

The Dental Practice

The Dental Practice - Duffield

Inspection report

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Overall summary

We undertook a follow up focused inspection of The Dental Practice Duffield on 21 March 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 Dental Practice Duffield on 20 September 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 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 Dental Practice - Duffield 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.

Summary of findings

The provider had made improvements in relation to the regulatory breach we found at our inspection on 20 September 2022.

Background

The Dental Practice is in Duffield and provides NHS and private dental care and treatment for adults and children. The NHS contract is for the treatment of children and makes up approximately 10% of the workload.

There is ground floor access within the practice for people who use wheelchairs and those with pushchairs. A removable ramp is available if needed to negotiate the small step at the front door. Car parking spaces, including dedicated parking for disabled people, are available on site at the practice. The practice has made adjustments to support patients with additional needs. These include ground floor treatment rooms, an accessible toilet and a dental chair designed to help patients with restricted mobility to transfer from a wheelchair or walking frame.

The dental team includes 4 dentists, 5 dental nurses, including 2 trainee dental nurses and 2 receptionists. The practice has 2 treatment rooms.

During the inspection we spoke with 2 dentists, 3 dental nurses and 1 receptionist. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday to Friday from 9am 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 21 March 2023, we found the practice had made the following improvements to comply with the regulation:

- The practice had new safeguarding policies, for both children and vulnerable adults. The policies both contained sufficient detail and guidance to provide support for staff. A new safeguarding lead had been appointed and all staff were up to date with safeguarding training to a level appropriate for their role.
- Improvements had been made to the way in which hot and cold-water temperatures were recorded as part of the Legionella management protocols. The records showed that they were within acceptable temperature ranges to reduce the risk. The taps on the upstairs bath were also being monitored weekly to reduce the risk of Legionella developing in the water system. Records showed this had been happening since September 2022 and had started after our last inspection visit.
- The local rules for both X-ray machines had been reviewed and re-written. Rectangular collimation was fitted to both machines and dentists were grading and reporting on the radiographs they took using the new grading system.
- The emergency medicines and equipment were as identified in national guidance. The system for monitoring the contents of the emergency kit had been reviewed and expiry dates were identified and recorded.
- A new consent policy had been produced and this referred to Gillick competencies and the Mental Capacity Act and how these impacted on patients' ability to give valid consent.
- A new duty of candour policy had been produced and was available for all staff.

The practice had also made further improvements:

- Risk assessments for materials which fall under the Control of Substances Hazardous to Health Regulations 2002 had been produced.
- The temperature of the medicine's refrigerator was being monitored and recorded.
- A system for monitoring NHS prescription pads had been introduced. We discussed how this might be further improved with the provider, who told us they would ensure this was actioned.
- Antimicrobial prescribing audits had been introduced in line with guidance provided by the College of General Dentistry.