

## Waddington Dental Centre

Waddington, Lincoln, LN5 9TF

### Defence Medical Services inspection report

This report describes our judgement of the quality of care at this service. It is based on information given to us by the practice.

Are services safe?	Action required	X
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## Summary

### About this inspection

We previously carried out an announced comprehensive inspection of Waddington Dental Centre on 11 March 2024. We found that action was required to ensure a safe service was being provided. We found no actions were required within the effective, caring, responsive and well led key questions.

A remote follow up inspection was undertaken on 03 April 2025 to follow up on previous recommendations.

A copy of the report from the previous inspection can be found at:

[www.cqc.org.uk/dms](http://www.cqc.org.uk/dms)

As a result of the inspection, we found the practice was not safe in accordance with CQC's inspection framework.

The Care Quality Commission (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 assurance visit is one of a programme of inspections that CQC will complete at the invitation of the DMSR in their role as the military healthcare regulator for the DMS.

### Background to this practice

Dental Centre Waddington is based in RAF Waddington, Lincoln. The dental centre is a five-chair primary care practice for serving personnel only. The dental team is made up of a mix of military and civilian staff some of which have worked at the dental centre for several years. In October 2021 the dental centre re-opened, having been refurbished, adding a fifth surgery, central sterile services department (CSSD) and joint reception area with the medical centre.

### The staff team

Senior Dental Officer (SDO) (military)	1
Dentists (military)	2

Locum dentist (civilian)	0
Dental hygienist (civilian)	1
Dental nurses (civilian)	2
Dental nurses (military)	3
Practice manager (military)	1
Receptionist (civilian)	0 (starts 28 April)

## **Our Inspection Team**

This inspection was undertaken by a CQC inspector.

## **How we carried out this inspection**

The follow up inspection was carried out remotely. Prior to the inspection we reviewed information provided by the practice. We looked at records and correspondence related to the outstanding issues.

### **At this inspection we found:**

The process for the removal of clinical waste is thorough, it included evidence of cross-referencing waste from the dental centre once it had been disposed of and included the destruction certificate.

Safety data sheets are made available to staff to accompany Control of Substances Hazardous to Health (COSHH) risk assessments.

Emergency medicines and dental consumables are kept at the correct temperature.

### **The Chief Inspector recommends to Defence Primary Healthcare (DPHC) and Station Teams:**

Progress the infrastructure works as detailed in the statements of need submitted in relation to:

- The refurbishment of workspace within the central sterilisation services department (CSSD), to include sufficient workspace for extra sterilisers.
- The refurbishment of its stock room, including replacing shelving. Introduce a system for temperature control as material and medicines stored must to be kept below 25oC.
- Refurbishment of surgeries to include replacement of cabling under flooring to enable use of second screens and enable basic display screen equipment needs.

- Issue clear guidance to dental teams with regard to the key changes to Health Technical Memorandum 07-01 and what this means in practice.

**Mr Robert Middlefell BDS**

**National Professional Advisor for Dentistry and Oral Health**

## Our Findings

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At the last inspection, we rated the dental centre as 'action required' for providing safe services. This was because of several issues safety issues found within the dental centre. Namely, the process for the removal of clinical waste required better management, safety data sheets were not available to staff to accompany Control of Substances Hazardous to Health (COSHH) risk assessments. We also found that the storage of emergency medicines and dental consumables were required to be kept at the correct temperature, and this monitored. At this inspection we found that the dental centre had addressed issues positively and improvements had been made.

Other recommendations were made to Defence Primary Healthcare and to the station relating to the infrastructure and the requirement for refurbishment of the surgeries and sufficient workspace for further sterilisers within the central sterilisation services department (CSSD). Refurbishment was also required of the stock room, including replacing shelving and introducing temperature controls.

Following the previous inspection a statement of need (SON) had been submitted, this was then updated and re submitted in August 2024. This had been registered with site infrastructure team and they had submitted a notice to AIR infrastructure for their scrutiny/screening process.

