

272 Dental Care

Dental Surgery

Inspection Report

272 St Helens Road
Bolton
Lancashire
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Website: none

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Overall summary

We undertook a follow up desk-based review of The Dental Surgery on 8 September 2020. This review was carried out to assess 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 review was led by a CQC inspector.

We undertook a comprehensive inspection of The Dental Surgery on 8 January 2020 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 Regulations 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 The Dental Surgery on our website www.cqc.org.uk.

As part of this review we asked:

- Is it well-led?

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 or review again after a reasonable interval, focusing on the areas where improvement was required.

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 8 January 2020.

Background

The Dental Surgery is in Bolton and provides NHS and private dental care and treatment for adults and children. It is known locally as 272 Dental Care.

There is level access to the practice for people who use wheelchairs and those with pushchairs. On street parking is available near the practice.

The dental team includes five dentists, five dental nurses (one of which manages the practice), a dental hygiene therapist and a receptionist. The practice has three treatment rooms.

The practice is owned by a partnership and as a condition of registration must have a person registered with the CQC as the registered manager. Registered managers have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the practice is run. The registered managers at The Dental Surgery are two of the partners.

During this review we spoke with the practice manager and looked at practice policies and procedures and other records about how the service is managed.

Summary of findings

The practice is open:

Monday to Wednesday 9am to 1pm and 2pm to 5:30pm

Thursday 9am to 1pm and 2pm to 7pm

Friday 9am to 1pm and 2pm to 4pm

Our key findings were:

- The provider had implemented systems to help them identify and manage risk to patients and staff.
- The provider had staff recruitment procedures which reflected current legislation. Processes to obtain evidence of professional registration, indemnity and training were now in place.
- Radiography equipment was serviced and validated for use. Recommendations in two service reports were acted on.
- Systems to document and investigate incidents were reviewed and discussed with staff to ensure their understanding.
- Audits of radiography and infection prevention and control had been carried out, these included documented learning points.
- The provider had implemented protocols to ensure compliance with the Accessible Information Standard.

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 our previous inspection on 8 January 2020 we judged the provider was not providing well led care and was not complying with the relevant regulations. We told the provider to take action as described in our requirement notice. At the desk-based review on 8 September 2020 we found the practice had made the following improvements to comply with the Regulations:

The processes for managing risks, issues and performance were reviewed and discussed with staff.

- The provider took action to ensure the effectiveness of vaccinations for blood-borne viruses was checked for all clinical staff.
- The sharps risk assessment was reviewed to include the risk from all sharp devices. Additional measures were introduced to enable staff to dismantle dental matrices safely and staff received training in the correct use of a safer needle systems.
- The provider took action to carry out three-yearly routine examinations on radiography equipment. Two of the servicing reports included recommendations to consult their Radiation Protection Adviser (RPA). We saw evidence that the provider consulted their RPA, carried out a radiography risk assessment and provided clear instructions to operators in the local rules.

- The process to document and investigate significant events, incidents and sharps injuries was reviewed and discussed with staff to ensure their understanding.
- A system was introduced to ensure clinical staff maintained their professional registration with the General Dental Council and to obtain evidence of up to date professional indemnity for all staff.
- Action was taken to ensure the provider had oversight that all staff were up to date with their training and their continuing professional development.

The practice had also made further improvements:

- The provider had implemented protocols to ensure compliance with the Accessible Information Standard. This ensured that patients and their carers obtained information in a way that they could understand and receive communication support as necessary.
- Audits of radiography and infection prevention and control had been carried out, these included documented learning points.
- The provider sought further advice in relation to legionella control measures, water temperature control and periodic draining of the water calorifier tank to ensure water was at the correct temperature.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the Regulations when we carried out the desk-based review on 8 September 2020.