

Dillwyn and Caroline Griffiths Dental Surgery

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Inspection report

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Overall summary

We undertook a focused inspection of Dillwyn and Caroline Griffiths Dental Surgery on 5 September 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 had remote access to a specialist dental advisor.

We had previously undertaken a comprehensive inspection of Dillwyn and Caroline Griffiths Dental Surgery on 7 March 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 Dillwyn and Caroline Griffiths Dental Surgery on our website www.cqc.org.uk.

When 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 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.

Summary of findings

The provider had made improvements in relation to the regulatory breach we found at our inspection on 7 March 2023.

Background

Dillwyn and Caroline Griffiths Dental Surgery is in Radlett, Hertfordshire and provides private dental care and treatment for adults and children.

There is step free access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces are available at the front of the practice. The practice has made reasonable adjustments to support patients with access requirements.

The dental team includes 2 principal dentists, 1 trainee dental nurse and 1 receptionist. The practice has 2 treatment rooms.

During the inspection we spoke with the 2 principal dentists. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open:

Monday from 9am to 5pm

Tuesday from 8am to 12pm

Wednesday from 10.30am to 6pm

Thursday from 10am to 6pm

Friday from 7.30am to 11am.

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 5 September 2023 we found the practice had made the following improvements to comply with the regulations:

- The provider had ensured that all the staff had received appropriate training to undertake their role, for example, in the safeguarding of children and vulnerable adults, basic life support including management of medical emergencies and fire awareness.
- We saw evidence that the provider had undertaken a risk assessment for all hazardous materials used within the practice as per Control of Substances Hazardous to Health Regulations 2002 (COSHH) and that staff had access to the relevant safety data sheets.
- We saw that a risk assessment to identify the risks associated with fire had been undertaken by a competent person on 28 March 2023 and we saw that the recommended actions had been completed. This included replacement of the fire extinguishers and testing the smoke alarms and emergency lighting at appropriate intervals.
- Improvement had been made to the stock control of dental materials to ensure they were in date.
- The provider had registered with the Information Commissioners Office (ICO) for the processing of patient personal data on 10 March 2023.
- The provider had obtained the medicines and equipment to manage a medical emergency so that they were in line with Resuscitation Council UK guidance, for example emergency oxygen, buccal midazolam, appropriately sized needles for the administration of emergency medicines, oropharyngeal airways, oxygen face masks with reservoir and tubing, clear face masks and self-inflating bags with reservoir.
- The fridge temperature where the medicine to manage low blood sugar (Glucagon) was kept was checked daily to ensure the medicine was stored in line with manufacturer's guidance.
- We saw that the practice had replaced the ultrasonic baths and that recommended tests to ensure the appliances were operating effectively were carried out.

The practice had also made further improvements:

- We were provided with evidence that the dentists had completed an audit for prescribing of antibiotic medicines taking into account the guidance provided by the Faculty of General Dental Practice and that audits of infection prevention and control are now undertaken 6 monthly in line with guidance.
- We saw that a risk assessment to identify the risks associated with Legionella and other bacteria developing in the water systems had been undertaken by a competent person in April 2023 and we saw that the recommended actions had been completed. This included regular testing of the water quality and the temperature of the hot and cold water outlets.
- We looked at the records for a newly recruited member of staff and saw evidence that recruitment procedures were in line with legislation.