

Dr Kenneth John Moylan

Wollaston Dental

Inspection report

27 High Street Wollaston Stourbridge DY8 4NJ Tel: 01384390797

Date of inspection visit: 13 March 2023 Date of publication: 23/03/2023

Overall summary

We undertook a follow up focused inspection of Wollaston Dental on 13 March 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 was supported by a specialist dental advisor.

We had previously undertaken a comprehensive inspection of Wollaston Dental on 25 May 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 ,effective 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. We then undertook a focused follow up inspection on 25 July 2022. We found that although improvements had been made towards providing safe, effective and well-led care, the practice were not fully compliant with the relevant regulations.

You can read our report of that inspection by selecting the 'all reports' link for Wollaston Dental practice on our website www.cqc.org.uk.

As part of this inspection we asked:

- Is it safe?
- Is it effective?
- 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

Are services effective?

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

Are services well-led?

We found this practice was providing well-led care in accordance with the relevant regulations.

Background

Wollaston Dental is in Stourbridge 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 disabled people, are available near the practice. The practice has made reasonable adjustments to support patients with specific needs.

The dental team includes 1 dentist,1 trainee dental nurse, 1 receptionist, and 1 acting manager who is also a dental nurse. The practice has 1 treatment room.

During the inspection we spoke with 1 dentist, the acting manager and the receptionist. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open:

Monday to Friday from 9am to 3pm

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 effective?	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.

- Staff now completed cleaning schedules to demonstrate all cleaning tasks were completed.
- At our inspection on 25 July 2022 we found significant shortfalls in appropriately assessing and mitigating the risks relating to providing conscious sedation. At our inspection on 13 March 2023 the provider informed us that they no longer offered treatments under conscious sedation. They advised that they would update their statement of purpose and notify CQC should they seek to provide conscious sedation in the future prior to doing so.

Are services effective?

(for example, treatment is effective)

Our findings

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

- Dental care records were complete, legible, kept securely and complied with General Data Protection Regulation requirements.
- Systems were now in place to obtain patients' consent to care and treatment in line with legislation and guidance.

Are services well-led?

Our findings

We found that this practice was providing well-led care and was complying with the relevant regulations.

- The provider a transparent and open culture in relation to people's safety. They had now addressed all of the breaches and risks we identified on our inspection on 24 May 2022.
- The provider now completed appraisals with staff in line with their policy.
- The practice had systems in place to ensure high-quality sustainable services and to demonstrate improvements over
- The practice now had arrangements to ensure staff training was up-to-date and reviewed at the required intervals. The provider had an oversight of all staff training.
- Staff now had clear responsibilities roles and systems of accountability to support good governance and management.
- The practice had implemented a system of clinical governance which included policies, protocols and procedures that were accessible to all members of staff and were reviewed on a regular basis.
- We saw the provider now had clear and effective processes for managing risks, issues and performance.
- The practice had systems and processes for learning, quality assurance, continuous improvement and innovation. These included audits of patient care records, disability access, radiographs, antimicrobial prescribing, and infection prevention and control. Staff kept records of the results of these audits and the resulting action plans and improvements.