

Silver & Charlton Dental Practice

50 John Street

Inspection report

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Date of inspection visit: 1 March 2022
Date of publication: 31/03/2022

Overall summary

We undertook a follow up desk-based of 50 John Street dental practice on 1 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 practice was now meeting legal requirements.

The inspection was led by a CQC inspector who had access to a specialist dental adviser.

We undertook a comprehensive inspection of 50 John Street dental practice on 16 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 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 50 John Street dental 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:

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 16 November 2021.

Summary of findings

Background

The provider has two dental practices and this report is about 50 John Street.

50 John Street dental practice is in Sunderland and provides NHS and private dental care and treatment for adults and children.

The entrance to the practice is stepped, so help is provided for people who may require it, such as those with pushchairs. Car parking spaces are available near the practice.

The dental team includes 12 dentists, 21 dental nurses, two dental hygienists and three dental hygiene therapists. Management and practice support are provided by a practice manager, four receptionists, a practice supervisor, a sterilisation technician and two cleaners. The practice has 13 treatment rooms.

During the inspection we communicated with the practice manager to look at records about how the service is managed.

The practice is open: Monday to Friday 8.45am to 5pm.

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 1 March 2022 we found the practice had made the following improvements to comply with the regulations:

- Improved leadership, governance and management at the practice.
- Improved systems to assess and manage health and safety risks to patients and staff.

Leadership capacity and capability

Leadership and management systems in the practice had improved. The practice manager showed evidence of improvements being made immediately following our visit.

The information and evidence presented during the inspection process was clear and well documented.

Governance and management

Governance processes had improved within the practice, with clear and effective processes for managing risks, issues and performance.

Improvements were found in

- The practice's recruitment protocols, including undertaking criminal record checks and ensuring checks for vaccine preventable diseases.
- Medical emergencies management.
- Disposal of expired medicines and materials.

Management systems were more effective at managing risks to patients and staff:

- The recommendations from the practice's fire risk assessment were actioned.
- Prescriptions were recorded to allow for traceability.
- A Legionella risk assessment was arranged to be completed by an external company.
- Maintenance of pressure vessel equipment was carried out.
- All relevant staff had completed their training in radiation protection.

Continuous improvement and innovation

The practice had systems and processes for learning, continuous improvement and innovation.

The practice had quality assurance processes to encourage learning and continuous improvement. These included audits of dental care records and radiographs. Staff kept records of the results of these audits and the resulting action plans and improvements.

The provider had also made further improvements:

- Improved the practice's processes for the control of substances hazardous to health by completing risk assessments for all hazardous substances.