

Wickham Dental Ltd

Wickham Dental Practice

Inspection report

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Overall summary

We undertook a follow up focused inspection of Wickham Dental Practice on 25 January 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 led by a CQC inspector who was remotely supported by a specialist dental advisor.

We had previously undertaken a comprehensive inspection of Wickham Dental Practice on 17 August 2023 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 Wickham Dental Practice on our website www.cqc.org.uk.

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(s) where improvement was required.

As part of this inspection, we asked:

- Is it well-led?

Our findings were:

Are services well-led?

Summary of findings

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 17 August 2023.

Background

Wickham Dental Practice is in Wickham, Hampshire and provides private dental care and treatment for adults and children.

The practice is on the first floor. Patients are advised of this when they contact the practice.

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 2 dentists, 2 dental nurses, 1 student dental nurse, 1 dental hygienist, 1 treatment coordinator, 1 receptionist and the practice manager.

The practice has 3 treatment rooms.

During the inspection we spoke with the principle dentist and practice manager.

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

The practice is open:

- 8.30am – 5.30pm Monday to Thursday
- 8.30am – 5.00pm Friday

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 25 January 2024, we found the practice had made the following improvements to comply with the regulations:

Staff Recruitment

- The practice had a recruitment policy and procedure to help them employ suitable staff. These reflected the relevant legislation.

Sharps

- The dismantling of sharps followed the practice's sharps risk assessment.
- A sharps box in the decontamination room was labelled appropriately.

Audits

- The most recent infection control audit was completed effectively.

Legionella

- Recommendations made in the Legionella risk assessment, carried out in 2019, had been actioned.

Data Protection

- A General Data Protection Regulation (GDPR) applicable accident book was in use.
- Completed accident records were stored securely.

Staffing

- Staff had the skills, knowledge and experience to carry out their roles.
- Clinical staff completed continuing professional development required for their registration with the General

Infection Control

- A treatment room operators chair covering was complete.
- Cleaning equipment was stored appropriately.
- Yellow clinical waste bins at the rear of the practice were tethered to a fixed point to prevent being removed from the building car park.

Fire Safety

- A review of the fire risk assessment had been carried out.
- Actions from the 2019 fire risk assessment had been completed.
- Monthly emergency lighting tests were carried out effectively.
- Annual emergency lighting servicing was carried out.