

Brawdy Dental Centre

Cawdor Barracks, Haverfordwest, Pembrokeshire, SA62 6NN

Defence Medical Services inspection report

This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information given to us by the practice and patient feedback about the service.

Are services safe?	No action required	\checkmark
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Summary

About this inspection

We carried out an announced comprehensive inspection of Brawdy Dental Centre on 6 February 2023. No action was required for the effective, caring, responsive and well-led key questions. Action was required for the safe key question.

A copy of the previous inspection report can be found at: <u>www.cqc.org.uk/dms</u>

This focussed follow-up inspection was undertaken on 16 January 2024.

As a result of this inspection and in accordance with the Care Quality Commission's (CQC) inspection framework, no action was required for the safe key question.

CQC does not have the same statutory powers with regard to improvement action for the Defence Medical Services (DMS) under the Health and Social Care Act 2008, which also means that the DMS is not subject to CQC's enforcement powers. However, as the military healthcare regulator, the Defence Medical Services Regulator (DMSR) has regulatory and enforcement powers over the DMS. DMSR is committed to improving patient and staff safety and will ensure implementation of the observations and recommendations within this report.

This inspection is one of a programme of inspections the CQC will complete at the invitation of the DMSR in its role as the military healthcare regulator for the DMS.

Background to the practice

Co-located with Brawdy Medical Centre, the dental centre is a 1-chair practice providing a routine, preventative and emergency dental service to a patient population of approximately 454 service personnel. Facilities include a laboratory and central sterilisation department.

The practice is open Monday to Wednesday from 07:30 to 12:30 hours and from 13:30 to 17:30 hours. On Thursdays the practice closes at 17:00 hours. Out-of-hours emergency dental care can be accessed via the regional on-call roster or at Dew Street Dental, an NHS practice located in Haverfordwest.

Dentist	Senior Dental Officer
Dental nurses	Two (civilian)
Practice manager	One of the dental nurses currently undertaking the role of practice manager

The staff team

Our Inspection Team

This inspection was undertaken by a CQC inspector.

How we carried out this inspection

Prior to the inspection we considered information about the dental centre provided by the practice. During the inspection we spoke with the Senior Dental Officer and the practice manager/dental nurse. We reviewed policies, standard operating procedures and other records relevant to the recommendations identified at the last inspection. In addition, we checked the building and facilities.

At this inspection we found:

- A joint protocol in relation to vulnerable adults had been developed between the dental and medical centre.
- Systems were in place to support the governance and risk management of the practice, including key documentation from contractors to support governance processes.
- The practice had access to documentation to confirm the water supply was safe for staff, patients and others who used the building.
- The infrastructure had been upgraded to support the provision of safe dental care in line with national best practice guidance. In addition, the upgrade supported the needs of all people who accessed the premises.
- The clinical waste contract had been extended to ensure all waste was collected in a timely way.
- Records had been consolidated so were readily accessible to staff.
- The business continuity plan had been further developed to include events that could impact the delivery of the service.

Mr Robert Middlefell BDS

CQC's National Professional Advisor for Dentistry and Oral Health

Our Findings

Are Services Safe?

Following our previous inspection, action was required regarding the provision of safe services. We identified deficits in relation to vulnerable patients, the building, water safety, clinical waste, records management, medical emergencies and use of IT systems.

The recommendations we made at the last inspection had been addressed.

Reliable safety systems and processes (including safeguarding)

Since the last inspection, a protocol in relation to sharing concerns about vulnerable patients had been developed in collaboration with the medical centre. A quarterly joint meeting between the medical and dental teams was held to discuss shared facilities and processes, and vulnerable patients was a standing agenda topic at the meetings.

Revised in March 2023, the business continuity plan (BCP) had been enhanced to capture a broad range of potential events that could impact service delivery. The revised BCP included links about the action to take in the event of a disruption to the service, such as a radiation fault, closure of the camp and air flow failure. The practice BCP included a link to the unit BCP.

Medical emergencies

At the previous inspection, some items in the first aid boxes were out-of-date. Records were in place to demonstrate that first aid boxes were checked weekly. Medical emergency scenarios had been undertaken with the most recent taking place in December 2023.

Monitoring health & safety and responding to risks

Since the last inspection, the contractor provided the practice with a summary of the legionella risk assessment. In addition, the practice emailed the contractor quarterly to request evidence of the water temperature checks. The dental team were therefore assured that the water supply was safe for staff, patients and others who used the building.

Work was started in March 2023 to upgrade the building and was completed in August 2023. The contactor was due to undertake a building check and complete final details. The upgrade included a full re-paint and new flooring. Accessibility had been improved for people who needed it including a lowered reception area, an automatic opening front door and accessible toilet. New windows with blinds had been fitted in some areas. The Senior Dental Officer confirmed that the heating failure on the day of the previous inspection was an isolated event and not a regular occurrence.

Infection control

The clinical room had been updated as part of the refurbishment so was now in line with best practice guidance: 'Decontamination in primary care dental practices (HTM 01-05)'. New cabinetry, work surfaces, sinks/taps and a ventilation system had been fitted. The new flooring and ceiling were in accordance with best practice infection prevention control guidelines.

Although not the full contract, the contractor had provided the practice with a copy of the cleaning schedule. The dental team carried out daily checks of the cleaning, which was signed off weekly. The cleaning manager monitored the quality of the cleaning each month.

The backlog with the frequency of clinical waste collection had been addressed. In particular, the clinical waste contract had been extended to ensure all waste was collected. The medical centre oversaw the arrangements for clinical waste and provided the dental centre with copies of the consignment notes.

Radiography (X-rays)

At the last inspection there was a combination of paper and electronic records to demonstrate safe procedures for radiography, notably the Health and Safety Executive (HSE) notifications. This meant current HSE notifications were not easily accessible. The practice had since consolidated this information.

Are Services Effective?

Although no action was required at the previous inspection for the effective key question, a good practice recommendation was made in relation to the management of records, notably staff training records.

The recommendation we made at the last inspection to consolidate records had been addressed.

Staffing

At the previous inspection some staff training records were captured in hard copy and others were recorded electronically. The systems had been amalgamated to provide a single version.

Staff highlighted that the practice was in the process of moving from Windows 7 to Windows 10 at the last inspection so staff were in the process of familiarising themselves with the new system. All staff were now competent and confident with using the updated system.