

# Windermere Dental Practice Limited Windermere Dental Practice Inspection report

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Date of inspection visit: 12 January 2023 Date of publication: 23/01/2023

### **Overall summary**

We carried out this announced comprehensive inspection on 12 January 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. Improvements were needed to ensure all appropriate medicines and life-saving equipment were available as recommended.
- 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.
- 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.
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## Summary of findings

- Staff provided preventive care and supported patients to ensure better oral health.
- The appointment system worked efficiently to respond to patients' needs.
- The frequency of appointments was agreed between the dentist and the patient, giving due regard to National Institute of Health and Care Excellence (NICE) guidelines.
- There was effective leadership and a culture of continuous improvement.
- Staff felt involved, supported and worked as a team.
- Staff and patients were asked for feedback about the services provided.
- Complaints were dealt with positively and efficiently.
- The practice had information governance arrangements.
- Improvements could be made to the systems for managing risks, in particular in relation to Legionella and fire safety.

#### Background

Windermere Dental Practice is in Windermere in Cumbria and provides private dental care and treatment for adults and children.

There is ramped access to the practice for people who use wheelchairs and those with pushchairs. The practice is located close to local transport routes and car parking spaces are available near the practice. The practice has made reasonable adjustments to support patients with access requirements.

The dental team includes 1 dentist, 2 dental nurses, 1 dental therapist and a practice manager. The practice has 2 treatment rooms.

During the inspection we spoke with the dentist, both dental nurses, the dental therapist and the practice manager. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open:

Monday and Tuesday from 8.30am to 6pm

Wednesday to Friday from 8.30am to 4.30pm

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

- Take action to implement any recommendations in the practice's fire safety risk assessment and ensure ongoing fire safety management is effective.
- Improve the ongoing management of Legionella, taking into account the guidelines issued by the Department of Health in the Health Technical Memorandum 01-05: Decontamination in primary care dental practices, and having regard to The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance.'

# 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	$\checkmark$
Are services effective?	No action	$\checkmark$
Are services caring?	No action	$\checkmark$
Are services responsive to people's needs?	No action	$\checkmark$
Are services well-led?	No action	$\checkmark$

## 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, in line with a risk assessment, carried out in December 2020. However, we noted improvements were needed to the ongoing monitoring protocols. Monthly temperature monitoring was carried out; however, records showed the taps were consistently recording temperatures below those recommended and no action was taken to address this. Immediately after the inspection the practice sent confirmation new equipment had been purchased to more accurately measure the temperature of the water.

We also noted the current risk assessment did not consider risks from all water systems in the practice. The practice confirmed, a new risk assessment would be undertaken to consider all the risks.

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. These reflected the relevant legislation.

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 was carried out in line with the legal requirements and ongoing monitoring protocols were in place. Improvements were needed to ensure all recommendations made in the risk assessment were carried out. Immediately after the inspection, the practice confirmed they had sought specialist guidance in relation to outstanding actions and a plan was in place to address these.

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, sepsis awareness and lone working.

Emergency equipment and medicines were available and checked in accordance with national guidance, with the exception of the self-inflating bag with reservoir and the oxygen face mask with reservoir and tubing both for use on a child. We received confirmation immediately after the inspection that these items had been purchased.

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

## Are services safe?

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.We discussed some improvements could be made to the referral monitoring protocols to ensure patients are followed up in a timely manner.

#### Safe and appropriate use of medicines

The practice had systems for appropriate and safe handling of medicines. Antimicrobial prescribing audits were carried out.

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

The practice had systems to review and investigate incidents and accidents. We discussed some improvements could be made to the recording of any findings and shared learning. The practice had a system for receiving and acting on 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.

### Helping patients to live healthier lives

The practice provided preventive care and supported patients to ensure better oral health.

### **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.

Staff conveyed an understanding of supporting more vulnerable members of society such as patients living with dementia or adults and children with a learning disability.

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.

### **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

Staff were aware of their responsibility to respect people's diversity and human rights.

On the day of inspection, we saw patient feedback was gathered and reviewed on a regular basis. In the most recent report from September to December 2022, we noted 97% of patients surveyed stated the overall experience was very good.

Patients said staff were compassionate and understanding when they were in pain, distress or discomfort.

### **Privacy and dignity**

Staff were aware of the importance of privacy and confidentiality.

Staff password protected patients' electronic care records and backed these up to secure storage. They stored paper records securely.

#### 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 and information leaflet 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.

## 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 organised and delivered services to meet patients' needs and preferences.

Staff were clear about the importance of providing emotional support to patients when delivering care.

The practice had made reasonable adjustments, including information available in large print and a selection of reading glasses for patients with additional needs. Staff had carried out a disability access audit and had formulated an action plan to continually improve access for patients.

### Timely access to services

The practice displayed its opening hours and provided information on their website and patient information leaflet.

Patients could access care and treatment from the practice within an acceptable timescale for their needs. The practice had an appointment system to respond to patients' needs. The frequency of appointments was agreed between the dentist and the patient, giving due regard to NICE guidelines.

The practice's answerphone provided telephone numbers for patients needing emergency dental treatment during the working day and when the practice was not open. Staff took part in an emergency on-call arrangement with other local practices and patients were directed to the appropriate out of hours service.

Patients who needed an urgent appointment were offered one in a timely manner. When the practice was unable to offer an urgent appointment, they worked with partner organisations to support urgent access for patients. Patients with the most urgent needs had their care and treatment prioritised.

### Listening and learning from concerns and complaints

The practice responded to concerns and complaints appropriately. Staff discussed outcomes to share learning and improve the service.

## 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 practice staff demonstrated a transparent and open culture in relation to people's safety.

There was strong leadership with emphasis on peoples' safety and continually striving to improve.

Systems and processes were embedded, and staff worked together. In the areas where improvements could be made the principal dentist and the manager assured us plans would be put in place to rectify these.

The information and evidence presented during the inspection process was clear and well documented.

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.

Some staff at the practice were long-standing members of the team and had been at the practice in excess of 20 years. They told us they enjoyed working at the practice and all worked really well together.

Staff discussed their training needs during annual appraisals and informal discussions. They also discussed learning needs, general wellbeing and aims for future professional development.

The practice had arrangements to ensure staff training was up-to-date and reviewed at the required intervals.

#### **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.

On the whole we saw there were processes for managing risks, issues and performance; however, the inspection highlighted some additional areas where improvements could be made.

### 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

Staff gathered feedback from patients, the public and external partners and demonstrated a commitment to acting on feedback.

Feedback from staff was obtained through meetings 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

## Are services well-led?

The practice had systems and processes for learning, quality assurance, continuous improvement and If applicable; innovation. These included audits of patient care records, disability access, radiographs, antimicrobial prescribing, and infection prevention and control. Staff kept records of the results of these audits and the resulting action plans and improvements.