

Portman Healthcare Limited

Portman Dental Clinic

Inspection Report

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Overall summary

We undertook a follow up focused inspection of Portman Dental Clinic on 23 December 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 carried out by a CQC inspector.

We undertook a comprehensive inspection of Portman Dental Clinic on 15 July 2019 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 Portman Dental 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 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 made improvements in relation to the regulatory breach we found at our inspection on 15 July 2019

Background

Portman Dental Clinic is in Maidenhead and provides NHS treatment to children and private treatment to adults and children.

There is level access for people who use wheelchairs and those with pushchairs. Car parking spaces, including those for blue badge holders, are available near the practice on street and in the supermarket car park next to the practice.

The dental team includes three dentists, two periodontists, two endodontists, one prosthodontist, two orthodontists, one paediatric dentist, three dental hygienists, one treatment coordinator/dental nurse, one assistant manager/head nurse, two trainee nurses, and one receptionist.

The practice has four treatment rooms.

Summary of findings

The practice is owned by a company and as a condition of registration must have a person registered 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 Portman Dental Clinic is the practice manager.

During the inspection we spoke with the practice manager and the provider's operations manager.

We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

- Monday 8:00am to 7:00pm
- Tuesday 8:00am to 5:30pm

- Wednesday 8:00am to 8:00pm
- Thursday 8:00am to 8:00pm
- Friday 8:00am to 5:30pm
- Saturday 8:30am to 5:30pm

Our key findings were:

- Appropriate medicines and life-saving equipment were available.
- The provider had systems to help them manage risk to patients and staff.
- The provider had effective staff recruitment procedures.
- The clinical staff provided patients' care and treatment in line with current guidelines.
- The provider asked staff and patients for feedback about the services they provided.

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 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 15 July 2019.

No action



Are services well-led?

Our findings

At our previous inspection on 15 July 2019 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 23 December 2019 we found the practice had made the following improvements to comply with the regulation:

- Effective systems and processes were established to ensure good governance in accordance with the fundamental standards of care. Specifically management of COSHH, patient feedback and fire safety.
- There were enough suitably qualified, competent, skilled and experienced persons deployed to meet the fundamental standards of care and treatment.

The practice had also made further improvements:

- Protocols were in place for recording in the patients' dental care records or elsewhere the reason for taking X-rays, a report on the findings and the quality of the image in compliance with Ionising Radiation (Medical Exposure) Regulations 2017.

- All clinical staff had adequate immunity for vaccine preventable infectious diseases.
- The practice's recruitment procedures ensured that appropriate checks were completed prior to new staff commencing employment at the practice.
- Protocols for medicines management were in place to ensure all medicines were dispensed safely and securely.
- Completion of dental care records took into account the guidance provided by the Faculty of General Dental Practice.
- Protocols were in place for the prescribing of antibiotic medicines taking into account the guidance provided by the Faculty of General Dental Practice.
- The provider's registration conditions ensured the regulated activities at Portman Dental Clinic were managed by an individual who is registered as a manager.
- The practice had arrangements for ensuring were sustained in the longer term.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulations when we inspected on 23 December 2019.