

## Gorleston Partnership

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## Inspection report

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### Overall summary

We conducted this announced comprehensive inspection on 28 June 2023 under section 60 of the Health and Social Care Act 2008 as part of our regulatory functions.

We planned the inspection to check whether the registered practice was meeting the legal requirements in the Health and Social Care Act 2008 and associated regulations.

The inspection was led by a Care Quality Commission (CQC) inspector who was supported by a specialist dental advisor.

To get to the heart of patients' experiences of care and treatment, we always ask the following 5 questions:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

These questions form the framework for the areas we look at during the inspection.

Our findings were:

- The dental clinic appeared clean and well-maintained.
- The practice had infection control procedures which reflected published guidance.
- Staff knew how to deal with medical emergencies. Appropriate medicines and life-saving equipment were available.
- The practice had systems to manage risks for patients, staff, equipment and the premises.
- Safeguarding processes were in place and staff knew their responsibilities for safeguarding vulnerable adults and children.
- Recruitment procedures ensured only suitable staff were employed.
- Clinical staff provided patients' care and treatment in line with current guidelines.

# Summary of findings

- Staff provided preventive care and supported patients to ensure better oral health.
- Patients were treated with dignity and respect, and a high level of care.
- There was effective leadership and a culture of continuous improvement.
- Auditing was used effectively by staff to drive improvement.
- Staff felt involved, supported and worked as a team.
- Staff and patients were asked for feedback about the services provided.

## Background

Gorleston Partnership is part of Bupa Dental Care, a group dental provider. The practice provides both NHS and private dental care and treatment for adults and children. In addition to general dentistry, the practice offers dental implant treatments and sedation for patients.

The practice has made reasonable adjustments to support patients with mobility requirements including portable ramp access and a ground floor surgery, however it does not have a fully accessible toilet.

The dental team includes 6 dentists, 11 dental nurses, a dental hygienist, a dental therapist, a practice manager and four receptionists. The practice has 3 treatment rooms.

During the inspection we spoke with 3 clinicians, the practice manager, 2 nurses and a receptionist. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open for NHS patients on Mondays to Fridays from 9am to 5pm. For private patients it opens on Mondays and Wednesdays from 8am to 8pm; on Tuesdays from 8am to 7pm, on Thursdays from 8am to 5pm, and on Fridays from 8.30am to 4.30pm.

# Summary of findings

## The five questions we ask about services and what we found

We always ask the following five questions of services.

<b>Are services safe?</b>	<b>No action</b> ✓
<b>Are services effective?</b>	<b>No action</b> ✓
<b>Are services caring?</b>	<b>No action</b> ✓
<b>Are services responsive to people's needs?</b>	<b>No action</b> ✓
<b>Are services well-led?</b>	<b>No action</b> ✓

# Are services safe?

## Our findings

We found this practice was providing safe care in accordance with the relevant regulations.

### **Safety systems and processes, including staff recruitment, equipment and premises and radiography (X-rays)**

The practice had safeguarding processes and staff knew their responsibilities for safeguarding vulnerable adults and children. All staff had undertaken appropriate training and there was useful information about safeguarding procedures around the practice, making it easily accessible to both patients and staff.

In addition to a whistle blowing policy, information about how staff could raise any professional concerns was on display in the staff area.

The practice had infection control procedures which reflected published guidance.

The practice had procedures to reduce the risk of Legionella, or other bacteria, developing in water systems.

The practice had policies and procedures in place to ensure clinical waste was segregated and stored appropriately in line with guidance.

The practice appeared clean and there was an effective schedule in place to ensure it was kept clean.

The practice had a recruitment policy and procedure to help them employ suitable staff, which reflected the relevant legislation. Files for recently employed staff we reviewed showed that appropriate checks had been undertaken prior to staff commencing their employment.

Clinical staff were qualified, registered with the General Dental Council and had professional indemnity cover.

The practice ensured equipment was safe to use, maintained and serviced according to manufacturers' instructions. The practice ensured the facilities were maintained in accordance with regulations.

Staff had received appropriate fire training and fire safety equipment was checked and maintained.

