

Mrs Neggin Heidari-Robinson

Pipers Dental Practice

Inspection report

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Overall summary

We undertook a follow up desk-based inspection of Pipers Dental Practice on 06 May 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 had access to a specialist dental adviser.

We undertook a comprehensive inspection of Pipers Dental Practice on 09 December 2021 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 Pipers Dental Practice dental practice on our website 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 (requirement notice only). 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 09 December 2021.

Summary of findings

Background

Pipers Dental Practice is in Oxted and provides NHS and private dental care and treatment for adults and children.

The practice is accessed via an internal staircase. Car parking spaces, including dedicated parking for people with disabilities, are available near the practice.

The dental team includes four dentists, one dental nurse and two receptionists. The practice has two treatment rooms, one of which is not currently used.

During the inspection we spoke with two dentists, one dental nurse and one receptionist. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

- Monday to Friday 8.30am to 5.30pm
- Saturday 8.30am to 12.30pm

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 06 May 2022 we found the practice had made the following improvements to comply with the regulation:

- The practice had a fixed wire safety electrical report carried out. We saw records to demonstrate that some electrical installation works were required and scheduled.
- We received evidence that a fire safety risk assessment had been carried out by a competent person and required works were scheduled.
- We received evidence that a sharps risk assessment had been completed which detailed all sharps used in the practice.
- Logs of medical emergency equipment and drugs had been updated to ensure that record keeping was improved and actions are taken if necessary.
- All medical emergency equipment as recommended by national guidance was available; including paediatric face masks and defibrillator pads.
- The practice had all necessary medical emergency drugs which were in date and logged accordingly.
- The practice ensured that all dispensed medicines were labelled with the practice address and staff followed national guidelines with regards to the duration of prescribed antibiotics.
- The practice had implemented a log of all materials which were checked to enhance stock control.
- Local anaesthetics were now kept in their blister packs.
- The practice had not employed any staff since the previous inspection, but a documented induction plan was in place and all locum nursing staff completed a daily induction sheet.
- A disability access audit had been completed and a plan was in place to review this on an annual basis.

The provider had also made further improvements:

- The practice had completed an audit of the prescribing of antibiotic medicines taking into account guidance provided by the College of General Dentistry and had plans to do this annually.
- Since the inspection on 09 December 2021, all staff had been briefed regarding patient care records in order to ensure that staff were working in line with national guidance. The principal dentist was also carrying out monthly checks of records and a new audit had been implemented to ensure all necessary information was recorded and acted on where necessary.

Improvements had been made to the risk assessments and information available to staff in relation to the Control of Substances Hazardous to Health Regulations 2002 to ensure this was readily available.