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# The Cullompton Orthodontic Practice

## Inspection Report

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### Overall summary

We carried out a focused inspection of The Cullompton Orthodontic Practice on 5 June 2018.

The inspection was led by a CQC inspector who was supported by a specialist dental adviser.

We carried out the inspection to follow up concerns we originally identified during a comprehensive inspection at this practice on 17 October 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions.

At a comprehensive inspection we always ask the following five questions to get to the heart of patients' experiences of care and treatment:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

When one or more of the five questions is 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.

At the previous comprehensive inspection we found the registered provider was providing safe, effective, caring and responsive care in accordance with relevant regulations. We judged the practice was not providing well-led care in accordance with Regulation 17 'good governance' 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 Gestridge Dental Practice on our website [www.cqc.org.uk](http://www.cqc.org.uk).

#### **Our findings were:**

##### **Are services well-led?**

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

There was an area where the provider could make improvements. They should:

- Review the practice's audit protocols to ensure infection control audits are undertaken at regular intervals and where applicable learning points are documented and shared with all relevant staff.

# Summary of findings

## The five questions we ask about services and what we found

We asked the following question(s).

### **Are services well-led?**

The provider had made improvements to put right the shortfalls and deal with the regulatory breaches we found at our inspection on 17 October 2017.

Systems had been implemented to ensure the practiced had and followed up to date policies and protocols reflecting current legislation and guidance.

Improvements could be made to ensure infection control audits take place on a regular basis in line with the guidance provided in HTM 01 – 05 Decontamination in Primary Care Dental Practices.

**No action**



# Are services well-led?

## Our findings

At our inspection in October 2017 we judged the provider was not providing well led care and told them to take action as described in our requirement notice. At the inspection on 5 June 2018 we noted the practice had made the following improvements to meet the requirement notice:

- A Legionella risk assessment had been completed and recommendations in the report were being followed.
- A fire risk assessment had been carried out and recommendations for improvement at the practice were in progress.
- Up to date Control of Substances Hazardous to Health risk assessments were now held at the practice rather than off site. This meant staff had access to information.
- The X-ray unit had been assessed for safety.

These improvements showed the provider had taken action to address the shortfalls we found when we inspected in October 2017. The practice was now supported by up to date policies and protocols reflecting current legislation and guidance.

The provider had also implemented the recommendation we made at the previous inspection. For example, with regard to reviewing daily set up infection control protocols in the decontamination room, reviewing policies and staff training with respect of the Mental Capacity Act, Gillick and the Duty of Candour and in completion of audits for radiographs and patient records.

Improvements could be made as at the inspection the provider said that they had not completed an audit for infection control, but this was planned. An advisory notice regarding electrical safety of the X-ray unit had also not been actioned. Following the visit we asked the provider to send us a progress update on sourcing a required part for the X-ray unit, which they did.