The practice had arrangements to ensure the safety of the X-ray equipment and the required radiation protection information was available.

### **Risks to patients**

The practice had implemented systems to assess, monitor and manage risks to patient and staff safety. This included sharps safety and sepsis awareness. We viewed risk assessments which covered a wide range of identified hazards in the practice and detailed the control measures that had been put in place to reduce them.

Emergency equipment and medicines were available and checked in accordance with national guidance.

Staff knew how to respond to a medical emergency and had completed training in emergency resuscitation and basic life support every year.

The practice had assessments to minimise the risk that could be caused from substances that are hazardous to health.

### **Information to deliver safe care and treatment.**

Patient care records were complete, legible, kept securely and complied with General Data Protection Regulation requirements.

The practice had systems for referring patients with suspected oral cancer under the national two-week wait arrangements.

# Are services safe?

## **Safe and appropriate use of medicines**

The practice had robust systems for appropriate storage and safe handling of medicines.

Antimicrobial prescribing audits were carried out to ensure clinicians were prescribing according to national recommendations.

## **Track record on safety, and lessons learned and improvements.**

The practice had systems to review and investigate incidents and accidents, and these were discussed by staff at practice meetings. Incidents were also logged centrally with the provider, so that learning from them could be shared across all their practices to help drive improvement.

The practice had a system for receiving and acting on national safety alerts.

# Are services effective?

(for example, treatment is effective)

## Our findings

We found this practice was providing effective care in accordance with the relevant regulations.

### **Effective needs assessment, care and treatment**

The practice had systems to keep dental professionals up to date with current evidence-based practice. We saw clinicians assessed patients' needs and delivered care and treatment in line with current legislation, standards and guidance supported by clear clinical pathways and protocols.

We found that the provision of dental implants and patient sedation was in accordance with national guidance.

### **Helping patients to live healthier lives.**

The practice provided preventive care and supported patients to ensure better oral health. A dental hygienist and dental therapist worked at the practice to support patients with gum disease. The practice sold interdental brushes, mouth wash, floss and toothpaste to support patients in their oral health.

We noted leaflets from the oral health foundation in the waiting area, giving patients useful information about mouth cancer, diet, root canal treatment and the use X-rays.

### **Consent to care and treatment**

Staff obtained patients' consent to care and treatment in line with legislation and guidance. We found that staff understood their responsibilities under the Mental Capacity Act 2005 and Gillick Competency guidelines.

### **Monitoring care and treatment**

The practice kept detailed patient care records in line with recognised guidance.

We saw evidence the dentists justified, graded and reported on the radiographs they took. The practice conducted radiography audits six-monthly following current guidance.

### **Effective staffing**

We found that had the skills, knowledge and experience to carry out their roles. They told us they had plenty of time for their role and did not feel rushed in their job. The hygienist and therapist worked with chairside support.

Newly appointed staff had a structured induction and clinical staff completed continuing professional development required for their registration with the General Dental Council.

### **Co-ordinating care and treatment**

Staff worked together and with other health and social care professionals to deliver effective care and treatment.

The dentist confirmed they referred patients to a range of specialists in primary and secondary care for treatment the practice did not provide.

# Are services caring?

## Our findings

We found this practice was providing caring services in accordance with the relevant regulations.

### **Kindness, respect and compassion**

Patient feedback we reviewed indicated that staff were friendly, caring and empathetic to their needs. Staff provided us with specific examples of where they felt they had been particularly caring towards patients. This included providing additional support and follow up for older patients, and to other vulnerable patients during the Covid-19 pandemic. One nurse described some of the practical ways she had supported a very nervous patient undertake their treatment.

Staff had undertaken training in autism and learning disability awareness to improve their understanding of patients living with these conditions.

### **Privacy and dignity**

Staff were aware of the importance of privacy and all patient notes were held digitally. Staff password protected patients' electronic care records and backed these up to secure storage.

We noted a helpful information leaflet in the waiting area, informing patients how the practice managed their personal information and how they could access their records.

### **Involving people in decisions about care and treatment**

Staff helped patients to be involved in decisions about their care and gave patients clear information to help them make informed choices about their treatment.

