

Church Street Dental Practice

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Inspection report

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Date of inspection visit: 07/03/2023

Date of publication: 22/03/2023

Overall summary

We carried out this announced on 7 March 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.
- The practice had staff recruitment procedures which reflected current legislation.

Summary of findings

- Clinical staff provided patients' care and treatment in line with current guidelines.
- Patients were treated with dignity and respect. Staff took care to protect patients' privacy and personal information.
- Staff provided preventive care and supported patients to ensure better oral health.
- Staff felt involved, supported and worked as a team.
- Staff and patients were asked for feedback about the services provided.

Background

Church Street Dental Practice is in Somersham and provides NHS and private dental care and treatment for adults and children.

There is step free access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces, including dedicated parking for disabled people, are available near the practice. The practice has made reasonable adjustments to support patients with access requirements.

The dental team includes 3 dentists, 1 dental nurse, 1 dental hygienist, 2 managers and 2 receptionists. The practice has 2 treatment rooms.

During the inspection we spoke with 2 dentists, 1 dental nurse and both receptionists. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open on Mondays, Tuesdays, Thursdays and Fridays from 8am to 4pm and on Wednesdays from 8am to 5pm. It also opens one Saturday a month from 8.30am to 12.30pm.

There were areas where the provider could make improvements. They should:

- Take action to ensure all staff have received training to manage medical emergencies taking into account the guidelines issued by the Resuscitation Council (UK) and the General Dental Council.
- Take action to implement all recommendations in the practice's recent Legionella and fire safety risk assessments.

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?	No action ✓
Are services effective?	No action ✓
Are services caring?	No action ✓
Are services responsive to people's needs?	No action ✓
Are services well-led?	No action ✓

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.

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. A legionella risk assessment had been completed in January 2023, and the provider had drawn up an action plan with timescales to ensure its recommendations were implemented.

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. Staff files we reviewed showed that appropriate pre-employment checks had been undertaken to ensure staff were suitable to work at the practice.

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.

A fire safety risk assessment had been carried out recently in line with the legal requirements and the provider was in the process of implementing its recommendations.

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.

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

Staff knew how to respond to a medical emergency and all, but one member of staff, had completed training in emergency resuscitation and basic life support every year.

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

Track record on safety, and lessons learned and improvements

The practice had systems to review and investigate incidents and accidents. 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. A range of clinical audits was completed to ensure patients received effective and safe care.

Helping patients to live healthier lives

The practice provided preventive care and supported patients to ensure better oral health. Staff had recently obtained a range of dental health information leaflets that could be given to patients. The practice sold a range of sundries including interdental brushes, mouthwash and dental floss. A dental hygienist also worked at the practice to help patients maintain good oral health.

The practice regularly took part in national oral health campaigns such as mouth cancer action month and posted information on their social media platforms.

Consent to care and treatment

Staff obtained patients' consent to care and treatment in line with legislation and guidance. They understood their responsibilities under the Mental Capacity Act 2005.

Staff described how they involved patients' relatives or carers when appropriate and made sure they had enough time to explain treatment options clearly.

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 carried out radiography audits six-monthly following current guidance.

Effective staffing

Staff had the skills, knowledge and experience to carry out their roles.

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

The dental hygienist worked with chairside support.

Co-ordinating care and treatment

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

The dentists 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

10 surveys we reviewed showed that patients rated the practice highly, 90% of respondents rated the friendliness and courtesy of staff as 'excellent' and 10% as 'very good'. 70% of respondents rated the caring concern of the clinicians as 'excellent', 20% as 'very good' and 10% as 'good'.

Some staff had undertaken training courses in learning disability and autism to help them better understand the needs of patients living with these conditions.

Staff were clear about the importance of emotional support needed by patients when delivering care and gave us specific examples of where they had gone out of their way to support patients with additional needs.

Privacy and dignity

Staff were aware of the importance of confidentiality and the waiting area was separate from the reception desk, allowing for greater privacy. There were window blinds in place in treatment rooms to prevent passers by looking in.

Computer screens at reception were not overlooked and staff password protected patients' electronic care records and backed these up to secure storage. Archived patients' notes were held securely.

Involving people in decisions about care and treatment

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

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. 80% of respondents to the patient survey stated that they had received excellent explanation of their treatment, a treatment plan and costings.

The dentists explained the methods they used to help patients understand their treatment options. These included the use of dental models, photographs, drawings and the use of on-line platforms.

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 had made reasonable adjustments, including level access entry, an automatic entrance door, an accessible toilet and a portable induction loop.

Staff could access translation services for patients who did not understand or speak English.

Timely access to services

The practice displayed its opening hours and provided information on their website and social media page. The practice also opened one Saturday morning a month for patients wanting a hygienist appointment.

Patients could access dental care from the practice within an acceptable timescale for their needs, with waiting times for treatment at about 3 to 4 weeks.

The practice's answerphone provided telephone numbers for patients needing emergency dental treatment during the working day and when the practice was not open. A rota system was in place with 3 dentists providing out of hours emergency cover for private patients.

Patients could sign up for an email and text appointment reminder service, and reception staff told us very few patients failed to attend their appointment.

Listening and learning from concerns and complaints

Information about how patients could raise their concerns was available in the waiting area and on the practice's website. The practice responded to concerns and complaints appropriately and we saw that complaints was a standing agenda item at the practice meetings so that any learning from them could be shared with the staff team.

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

The registered manager worked at the practice about 2 days a week, as she also worked at the provider's other two services. She was supported by a compliance and practice manager who between them were responsible for governance issues.

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

Culture

Staff could show how they ensured high-quality sustainable services and demonstrated improvements over time. We noted that many of the shortfalls we had identified at our inspections of the provider's other practices had been addressed, showing staff's commitment to improvement.

Staff stated they felt respected, supported and valued. They reported that the principal dentists were approachable and very understanding of their various family caring commitments.

Staff discussed their training needs during annual appraisals, evidence of which we viewed.

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 information governance arrangements and staff were aware of the importance of protecting patients' personal information.

Engagement with patients, the public, staff and external partners

The practice gathered feedback about its service using a questionnaire that asked patients about the quality of their appointments, the staff, the facilities and treatment. Ten questionnaires were sent out every 3 months. Surveys we reviewed showed high satisfaction rates with the service provided.

Feedback from staff was obtained through meetings and informal discussions. Staff were encouraged to offer suggestions for improvements and their idea for an automated message for the answer phone to inform patients that the practice was not able to take on new NHS patients had been implemented.

Continuous improvement and innovation

The practice had systems and processes for learning, quality assurance and continuous improvement. These included audits of patient care records, disability access, radiographs, hand hygiene, oral cancer risk, and infection prevention and control.

The practice paid for staff's membership to an accredited on-line dental training provider.