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Dental

Triangle Dental

Inspection report

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Overall summary

We undertook a follow up focused inspection of Triangle Dental on 10 April 2024.

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 carried out by a CQC inspector who was supported remotely by a specialist dental advisor.

We had previously undertaken a comprehensive inspection of Triangle Dental on 9 January 2024 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 Triangle Dental 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:

Summary of findings

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 9 January 2024.

Background

Triangle Dental in Reading, Berkshire 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 practice has made reasonable adjustments to support patients with access requirements.

The dental team includes 9 dentists, 7 qualified dental nurses, 3 trainee dental nurses, 2 dental hygienists, 2 practice managers and 7 receptionists.

The practice has 5 treatment rooms.

During the inspection we spoke with 2 dentists and the practice manager.

We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open:

- 8am to 8pm Monday to Thursday
- 8am to 7pm Friday
- 8am to 1pm Saturday

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 safe care and was complying with the relevant regulations.

At the inspection on 10 April 2024, we found the practice had made the following improvements to comply with the regulations:

Infection Control

- Local anaesthetic cartridges were stored appropriately in treatment room 2.
- Burs, a type of cutter used in a dentist's handpiece, were stored appropriately in every treatment room.
- Cotton wool rolls were stored appropriately in every treatment room.
- Evidence to confirm that dental unit water lines were flushed between patients was available.
- Instruments were cleaned using manual cleaning techniques. Ratios of cleaning solution to water followed the instructions on the cleaning solution.
- A recent infection prevention and control audit reflected current practice.
- Autoclave validation checks were carried out appropriately when the vacuum autoclaves were used as non-vacuum autoclaves.

Environmental Cleaning

- Colour coded cleaning equipment was stored appropriately.
- The environmental cleaning policy reflected current practice.
- Evidence of oversight of cleaning standard checks was available.
- Soft furnishings on seating was present in clinical areas. A cleaning protocol for these was available.

Fire safety

- Annual servicing of the fire extinguishers was carried out appropriately.
- A fire alarm testing checklist was completed appropriately.
- An emergency lighting testing checklist was available.
- Emergency lights took the form of battery-operated, plug-in torches. We noted that automatic emergency lighting was due to be installed in the coming weeks.
- A fire risk assessment was carried out by someone who could demonstrate fire safety management competence.
- The most recent annual fire drill included all staff.
- Waste bins at the rear of the property were secured to prevent the risk of unauthorised interference and potential arson.
- Battery operated smoke detectors had been replaced with a fully automatic fire alarm system.

Medical Emergencies

- Emergency medicines were checked weekly in line with Resuscitation Council UK guidelines.
- Medical emergency equipment was checked weekly in line with Resuscitation Council UK guidelines.
- Oropharyngeal airways (sizes 0, 1, 2, 3, 4) were available within their use by date.
- The adult self-inflating bag with reservoir and clear facemask was available and within its 'use by' date.
- The child self-inflating bag with reservoir and clear facemask was available and within its 'use by' date.
- Child sized defibrillator pads were available and within the 'use by' date.
- The mercury spillage kit was available and within its 'use by' date..

Risks to staff and patients

Are services well-led?

- Window blind adjustment looped cords were tethered to window frames to reduce the risk of choking to young children in the waiting area.

Implants

- Single-use implant placing components were disposed of appropriately when used.

Lone working

- A lone worker risk assessment was available for the hygienist.
- A lone worker risk assessment was available for the cleaner working out of hours.
- A lone worker risk assessment was available for the dentist working out of hours.

Safe and appropriate use of medicines

- Dispensed medicines were stock controlled and stored effectively.
- Prescriptions were stock controlled and stored effectively.

General Data Protection Regulations

- The practice had a General Data Protection Regulation (GDPR) compliant accident record book.

Recruitment

- The practice had a recruitment policy and procedure to help them employ suitable staff, including for agency or locum staff. These reflected the relevant legislation.

Staffing

- Staff had the skills, knowledge and experience to carry out their roles.

The practice also made further improvements:

- A system was in place to ensure private patient referrals to other dental or health care professionals were centrally monitored to ensure they were received in a timely manner and not lost.
- Clinicians took into account the guidance provided by the National Institute for Clinical Excellence (NICE) when dispensing antibiotic medicines.