

Aspire Dental Care Limited

Aspire Dental Care Ltd - Amersham

Inspection Report

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Date of inspection visit: 17/07/2019
Date of publication: 08/08/2019

Overall summary

We undertook a focused inspection of Aspire Dental Care Amersham on 17 July 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 the practice on the 26 February 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 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 Aspire Dental Care Amersham 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 areas where improvement was required.

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 areas 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 breaches we found at our inspection on 26 February 2019.

Summary of findings

Background

Aspire Dental Care Amersham is in Little Chalfont and provides NHS and private treatment to patients of all ages.

There is level access for people who use wheelchairs and those with pushchairs. Car parking spaces, including one for blue badge holders, are available outside the practice.

Aspire Dental Care leased space in a building owned by a GP practice.

The dental team includes two dentists, one dental nurse, one trainee dental nurse, two receptionists and a practice manager.

The practice has two treatment rooms, a decontamination room, office and reception. The practice shares its patient waiting area with the GP practice.

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.

During the inspection we spoke with the practice manager, clinical director and the provider who was the business manager. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

- Monday 9.00am to 5.30pm
- Tuesday 9.00am to 5.30pm
- Wednesday 8.30am to 5.30pm
- Thursday 8.30am to 5.30pm
- Friday 8.30am to 5.30pm
- Saturday 9.00am to 1.00pm

Our key findings were:

The provider had made good improvements in relation to the regulatory breaches we found at our previous inspection and was now providing well-led care in accordance with the relevant regulations.

- The provider had thorough staff recruitment procedures.
- Staff knew how to deal with emergencies. 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 leadership and culture of continuous improvement.
- The provider had arrangements in place to support people who experienced sight and hearing loss.

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.

No action



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 26 February 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 17 July 2019 we found the practice had made the following improvements to comply with the regulation:

- Effective systems and processes ensured good governance in accordance with the fundamental

standards of care. Specifically, management of radiography, prescribing medicines, emergency medicines management, patients care records, infection control, staff training and fire safety.

- Recruitment procedures were established and operated effectively to ensure only fit and proper persons are employed.

The practice had also made further improvements:

- The practice provided reading glasses and a hearing loop system to support people who experienced sight and hearing loss.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation.