

Dr Aoife Boland

The Wimbledon Dentist

Inspection report

130-132 Merton Road
London
SW19 1EJ
Tel: 02085440112
www.thewimbledondentist.co.uk

Date of inspection visit: 18 May 2023
Date of publication: 06/06/2023

Overall summary

We undertook a follow up focused inspection of The Wimbledon Dentist on 18 May 2023. This inspection was carried out to review 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 had remote access to a specialist dental advisor.

We had previously undertaken a comprehensive inspection of The Wimbledon Dentist on 21 March 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 The Wimbledon Dentist dental practice on our website 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 area where improvement was required.

As part of this inspection, we asked:

- Is it well-led?

Our findings were:

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 18 May 2023.

Summary of findings

Background

The Wimbledon Dentist is in Wimbledon in the London borough of Merton and provides private dental care and treatment for adults and children.

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

The dental team includes the principal dentist, 3 associate dentists, 4 dental nurses, 1 dental hygienist, 1 dental therapist, 1 trainee dental nurse, 1 practice manager and 3 receptionists. The practice has 3 treatment rooms.

During the inspection we spoke with the principal dentist and the practice manager. We looked at practice policies, procedures, and other records to assess how the service is managed.

The practice is open:

8.30am to 5.30pm Monday, Tuesday, and Friday

8.30am to 8pm Wednesday and Thursday

8.30am to 5pm Saturday

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 the inspection on 18 May 2023, we found the practice had made the following improvements to comply with the regulation:

- A legionella risk assessment had been carried out by an external company on 23 March 2023. The risk assessment had identified some minor actions which the practice was working towards completing. The practice had begun monitoring water temperatures in line with the risk assessment.
- A fire risk assessment had been carried out on 27 March 2023. Minor actions were noted which the practice had actioned. Procedures were in place for on-site fire safety checks. This included staff completing fire safety training and regular visual checks to equipment. There were no fire obstructions on the day of our visits.
- An electrical installation certificate report (EICR) had been completed by an external company on 27 March 2023. The report was satisfactory with no issues identified.
- The provider had implemented a new system for monitoring the premises and equipment. . Dates of servicing and reviews were added to a central calendar and prompts were sent to alert the practice manager when checks were due. They told us this helped them to make sure things did not become overdue.
- The practice had reviewed and updated the sharps risk assessment. The risk assessment considered all sharps in the dental practice and was a “live” document that was added to as and when required.
- Improvements has been made to the control of substances hazardous to health (COSHH) risk assessment. Each item was now individually risk assessed and had the corresponding data sheet.

The practice had also made further improvements:

- The practice had implemented a system to ensure patient referrals to other dental or health care professionals were centrally monitored to ensure they were received in a timely manner and not lost.
- The practice had set up systems to ensure audits of infection control were undertaken at regular intervals to improve the quality of the service.
- The practice had taken action to ensure the availability of equipment in the practice to manage medical emergencies. The paediatric defibrillator pads and portable suction was missing at the previous visit. These items were now in the kit. Checks in line with Resuscitation Council UK guidance were being carried out.