

Camphill Dental Practice Partnership

Camphill Dental Practice

Inspection report

206 Camphill Road
Nuneaton
CV10 0JL
Tel: 02476394571

Date of inspection visit: 18 September 2023
Date of publication: 10/10/2023

Overall summary

We undertook a follow up focused inspection of Camphill Dental Practice on 18 September 2023. This inspection was carried out to review 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 led by a CQC inspector who was supported by a specialist dental advisor.

We had previously undertaken a comprehensive inspection of Camphill Dental Practice on 10 May 2023 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 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 Camphill Dental Practice on our website www.cqc.org.uk.

When 1 or more of the 5 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.

As part of this inspection we asked:

- Is it well-led?

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 breach we found at our inspection on 10 May 2023.

Summary of findings

Background

Camphill Dental Practice is part of Prestige Dental Care Group a group dental provider.

Camphill Dental Practice is in Camphill, Nuneaton and provides NHS and private dental care and treatment for adults and children.

There is a ramp to provide access to the practice for people who use wheelchairs and those with pushchairs. Car parking is available on local side roads near the practice. The practice has made reasonable adjustments to support patients with access requirements.

The dental team includes 11 dentists, 13 dental nurses, (including 11 trainees, the practice manager and the registered manager) 1 dental therapist, 1 practice manager and 5 receptionists. The practice has 6 treatment rooms.

During the inspection we spoke with 1 dentist, 3 dental nurses, 2 registered managers and 1 receptionist. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open: Monday to Friday from 8am to 8pm, Saturday from 8am to 6pm and Sunday from 9am to 4pm.

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

- Improve the practice's protocols for medicines management and ensure that all medicines are stored and dispensed of safety and securely and the correct amounts of medicines are dispensed and reflect the quantities and dose prescribed.
- Improve the practice's sharps procedures to ensure the practice is in compliance with the Health and Safety (Sharp Instruments in Healthcare) Regulations 2013.
- Take action to ensure the availability of equipment in the practice to manage medical emergencies taking into account the guidelines issued by the Resuscitation Council (UK) and the General Dental Council.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services well-led?

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 the inspection on 18 September 2023, we found the practice had made the following improvements to comply with the regulation:

- The practice were completing radiography audits on at least a six-monthly basis. Audits recorded information for the practice as a whole, the learning points were therefore not clinician specific. We were assured that audits would be completed for each clinician going forward.
- Improvements had been made to the systems to monitor the completion of continuous professional development as recommended by the General Dental Council professional standards and further improvements were planned. Staff, who had been employed within the last 6 months, had not completed all training as required. We were assured that any outstanding training would be completed as soon as possible, these staff completed on-line basic life support training during this inspection. All staff were booked on to complete basic life support training in December 2023. Systems for the oversight of staff training and development had improved.
- Improvements had been made to the sharps risk management protocols to ensure compliance with the Health and Safety (Sharp Instruments in Healthcare) Regulations 2013. We saw evidence that dentists were now using needle guards and staff spoken with confirmed this. Following the last inspection of the practice we were sent evidence to demonstrate that all staff had been informed that dentists must dispose of sharps in accordance with the practice sharps policy. However, we saw that the sharps bin in the decontamination room contained burs and an irrigation needle. We were assured that the safe disposal of sharps would be discussed with staff again.
- Although the provider had purchased items of medical emergency kit that were missing at the last inspection of the practice; clear face masks for self-inflating bag sizes 0, 2 and 4 were still missing at this inspection. These items were ordered, and the equipment log sheet updated to clearly record each item of medical emergency equipment as recommended in the Resuscitation Council (UK) and the General Dental Council. The item of emergency medicine missing at the last inspection had been purchased and was now available.
- The provider had implemented a system for the on-going assessment, supervision and appraisal of staff. Half of the nursing and reception staff employed had undergone an appraisal during 2023 with other appraisal meetings planned.

The practice had also made further improvements:

- Improvements had been made to the security of NHS prescription pads in the practice and systems implemented to track and monitor their use.
- Meetings had been held to help ensure dentists are aware of the guidelines issued by the British Endodontic Society for the use of rubber dam for root canal treatment. Records reviewed showed that rubber dam had been used as appropriate.
- Following the last inspection, dentists were reminded of the periodontal guidance regarding 6 point pocket charting as a requirement for clinical record keeping and monitoring periodontal disease. Patient care records reviewed on the day of inspection were detailed and took into account the guidance provided by the College of General Dentistry.
- Staff more recently employed at the practice were still to complete training in learning disabilities and autism awareness. All other staff had completed this training. We were assured that any outstanding training would be completed by the staff as discussed on the day of inspection.

[