

Arggen 1 Limited

Dentcare1 Boston

Inspection report

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Overall summary

We undertook an unannounced focused inspection of Dentcare 1 Boston on 4 May 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 practice was now meeting legal requirements.

The inspection was led by a CQC inspector who was supported by a specialist dental adviser.

We had previously undertaken a focused follow up inspection of Dentcare 1 Boston on 9 December 2021 and 16 November 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 safe or well-led care and was in breach of Regulations 12 and 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 Dentcare 1 Boston dental practice on our website www.cqc.org.uk.

As part of this inspection 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 and send us an action plan. We then inspect again after a reasonable interval, focusing on the areas where improvement was required.

Our findings were:

Are services safe?

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

The provider had made improvements in relation to the regulatory breach we found at our inspection on 16 November 2022.

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 16 November 2022.

Background

Dentcare 1 Boston is in the Lincolnshire market town of Boston and provides private dental care and treatment for adults and children.

There is level access to the rear of the practice for people who use wheelchairs and those with pushchairs. Car parking spaces, including dedicated parking for people with disabilities, are available near the practice.

The dental team includes 2 dentists, 2 dental nurses and the provider who is the practice manager. The practice has 2 treatment rooms. At the time of our inspection only 1 treatment room was in use.

The practice is owned by a company and as a condition of registration must have a person registered with the CQC 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 Dentcare 1 Boston is the practice manager.

During the inspection we spoke with 1 dentist, the provider who is the practice manager and 2 dental nurses. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open: Monday, Tuesday, Thursday and Friday from 9am to 5pm.

Our key findings were:

The provider had taken action to address some of the risk identified. Specifically;

- Records to demonstrate that the equipment used by staff for cleaning and sterilising instruments was validated, maintained and used in line with the manufacturers' guidance, were now available.
- Evidence to confirm staff involved patients, the public, staff and external partners to support the service were now in place.
- Governance procedures, including regular visits and oversight checks by the provider were now in place.

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

- Take action to implement any recommendations in the practice's Legionella risk assessment, taking into account the guidelines issued by the Department of Health in the Health Technical Memorandum 01-05: Decontamination in primary care dental practices, and having regard to The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance.' In particular, ensure that action is taken when water temperatures are outside the recommended parameters.

Summary of findings

- Improve the practice's infection control procedures and protocols taking into account the guidelines issued by the Department of Health in the Health Technical Memorandum 01-05: Decontamination in primary care dental practices, and having regard to The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance'. In particular ensure staff carrying out decontamination of instruments have the skills and knowledge to do so effectively. Ensure that logs of changes of brushes and gloves are kept.

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 16 November 2022, 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 inspection on 4 May 2023, we found the practice had made the following improvements to comply with the regulations:

- Records to demonstrate that the equipment used by staff for cleaning and sterilising instruments was validated, maintained and used in line with the manufacturers' guidance, were now available.
- The provider carried out a monthly review of instruments and discarded those that were no longer fit for purpose.
- Recruitment processes and pre employment checks now met current guidance.
- Procedures to reduce the possibility of Legionella or other bacteria developing in water systems had improved. We noted that monthly checks of hot and cold water temperatures were now completed accurately. We identified scope for improvement in how issues identified for action were addressed but received assurances these would be implemented.

These improvements show the practice had taken sufficient action to comply with regulations, when we inspected on 4 May 2023.

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 16 November 2022, we judged the practice 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 inspection on 4 May 2023, we found the practice had made the following improvements to comply with the regulations:

- Leadership and oversight visits were now carried out regularly and proved effective in identifying and addressing concerns.
- Systems and processes were more established with staff.
- A timetable for completing required audits was in place and information had been gathered to complete these.

These improvements show the practice had taken sufficient action to comply with regulations when we inspected on 4 May 2022.