## Are Services Safe?

### Infection control

At the last inspection we saw there were arrangements were in place for the segregation, storage and disposal of clinical waste products, including amalgam, sharps, extracted teeth. Staff described the process for managing clinical waste, it was bagged and labelled correctly and stored in a clinical waste compound. The clinical waste was transferred into large lockable containers and contracted for disposal; each individual waste bin was locked. Paperwork was retained via a local register in the dental centre. However, there was no evidence of cross-referencing waste from the dental centre once it had been disposed of, this included the absence of the destruction certificate. At this inspection we saw evidence of destruction certificates, these were now uploaded onto the 'My Initial' app (this is an app that gives instant access to servicing activity carried out by an outside agency), they were then printed and kept. There was also had a named point of contact with the contractors so they could be contacted directly if needed. Waste was cross referenced with destruction notes, packaged up with the corresponding consignment notes for that quarter and were then archived. Following some key changes to the HTM 07-01 in December 2024, DPHC practices await guidance from DPHC around the treatment of clinical waste (the use of tiger bags versus orange bags and single use versus reusable aspirator tips).

At the previous inspection we saw display screen equipment (DSE) was in each surgery and located appropriately with the exception of the dental hygienist's room. In this surgery

the DSE was located behind the dental chair lower down on the worktop surface. The layout of the surgery did not allow for any leg room for the clinician who was required to spend approximately 2-3 hours at the workstation per day completing clinical administration, there was no space for their legs as there were solid cupboards underneath. Refurbishment was a particular priority with the current layout unable to meet basic DSE requirements nor Health and Safety Executive recommendations. As an interim measure a cupboard had been removed to make more leg room.

Decontamination took place in a central sterilisation services department (CSSD), accessible from the surgeries. Sterilisation of dental instruments was undertaken in accordance with HTM 01-05. However, there was insufficient worksurface in the CSSD to accommodate all of the sterilisers that were needed, there was only space for 3 although the dental centre required 5 to meet the needs of the patient population. Following the inspection, a statement of need (SON) was submitted, this was then updated and re submitted in August 2024. This had been registered with site infrastructure team and they had submitted a notice to AIR infrastructure for their scrutiny/screening process. We were told this was expected sometime within the next 3 years.

The requirement remained for the dental centre to meet current needs of the station and remain compliant with legislation. The key infrastructure requirements at the dental centre were:

- The refurbishment of surgeries 1, 2, 4 and 5 including replacing tired cabinets, placement of non-slip clinical flooring, replacement of cabling under flooring to enable use of second screens and enable basic display screen equipment needs while maintaining separation of clean and dirty clinical zones.
- Refurbishment of the stock room as the shelving was corroded and did not meet infection control requirements. Also, within this room temperature control was required as material stored needs to be kept below 25 degrees Celsius.
- Worksurfaces within the CSSD required adjustment to enable sufficient workspace to fit the required number of sterilisers.

### Medical emergencies

At the last inspection we saw some emergency medicines that must be stored below 25 degrees, as per the manufacturer's storage instructions, were stored in the corridor during the day and a storeroom overnight, these areas regularly exceeded the 25-degree temperature range, meaning the emergency medicines efficacy was no longer assured. Temperature recordings for the emergency medicines were not kept, a thermometer was in the storeroom and some temperature checks were undertaken but these had not been recorded. At this inspection we were provided evidence to show the emergency trolley was now kept in one of the temperature controlled (air conditioned) surgeries. There was a thermometer attached which had a minimum and maximum range and the temperatures were checked and recorded daily.

At the previous inspection we saw consumables, for example filling materials, anaesthetics and saline, that were also required to be stored under 25 degrees, were kept in a storeroom that was not temperature controlled. Whilst the dental centre waited for

improvement works to be implemented, they had, in the interim, moved the consumables to a more suitable area and the temperature was recorded daily.

**Monitoring health & safety and responding to risks**

At the last inspection we saw a Control of Substances Hazardous to Health (COSHH) risk assessment was in place and had been reviewed. We saw COSHH assessments were printed out to allow access to staff as required and in case of IT failure. Master copies were held electronically although safety data sheets to accompany these were not evident electronically or in paper copies. At this inspection we were given evidence to show that safety data sheets were checked every 12 months. They were saved online onto the SharePoint area and were also printed and included in the COSHH folder along with the corresponding assessment.