

1A Group Dental Practice Partnership

Mydentist - Whittlesey Road - Stanground

Inspection Report

Whittlesey Road
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Overall summary

We carried out a short follow up visit on 9 December 2015 to check whether the practice had taken action to address a breach of Regulation 17(2)(a)(b) and (d)(i) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Our findings were:

Are services safe?

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

Are services effective?

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

Are services well-led?

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

Background

Mydentist - Whittlesey Road Stanground (previously registered as 1A Dental Practice Stanground) provides primary dental care and treatment to patients whose care is funded through the NHS and to a small number of patients who pay privately. The service is part of the 1A

Group Dental Practice Partnership owned by a large provider of dental care the Mydentist Group. The practice currently employs one full time dentist with part time locum cover. A new dentist has been employed and will commence post in the near future. There is a lead dental nurse, a second dental nurse and one trainee dental nurse supported by a receptionist. The practice manager works two days a week at the location and three days a week at another dental practice in the area. The practice opens 8.30am to 5pm Monday to Friday.

The practice manager is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. 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.

During this inspection we reviewed the provider's action plan in response to the shortfalls we found at the last inspection, visited the service to speak with the practice manager and reviewed records held at the service. We found the practice had taken the appropriate action.

Our key findings were;

- All employed staff had an appropriate level of criminal records check completed.

Summary of findings

- Staff received training, support and personal development appropriate to their roles.
- Systems to monitor the quality and safety of the service had been improved.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

The practice was completing relevant safety checks prior to the employment of staff. Safety checks of emergency medicines were robust.

Are services effective?

Newly employed staff received an induction. All staff received training and a system was in place to monitor the completion of planned training. An appraisal system was in place and staff also received a 6 month performance review.

Are services well-led?

We found that systems to monitor the quality of the service had been improved so that the manager was assured that safe and effective care was being provided to patients.

Mydentist - Whittlesey Road - Stanground

Detailed findings

Background to this inspection

We carried out a follow up inspection of Mydentist Whittlesey Road Stanground. The purpose of the inspection was to check the practice had addressed a

regulatory breach of the Health and Social Care Act 2008, identified during their last comprehensive inspection conducted on 5 May 2015. Our inspections are conducted under section 60 of the Health and Social Care Act 2008 as part of our regulatory functions.

Are services safe?

Our findings

Staff Recruitment

When we last inspected this service on 5 May 2015 we found that one dentist had only received a standard criminal record check with the Disclosure and Barring Service (DBS) when this should have been an enhanced check. This was because their role could bring them into contact with vulnerable adults or children.

We found that action had been taken to complete an enhanced DBS check. We also found that appropriate checks had been completed for all of the staff appointed since the last inspection.

Equipment and Medicines

When we last inspected this service on 5 May 2015 we checked the emergency medicines stocked by the practice and found that one sedative was out of date for safe use.

We found the relevant medicine had been restocked. In addition, the manager had initiated a robust checking system so that staff were alerted to medicines close to their use by dates so that the items were reordered and replaced in a timely manner.

Are services effective?

(for example, treatment is effective)

Our findings

Staffing

When we last inspected this service on 5 May 2015 we found that staff training was not being monitored, there was no evidence that induction took place for new staff or that the staff's individual performance was reviewed.

We found the practice had made improvements. Since the last inspection the practice had employed three new members of staff. We reviewed their recruitment files and found they had all completed an induction to their new role.

All staff accessed the provider's learning management system to complete the eLearning training updates. This

consisted of 11 compulsory training sessions that included topics such as safeguarding adults and children as well as data protection. Basic life support training was provided to staff as a practical session. The manager had a monthly training plan so that staff completed a named training session each month. Upon completion, staff printed their certificates and gave them to the manager. This enabled the manager to monitor their progress with mandatory training. The practice supported one trainee dental nurse and other dental nurses could access further development to complete extended roles such as fluoride applications if they wished.

Staff received an annual appraisal and a mid-year review to review their personal development plans.

Are services well-led?

Our findings

Governance arrangements

At the inspection on 5 May 2015 we found the practice did not always record audits and the actions identified were not always evidenced or acted upon. Some monitoring procedures were not working effectively (e.g.recruitment checks for DBS and checks of the emergency medicines)

We found the manager had initiated and established clear systems to ensure that quality checks and improvements were completed. This included regular infection control audits, radiography audits and checks of the emergency medicines. Staff were aware of their responsibilities in completing the checks and the manager had a good oversight of the findings to ensure that actions were taken when necessary.