

Arkh-View Surgeries Limited

Peachcroft Dental Practice

Inspection Report

Suite 4
Peachcroft Shopping Complex
Peachcroft Road
Abingdon
Oxfordshire
OX14 2NA
Telephone: 01235 532672

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Overall summary

We undertook a follow-up desk based focused review of Peachcroft Dental Practice on 4 August 2020.

This review 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 review was carried out by a CQC inspector who had remote access to a specialist dental adviser.

We undertook a comprehensive inspection of Peachcroft Dental Practice on 2 October 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 Regulations 15, 17 and 19 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 Peachcroft Dental Practice on our website www.cqc.org.uk.

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.

This desk-based review was undertaken during the Covid 19 pandemic. Due to the demands and constraints in

place because of Covid 19 we reviewed the action plan and asked the provider to confirm compliance after a reasonable interval, focusing on the area where improvement was required.

As part of this inspection we asked:

- Is it safe?
- Is it well-led?

Our findings were:

Are services safe?

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

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 breaches we found at our inspection on 2 October 2019.

Background

Peachcroft Dental Practice is in Abingdon and provides NHS and private treatment to adults and children.

Car parking spaces, including spaces for blue badge holders, are available, in a public car park, at the front the practice.

Summary of findings

The practice is based on the first floor above a retail business. New patients are advised of the stairs when they make contact with the practice.

The dental team includes four dentists, one receptionist and five dental nurses (two which are also the assistant practice manager and practice manager).

The practice has four treatment rooms of which three are in use.

The practice is owned by a partnership 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. At the time of inspection, the practice manager was going through the application process to become the registered manager.

The practice is open:

Monday to Friday 9.00am to 1.00pm and 2.00pm to 5.00pm.

Our key findings were:

- Systems and processes were put in place to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk.
- Recruitment procedures were established to ensure only fit and proper persons are employed.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services safe?

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

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 2 October 2019.

No action



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 breaches we found at our inspection on 2 October 2019.

No action



Are services safe?

Our findings

We found that this practice was providing safe care and was complying with the relevant regulations.

At our previous inspection on 2 October 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 follow-up desk based review on 4 August 2020 we found the practice had made the following improvements to comply with the regulations:

- Flooring in the patient toilet and one of the treatment rooms had been repaired and was intact.
- X-ray machines, the air conditioning unit, compressor and emergency lighting were all serviced.
- Three patient treatment chair coverings were repaired.
- The gas boiler was serviced.
- An electrical fixed wiring risk assessment was carried out.

Are services well-led?

Our findings

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

At our previous inspection on 2 October 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 follow-up desk based review on 4 August 2020 we found the practice had made the following improvements to comply with the regulations:

- Patient care records that were stored in the patient waiting room were made secure.
- Fire Safety risk assessment recommendations were carried out.
- Sharps procedures were improved to ensure they complied with the Health and Safety (Sharp Instruments in Healthcare) Regulations 2013.
- Risk assessments were undertaken in accordance with the with identified substances stored at the practice.
- Emergency medicines and equipment monitoring checks were carried out.
- Recruitment checks were now being carried out before staff started to work at the practice. The provider sent us evidence to confirm checks were carried out for a member of staff recruited since our inspection in October 2019. Checks included:

- Reason for leaving previous employment
- Eligibility to work in the UK
- Photographic identity
- Medical defence union cover
- DBS
- Full employment history
- Evidence of conduct in previous employment (references)

Some of these checks were not previously carried out.

The practice had also made further improvements:

- The service took into account the needs of patients with disabilities by providing a hearing loop system and a vision aid at reception.
- Action was taken to implement a system to recognise, diagnose and manage the signs of sepsis.
- Information was available about interpreter services for patients who did not speak English as their first language.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulations when we carried out a follow-up desk based focused inspection on 4 August 2020.