

## Witard Dental Health Centre

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## Inspection report

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### Overall summary

We undertook a follow up inspection of Witard Dental Ltd on 27 June 2023. 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 31 January 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 Witard Dental 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 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 breach we found at our previous inspection. In general improvements were noted in staff recruitment, health and safety management, medical emergency equipment and staff support.

There were areas where the provider could make improvements. They should

- Take action to ensure that clinicians prescribe antibiotic medication according to nationally recommended guidelines.

# Summary of findings

## Background

Witard Dental Practice is in Norwich and provides both NHS and private dental care and treatment for adults and children. The premises are accessible via a portable ramp for wheelchair users and car parking spaces are available in a public car park right outside the premises. The dental team includes 2 part-time dentists, a practice manager and 3 dental nurses. There are 2 treatment rooms.

During the inspection we spoke with the practice manager. One of the provider's area managers, and a compliance manager were also present. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open on Mondays to Thursday from 9am to 5pm, and Fridays from 9am to 4pm.

# 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:

- A new ultrasonic bath had been purchased to replace the previous one that had not been maintained and tested adequately.
- Staff were recording weekly tests of the autoclave to ensure it was working effectively.
- Infection prevention and control audits were being undertaken every six months. We viewed the most recent audit, dated 4 May 2023, and noted its recommendations had been implemented.
- A new legionella risk assessment had been completed and all staff had undertaken legionella management training.
- We viewed paperwork in relation to the most recently recruited member of staff and noted all appropriate pre-employment checks had been undertaken to ensure their suitability for the role. Disclosure and barring service checks had been completed for all other staff since our previous inspection.
- Portable appliance testing had been undertaken on 20 February 2023, and a gas safety check had been completed 7 March 2023.
- A radiation protection advisor had visited on 9 February 2023 to check the practice's radiography processes and procedures.
- Recommendations for staff to undertake moving and handling training and for six-monthly visual inspections of electrical equipment identified in the practice's risk assessment had been implemented.
- All clinicians now used safety needles to help prevent sharps' injuries.
- Emergency medical equipment was now located in the same place, making it easily accessible to staff. A new mercury spillage kit had been purchased.
- Anti-microbial audits were now being undertaken. However, we noted that clinicians were not prescribing amoxicillin according to nationally recommended guidelines and the audit had failed to identify this.
- Although still struggling to recruit dentists, a new dental nurse had just been employed to help ease pressure on current staffing levels.
- A system had been implemented to monitor patient referrals and ensure their timely management.
- A portable induction loop had been purchased to assist patients who wore hearing aids.
- Information informing patients of how they could raise concerns was displayed in the waiting area.
- Staff appraisals had been undertaken, evidence of which we viewed.
- Staff meeting minutes were more detailed and now listed who had attended.

Overall, we found the practice had implemented effective measures to address the issues we had identified during our previous inspection. The practice manager reported she now received much better support from the provider and had implemented a number of audit tools and systems to ensure compliance with the regulations.

These improvements now need to be embedded and sustained in the long run