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Advanced Dental Aesthetics

Inspection report

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Overall summary

We undertook a follow up focused inspection of Advanced Dental Aesthetics on 3 July 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 Advanced Dental Aesthetics on 30 January 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 Advanced Dental Aesthetics 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 31 January 2023.

Summary of findings

Background

Advanced Dental Aesthetics is in Southend on Sea and provides NHS and private dental care and treatment for adults and children.

There is step free 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 5 dentists, 6 dental nurses and 2 dental hygienists. The clinical team are supported by a practice manager and a receptionist. The practice has 3 treatment rooms.

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

The practice is open between:

9am and 5pm Mondays to Thursdays

9am and 4pm on Fridays

9am and 2pm on Saturdays

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 3 July 2023 we found the practice had made the following improvements to comply with the regulation:

- There were arrangements to manage the risk of Legionella growth in the water systems by way of effectively monitoring and acting on risk assessments, and ensuring staff were aware of and followed procedures. Staff monitored hot and cold water temperatures and flushed infrequently used outlets as part of the practice Legionella management systems.
- There were arrangements to manage risk of fire by ensuring risk assessments were acted on. Fire safety checks were completed to ensure that fire safety equipment was in good working order.
- There were systems to monitor the procedures for dealing with medical emergencies by ensuring medicines were available in accordance with relevant guidelines and stored in line with the manufacturer's instructions. Emergency medicines and equipment were available and there were systems to check these.
- There were arrangements to safely manage the use of dental materials by way of ensuring systems for identifying, disposing and replenishing of out-of-date stock and ensuring important information was maintained such as batch numbers and expiry dates if materials were decanted from the manufacturer's packaging.
- There were systems for reporting, investigating and learning from incidents as part of monitoring and improving quality and safety. Information and learning was shared with the staff team.
- There were systems for patient safety alerts, recalls and rapid response reports issued by the Medicines and Healthcare products Regulatory Agency, the Central Alerting System and other relevant bodies, such as Public Health England. Safety information was received, reviewed and shared with relevant members of the practice team.
- There were arrangements to consider and adapt the service to meet the needs of patients with access requirements in line with a disability access audit.
- Audits of dental radiographs were complete with an analysis and an action plan as part of a system for monitoring and improving the quality of dental radiography in accordance with current guidance.
- There were systems for monitoring staff training to ensure staff undertook periodic updates. Training records were available to demonstrate that staff undertook training updates in basic life support, infection prevention and control, dental radiography and safeguarding vulnerable adults and children.

The practice had also made further improvements:

- There were systems to monitor the quality of scan images taking into account HPA-CRCE-010 Guidance on the Safe Use of Dental Cone Beam (Computed Tomography).
- Audits for prescribing of antibiotic medicines were carried out taking into account the guidance provided by the College of General Dentistry. The results of these audits were reviewed to implement improvements where indicated.
- There were systems 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.