staff to refer to when triaging patients to manage those who present with dental infection and where necessary refer patients for specialist care.
- Staff received training in safeguarding, infection prevention and control, fire safety awareness and life support. We saw evidence the practice had booked annual refresher training for the team in life support, fire safety and equality and diversity.
- Infection prevention and control audits were completed twice a year. The latest audit showed the practice was meeting the required standards.
- The practice ensured that clinical staff completed continuing professional development in respect of dental radiography.
- A new significant event and incident reporting process has been implemented and all staff signed to confirm understanding of this. There had been no safety incidents since its introduction.

These improvements showed the provider had taken action to comply with the regulations when we carried out our review on 20 July 2021.

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 21 February 2020 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 warning notice. At the review on 20 July 2021 we found the practice had made the following improvements to comply with the regulations:

- The provider had implemented systems to obtain evidence of up to date training as per General Dental Council professional standards. The provider supported and encouraged staff to complete continuing professional development by booking team training and webinars.
- A system was introduced to carry out appraisals for staff. We saw an example of this and the training logs maintained to review individual training needs.
- The provider had quality assurance processes to encourage learning and continuous improvement. These included audits of radiographs and infection prevention and control. A dental clinical governance compliance package was in use to help them to meet the required standards.
- Systems were introduced to enable staff to ensure appropriate medical emergency equipment was in place, and to report any incidents.
- Recruitment processes had been reviewed. The practice ensured essential checks were carried out and a role specific induction was in place for new staff members.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulations when we carried out our review on 20 July 2021.