The practice's website provided patients with information about the range of treatments available at the practice.

The dentist explained the methods they used to help patients understand their treatment options. These included the use of visual aids, dental models and X-rays.

# Are services responsive to people's needs?

## Our findings

We found this practice was providing responsive care in accordance with the relevant regulations.

### **Responding to and meeting people's needs**

The practice was accessible to wheelchair users via a portable ramp access and an external lowered call bell at the front door. There was a ground floor treatment room but no fully accessible toilet. The practice had a specialist bariatric enabled chair.

A portable hearing loop was available to assist patients who wore hearing aids. Reading glasses and a magnifying glass were available to help patients read any paperwork. Information about translation services was available for patients who did not speak or understand English.

The practice offered patients an email and text appointment reminder service.

### **Timely access to services**

At the time of our inspection the practice was able to take on new private and payment plan patients, but not new NHS patients.

Emergency slots for patients in dental pain were available each day, and the practice's answerphone provided telephone numbers for patients needing emergency dental treatment when the practice was not open. Staff told us of an occasion that they gave up their Bank Holiday to support a patient who needed an urgent appointment.

### **Listening and learning from concerns and complaints**

Information about how patients could raise their concerns was easily available at reception. The receptionist spoke knowledgeably about how they dealt with patients' concerns.

We reviewed paperwork in relation to two recent complaints and saw they had been dealt with in a timely, professional and empathetic way. Complaints were also monitored and tracked centrally by the provider and discussed at staff meetings so that learning from them could be shared.



# Are services well-led?

## Our findings

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

### **Leadership capacity and capability**

There was strong leadership with emphasis on people's safety and continually striving to improve. We found senior staff to be knowledgeable, experienced and clearly committed to providing a good service to both patients and staff. We received many positive comments about the practice manager's professionalism, competence and personal support from staff.

Systems and processes were embedded, and staff worked together in such a way that the inspection did not highlight any issues or omissions. We noted high standards of governance throughout our inspection.

We saw the practice had effective processes to support and develop staff with additional roles and responsibilities.

The information and evidence presented during the inspection process was clear and well documented. Records required by regulation for the protection of staff and patients and for the effective running of the service were maintained, up to date and accurate.

### **Culture**

The practice demonstrated a transparent and open culture in relation to people's safety. Staff stated they felt respected and supported, and clearly benefitted from the ethos, leadership and management approach of senior staff.

Staff discussed their training needs during annual appraisals and 1 to 1 meetings with the practice manager. They also discussed learning needs, general wellbeing and aims for future professional development.

Communication systems in the practice were good, with regular monthly meetings for all staff and additional meetings for dental nurses and reception staff. Minutes of meetings we viewed were detailed and were used effectively to keep staff up to date with the latest guidance and practice policies.

### **Governance and management**

Staff had clear responsibilities, roles and systems of accountability to support good governance and management.

The practice had a governance system which included policies, protocols and procedures that were accessible to all members of staff and were reviewed on a regular basis.

We saw there were clear and effective processes for managing risks, issues and performance.

### **Appropriate and accurate information**

Staff acted on appropriate and accurate information.

The practice had effective information governance arrangements and staff were aware of the importance of protecting patients' personal information.

### **Engagement with patients, the public, staff and external partners**

Staff gathered feedback from patients, the public and external partners and demonstrated a commitment to acting on feedback. Patients were sent an automated text message following their appointment asking them to complete an on-line review. These were monitored closely by the provider and each practice was scored according to their reviews. We viewed recent feedback and noted that patients had rated staff friendliness, professionalism and the cleanliness of the premises highly.

# Are services well-led?

Feedback from staff was obtained through meetings, surveys, and informal discussions. Staff were encouraged to offer suggestions for improvements to the service and said these were listened to and acted on where appropriate.

## **Continuous improvement and innovation**

The practice had systems and processes for learning, quality assurance, continuous improvement and innovation. These included audits of patient care records, radiographs, hand hygiene, tooth extractions, health and safety, complaints and infection prevention and control. Staff kept records of the results of these audits and the resulting action plans and improvements.