

Arggen 1 Limited

# Dentcare1 Lincoln

## Inspection report

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### Overall summary

We undertook a follow up focused inspection of Dentcare 1 Lincoln on 28 September 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 was supported by a specialist dental adviser.

We undertook a comprehensive inspection of Dentcare 1 Lincoln on 10 February 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 safe or well-led care and was in breach of regulations 12 and 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 Dentcare 1 Lincoln dental practice on our website [www.cqc.org.uk](http://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 safe?
- Is it well-led?

### Our findings were:

#### Are services safe?

We found this practice was providing safe care in accordance with the relevant regulations.

# Summary of findings

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 10 February 2022.

## **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/es we found at our inspection on 10 February 2022.

## **Background**

The provider has 3 practices and this report is about Dentcare 1 Lincoln.

Dentcare 1 Lincoln is in Lincoln and provides private dental care and treatment for adults and children.

There is level access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces, including dedicated parking for people with disabilities, are available near the practice. The practice has made some reasonable adjustments to support patients with additional needs.

The dental team includes 2 dentists and 3 dental nurses, who also carry out reception duties, 1 of whom is the also the practice manager. The practice has 3 treatment rooms.

During the inspection we spoke with 2 dental nurses, including the practice manager and the provider. 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 safe?**

**No action**



**Are services well-led?**

**No action**



# Are services safe?

## Our findings

We found that this practice was providing safe care and was complying with the relevant regulations.

At the inspection on 28 September 2022 we found the practice had made the following improvements to comply with the regulations:

- The practice had infection control procedures which reflected published guidance. Decontamination processes were carried out in accordance with The Health Technical Memorandum 01-05: Decontamination in primary care dental practices (HTM 01-05) guidance.
- The practice had procedures to reduce the risk of Legionella or other bacteria developing in water systems, in line with a risk assessment. Action was taken to address issues identified as requiring action in the practice legionella risk assessment.
- We saw the practice was visibly clean and there was an effective cleaning schedule to ensure the practice was kept clean.
- The practice had a recruitment policy and procedure to help them employ suitable staff and had checks in place for agency and locum staff. These reflected the relevant legislation. Staff records we reviewed showed that all required pre-employment checks were completed for new starters.
- The practice ensured equipment was safe to use and maintained and serviced according to manufacturers' instructions. The practice ensured the facilities were maintained in accordance with regulations.
- The practice had arrangements to ensure the safety of the X-ray equipment and we saw the required radiation protection information was available.
- The practice had implemented systems to assess, monitor and manage risks to patient and staff safety. This included sharps safety, sepsis awareness and lone working. Fire detection systems were installed, and regular monitoring established.
- Emergency equipment and medicines were available and checked in accordance with national guidance.
- The practice had risk assessments to minimise the risk that could be caused from substances that are hazardous to health.
- The practice had systems for appropriate and safe handling of medicines. Antimicrobial prescribing audits were carried out. We found that prescription pads were stored safely, and their use monitored effectively.

# 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 28 September 2022 we found the practice had made the following improvements to comply with the regulations:

- The practice and provider demonstrated a transparent and open culture in relation to people's safety.
- There was established leadership and emphasis on continually striving to improve. The provider had a regular schedule of visits to the service to provide support and oversight.
- Systems and processes were embedded, and staff worked together in such a way that the inspection did not highlight any issues or omissions.
- The information and evidence presented during the inspection process was clear and well documented.
- The practice could show how they ensured high-quality sustainable services and demonstrated improvements over time.
- Staff stated they felt respected, supported and valued. They were proud to work in the practice.
- The practice had arrangements to ensure staff training was up-to-date and reviewed at the required intervals.
- Staff had clear responsibilities roles and systems of accountability to support good governance and management.
- The practice had a system of clinical governance in place which included policies, protocols and procedures that were accessible to all members of staff and were reviewed on a regular basis.
- We saw there were clear and effective processes for managing risks, issues and performance.
- Staff acted on appropriate and accurate information.
- The practice had information governance arrangements and staff were aware of the importance of these in protecting patients' personal information.
- The practice had quality assurance processes to encourage learning and continuous improvement. These included audits of dental care records, disability access, radiographs and infection prevention and control. Staff kept records of the results of these audits and the resulting action plans and improvements.