

## Mr Myles Hyla Edward Dakin

# Specialist Dental Partners

### **Inspection report**

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### Overall summary

We undertook a follow up focused of Specialist Dental Partners on 30 March 2022. 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 undertook a comprehensive inspection of the practice on 2 November 2021 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 practice on our website www.cqc.org.uk.

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.

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 enough improvements in relation to the regulatory breach we found at our previous inspection.

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

• Implement processes and systems for seeking and learning from patient feedback with a view to monitoring and improving the quality of the service.

# Summary of findings

#### **Background**

Specialist Dental Partners is based on Melbourne Science Park and provides private treatment to about 1700 patients. The dental team includes three dentists, one visiting orthodontist, two dental hygienists, two reception staff and five dental nurses. The practice has three treatment rooms.

The premises are accessible to wheelchair users and there is car parking available directly outside the building.

The practice is open Monday from 9.30am to 5.30pm, on Tuesday, Wednesday and Thursday from 9am to 5.30pm, and on Friday from 9am to 4pm.

During the inspection we spoke with the principal dentist and a nurse. We looked at records about how the service is managed.

# 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 regulation:

- A new dedicated hand wash sink had been installed in the decontamination area so that staff could wash their hands easily before sterilising dirty instruments.
- Regular infection control audits were now undertaken in line with guidance and updated as required.
- Paediatric pads had been purchased for use with the practice's defibrillator, and a system for checking that equipment and medicines were available and within their expiry date had been introduced in line with recommended guidance.
- Loose and uncovered dental materials were covered in treatment room drawers to prevent possible aerosol contamination.
- The ripped dental chair had been fully repaired.
- The external clinical waste bin had been secured to a fixed post to prevent its unauthorised removal.
- Coved flooring for the dental treatment rooms had been ordered and was due to be installed on 8 April 2022.
- A disclosure and barring service check had been obtained for all current staff working at the practice. The practice's recruitment policy had been updated to ensure two references would be obtained before staff commenced employment at the practice.
- A rectangular collimator had been fitted to the X-ray machine to reduce patient exposure.
- A risk assessment had been completed for the use of most sharps used within the practice.
- A formal system of stock control had been introduced so that medicines held at the practice could be accounted for.
- Dental care records we viewed demonstrated that basic periodontal examinations had been recorded for patients, along with their risk of oral cancer and gum disease.
- The principal dentist told us that plans were in place to provide annual performance appraisal for all staff, including the associate dentists.

However, we noted that the practice had still not implemented any formal system to gather effective feedback from patients to help improve the service. Staff told us they relied on on-line reviews. This showed that practice had only received 13 patient reviews in the previous 10 years.

We found the provider had implemented satisfactory measures to address the issues we had identified during our previous inspection. These improvements need to be embedded and sustained in the long run.