

Swanwick Dental Practice Limited

# Swanwick Dental Practice

## Inspection report

44 Derby Road  
Swanwick  
Alfreton  
DE55 1AB  
Tel: 01773603838  
[www.swanwickdental.co.uk](http://www.swanwickdental.co.uk)

Date of inspection visit: 01/02/2022  
Date of publication: 18/02/2022

### Overall summary

We undertook a focused follow up inspection of Swanwick Dental Practice on 1 February 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 carried out by a CQC inspector and a specialist dental advisor.

We undertook a focused inspection of Swanwick Dental Practice on 7 October 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 safe and well led care and was in breach of regulation 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 Swanwick 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. 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 to put right the shortfalls and had responded to the regulatory breach we found at our inspection on 7 October 2021.

Are services well-led?

We found this practice was providing well-led care in accordance with the relevant regulations. The provider had made improvements to put right the shortfalls and had responded to the regulatory breach we found at our inspection on 7 October 2021.

Background

Swanwick Dental Practice is in Alfreton, Derby and provides private dental care for adults and children. There is level access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces are available near the practice.

The dental team includes one dentist and two dental nurses. The practice has two treatment rooms, one is currently out of service.

During the inspection we spoke with the principal dentist and the dental nurses. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday and Thursday 8:30am to 5:30pm

Tuesday 9am to 7pm

Wednesday and Friday 8:30am to 1pm.

Our key findings were:

- Systems were in place to ensure the fire safety of the practice.
- Emergency medical equipment was present as required in guidance.
- Systems to ensure accountability of medicines kept for dispensing were in place.
- Infection prevention and control procedures were completed in line with guidance.
- Medical device and patient safety alerts were received and reviewed for further action.
- Dental treatment was provided in line with current guidelines.
- A fixed wiring electrical survey and report was in place.
- The disposal of gypsum waste was in line with current regulations.
- Systems were in place to ensure staff training requirements were met.
- Safer sharps procedures were risk assessed in line with current regulations.
- Staff had adequate immunity and protection from the Hepatitis B virus.
- The practice had systems to help staff manage risk to patients and staff.
- Systems were in place to report, investigate, record and discuss learning and improvement from significant incidents and events.
- Appropriate Disclosure and Barring Service checks were in place for clinical staff.
- Safeguarding systems were in line with guidance for vulnerable adults and children.

# Summary of findings

- Local rules for using X-ray equipment was in line with current Regulations.
- The practice had effective leadership and a culture of continuous improvement.
- The use of Closed-Circuit Television was in line with Information Commissioner's Office and Data Protection.
- Systems were in place to ensure referrals to external healthcare providers were effectively monitored.

# 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 this practice was providing safe care in accordance with the relevant Regulations.

At the inspection on 1 February 2022 we found the practice had made the following improvements to comply with the regulation:

- Fire safety systems were risk assessed and in-house fire safety checks recorded in line with legal requirements.
- Emergency medical equipment was present as required in guidance.
- Medicines kept for dispensing were monitored or tracked for accountability and audit purposes.
- Infection prevention and control procedures were completed in line with guidance.
- Medical device and patient safety alerts were received and reviewed for further action where relevant.
- The practice had implemented systems to keep dental professionals up to date with current evidence-based practice.
- Systems were in place to ensure the safety of fixed electrical wiring.
- The disposal of gypsum waste was in line with current regulations.

# Are services well-led?

## Our findings

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

At the inspection on 1 February 2022 we found the practice had made the following improvements to comply with the regulation:

- Systems were in place to ensure emergency equipment and medicines were available and checked as per guidance, and that basic life support training requirements were being met.
- The management of fire safety of the practice was effective.
- Safer sharps procedures were risk assessed in line with a practice policy and current regulations.
- Arrangements to ensure staff had adequate protection from the Hepatitis B virus were in place.
- The practice had risk assessments to minimise the risk that could be caused from substances that are hazardous to health.
- Infection prevention and control processes were operating in line with current guidance. primarily Enforcement actions
- The practice had implemented systems for reviewing and investigating when things went wrong. The practice had a system for receiving and acting on safety alerts.
- Systems to ensure the correct level of Disclosure and Barring Service checks for clinical staff were in place.
- The practice had safeguarding processes and staff knew their responsibilities for safeguarding vulnerable adults and children.
- 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 quality assurance processes to encourage learning and continuous improvement.
- The practice had installed closed-circuit television, (CCTV), to improve security for patients and staff. Relevant policies and protocols were in place.
- The practice ensured referrals to external healthcare providers were monitored and recorded so none were missing or lost.