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The Village Dental Care

Inspection report

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Overall summary

We undertook a follow up desk-based inspection of The Village Dental Practice on 24 June 2020. This inspection was carried out to review in detail the actions plan put in place by the registered provider to improve the quality of care and to confirm that the practice was now meeting legal requirements.

This desk-based inspection was undertaken during the Covid 19 lockdown. We reviewed the action plan submitted to us outlining improvements to the systems the practice intends to put into place for the future.

The inspection was undertaken by a CQC inspector who had remote access to a specialist dental adviser.

We undertook a comprehensive inspection of The Village Dental Practice on 9 March 2020 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 The Village Dental Practice on our website .

As part of this desk-based inspection, we reviewed the action plan to ensure the practice had identified where there was a shortfall and had actions to put in place to ensure the practice was providing well-led care in accordance with the relevant regulations.

This desk-based inspection was undertaken during the Covid 19 pandemic. Due to the demands and constraints in place because of Covid 19 we reviewed the action plan and asked the provider to confirm compliance after a reasonable interval, focusing on the area where improvement was required.

Our findings were:

Are services well-led?

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

The provider had planned improvements in relation to the regulatory breach we found at our inspection on 09 March 2020.

Background

The Village Dental Practice is in Adlington and provides NHS and private dental care and treatment for adults and children.

There is level access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces, including dedicated parking for people with disabilities, are available near the practice.

Summary of findings

The dental team includes two dentists, three dental nurses (of whom one is a trainee), two dental hygienists and two receptionists. The practice has three treatment rooms.

The practice is owned by an individual who is the principal dentist there. They have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

The practice is open:

Monday to Friday 8am – 5:30pm

Late evening and Saturday appointments are available by prior arrangement.

Our key findings were :

- The practice had introduced new guidance for all staff in respect to intervals for taking and grading of all radiographs.
- The practice confirmed that the radiation protection file would be reviewed and updated in full by August 2020.
- Guidance for staff in the completion of dental care records has been implemented.
- Improved infection prevention and control procedures have been implemented.
- A proposed review of the recall system for regular oral health checks when services recover from the Covid -19 pandemic was in place.
- The consent form signing process by the patient has been improved.
- There has been a review of training for all staff in the practice.
- The provider intends to implement bi-annual satisfaction surveys for patients to complete.
- A systematic audit programme is to be introduced.

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 our previous inspection on 9 March 2020 we judged the provider was not providing well led care and was not complying with the relevant regulations. We told the provider to take action as described in our requirement notice. At the inspection on 24 June 2020 we found the practice had made the following improvements to comply with the regulation:

The practice has introduced new guidance for all staff in respect to intervals for taking and grading of all X-rays. For example:

The Radiation protection file will be reviewed and updated by August 2020.

Guidance for staff in the completion of dental records has been implemented. For example:

- There has been a new template introduced for the recording of the findings from all dental examinations.
- The gaining of consent whilst the patient is in the surgery has been revised.
- Training in the completion of dental care records has been undertaken.
- The practice is considering upgrading to a digital system for recording patient care records when the current pandemic allows them to.

Improved infection prevention and control procedures have been implemented. For example:

- Staff are to sign their name against surgery checks and not just tick them when they have been completed. Hand hygiene audits are to be conducted.
- New protocols are in place to ensure laboratory work is disinfected upon return to the practice as well as before despatch to the lab.
- Logs/records have been implemented to ensure protein tests are being completed on dental instruments in line with guidance and manufactures instructions.

There has been a review of training for all staff in the practice. For example:

- The practice has confirmed that they will include staff training as part of their staff meeting process. A process for staff anonymously sharing areas they feel they need more help via a suggestion box will be reduced. As the inspection took place on 9th March and lockdown because of the Covid 19 pandemic happened not long after this date the practice has not had the opportunity to hold a staff meeting.
- The practice has improved the systems they use to ensure that all staff's CPD training is regularly reviewed, for example staff folders are now stored in the practice and a contents page is in place in each folder which details training undertaken. A poster is in the staff room detailing CPD expiration dates.

We were provided with an in-depth overview of how audits would be used in the future to drive improvement and this linked to nationally recognised guidance.

- The practice had also made further improvements:
- Fixed wiring testing to be completed when the current Covid-19 restrictions are lifted.
- Renewal of the gas safety certification due after July 2020.
- The Medicines and Healthcare products Regulatory Agency (MHRA) alerts are now being received and checked to ensure compliance.
- Medical equipment including oesophageal airways and a bag valve mask have been replaced in the emergency kit Checks are in place for the checking of expiration dates.
- The provider has reviewed the procedures in place for airway protection during root canal treatments and rubber dam kits are now available.
- The practice has reviewed their checking system for fire safety. Hi-Viz jackets and torches have been sourced for the fire drill to run more smoothly for upstairs patients. Two staff members are to be enrolled on a fire marshal course once allowed.
- A practice manager will be instated by the end of the year.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the Regulation when we reviewed the providers action plan on 24 June 2020.