Graham Wilding Ltd

Graham Wilding - Poulton-Le-Fylde

Inspection Report

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Overall summary

We undertook a focused inspection of Graham Wilding Poulton le Fylde on 11 March 2019. 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 led by a CQC inspector who was supported by a specialist dental adviser.

We undertook a comprehensive inspection of Graham Wilding Poulton le Fylde on 12 September 2018 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 Graham Wildings practice in Poulton le Fylde on our website www.cqc.org.uk.

As part of this inspection we asked:

• Is it well-led?

When one or more of the five 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 areas 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 made improvements in relation to the regulatory breach we found at our inspection on September 2018.

Background

The Graham Wilding's practice is in Poulton le Fylde and provides private dental treatments to adults.

There are two members of staff working at the practice: the principal dentist and one dental nurse. The staff team has remained constant for a very long time. The practice has one treatment room on the first floor of the premises.

The practice is owned by an organisation and as a condition of registration must have a person registered

Summary of findings

with the Care Quality Commission as the registered manager. Registered managers 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 registered manager at Graham Wilding Poulton le Fylde is the principal dentist.

The practice is open:

Monday, Tuesday and Thursday 8am -4pm.

Our key findings were:

- Overall governance of fire safety procedures and electrical safety had improved.
- The medical emergency medicines and equipment reflected nationally recognised guidance and a robust checking system was now in place.
- Dental care records had improved and had regard for the Faculty of General Dental Practice guidance regarding clinical examinations and record keeping.
- The practice's protocols and procedures for the use of X-ray equipment had been reviewed considering the guidance notes for dental practitioners on the safe use of X-ray equipment.
- Protocols regarding the prescribing of antibiotic medicines had been introduced considering the guidance provided by the faculty of general dental practice.
- Audits of various aspects of the service, such as radiography and patients' records were completed to improve the quality of service.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services well-led?

We found that this practice was providing well-led care and was complying with the relevant regulations.

The provider had made improvements to the management of the service. This included overall governance, procedures, audits and record keeping. The improvements provided a sound footing for the ongoing development of effective governance arrangements at the practice.

No action ✓

Are services well-led?

Our findings

At our previous inspection on 12 September 2018 we judged the practice was not providing safe 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 11 March 2019 we found the practice had made the following improvements to comply with the regulation(s):

- Fire safety checks were now in place, regular testing of the smoke detectors and emergency lighting, were in place. Weekly checks of the fire safety system were recorded and monthly fire drills were in place.
- Firefighting equipment, such as fire extinguishers, were regularly serviced. The practice had completed a recent fire risk assessment which identified that an audible fire alarm was not required.
- The safety of the electrical fixed wiring was now confirmed with a full report of checks in place. No action had been required from this report.
- The provider was now registered to receive safety alerts and a system was in place to receive and act on such alerts.
- The medical emergency medicines and equipment reflected nationally recognised guidance including portable suction and the correct medication. We confirmed that a robust weekly checking system was now in place. We noted that the glucagon injection was not stored in a temperature-controlled environment and the expiry date had not been adjusted to reflect this. We were told that this would be addressed.
- Dental care records had improved and had regard for the Faculty of General Dental Practice guidance regarding clinical examinations and record keeping. Discussion was held regarding the further development of patients' dental records to include more detail of discussion and the preventative measures recommended.
- The practice's protocols and procedures for the use of X-ray equipment had been reviewed considering the guidance notes for dental practitioners on the safe use of X-ray equipment.
- Protocols regarding the prescribing of antibiotic medicines had been introduced considering the guidance provided by the faculty of general dental practice.
- Audits of various aspects of the service, such as radiography and patients' records had been completed to improve the quality of service.

These improvements showed the provider had acted to comply with the regulations when we inspected on 11 March 2019.