

H J Lewis Limited

# Rose Cottage Dental Practice

## Inspection Report

Rose Cottage Dental Practice  
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### Overall summary

We undertook a focused inspection of Rose Cottage Dental Practice on 19 March 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 led by a CQC inspector who was supported by a specialist advisor.

We had undertaken a comprehensive inspection on 11 September 2018 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 effective or well-led care in accordance with the relevant regulations 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 Rose Cottage Dental Practice on our website [www.cqc.org.uk](http://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 effective
- Is it well-led

### Background

Rose Cottage Dental Practice is based in North Walsham and offers private treatment to approximately 800 patients. The dental team consists of one dentist, one dental nurse, and a receptionist. There is one treatment room. The practice opens on Mondays, Tuesdays, Thursdays and Fridays from 8.30am to 5.30pm. There is level access for wheelchair users but there is not any parking for blue badge holders near to the practice.

The practice is owned by an individual who is the principal dentist there. He has legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

### Our findings were:

- We found this practice was providing effective care in accordance with the relevant regulations.
- We found this practice was providing well-led care in accordance with the relevant regulations.

The provider had made sufficient improvements in relation to the regulatory breaches we found at our previous inspection. These must now be embedded and sustained in the long-term.

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

# Summary of findings

- Review the practice's protocols for completion of dental care records taking into account guidance provided by the Faculty of General Dental Practice regarding clinical examinations and record keeping.

# Summary of findings

## The five questions we ask about services and what we found

We asked the following question(s).

### **Are services effective?**

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

Satisfactory action had been taken to address the shortfalls we had identified at our previous inspection. For example, staff's understanding of the Mental Capacity Act had increased, patients' referrals were better monitored and the receptionist had access to relevant training. Although in general recording keeping was better, there still needed improvement in the recording of treatment risks and benefits, and of the patient consent process.

**No action**



### **Are services well-led?**

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

Satisfactory action had been taken to address the shortfalls we had identified at our previous inspection. For example, the principal dentist had purchased an on-line governance tool and joined a professional body to help him with the management of the practice and to keep abreast of changes in dental guidelines and policies.

**No action**



# Are services effective?

(for example, treatment is effective)

## Our findings

At our previous inspection on 11 September 2018, we judged the practice was not providing effective care in accordance with the relevant regulations. During this inspection we found the following improvements:

- Staff had undertaken training in the Mental Capacity Act and had a greater understanding of its implications for treating patients who could not make decisions for themselves.
- A system had been put in place to actively monitor all referrals made to external dental services.

- The principal dentist told us he had a much better understanding of anti-biotic prescribing guidelines and now felt much more confident in refusing patients who demanded antibiotics when clinical need did not indicate their use.
- The principal dentist had paid for the receptionist to undertake a range of on-line training relevant to her role. The receptionist told us they were looking forward to doing a range of courses in relation to information governance.
- The quality of record keeping had improved since our last inspection, although we noted they still lacked detail in the recording of the patient consent process and discussion of treatment options and risks.

These improvements demonstrated the provider had taken adequate action to comply with regulation.

# Are services well-led?

## Our findings

At our previous inspection on 11 September 2018, we judged the practice was not providing well-led care in accordance with the relevant regulations, and the dentist worked in relative isolation. During this inspection we found the practice had made the following improvements to comply with the regulation:

- The practice had responded effectively to the warning notice we served them on the 19 September 2018. At our follow up inspection on 2 November 2018, we found that all shortfalls identified in relation to safety within the practice had been fully addressed.
- The principal dentist had recently purchased an on-line governance tool to assist in the management of the practice. This had only just been commissioned prior to our inspection and staff were in the process of implementing its requirements.
- The principal dentist had become a member of the Faculty of General Dental Practitioners to keep him informed of updates on changes in general dentistry and best practice guidelines.
- The principal dentist had joined a group of local dentists who met regularly to share best practice and discuss a range of clinical and governance concerns. He had also signed up to attend a forthcoming conference for dentists providing private dental care on 6 April 2019.
- The practice had a duty of candour policy and staff understood their responsibilities under it.
- A records audit had been undertaken since our previous inspection, which had been effective in highlighting many weaknesses in the recording. The principal dentist assured us he was working to improve their quality.
- The receptionist had received an appraisal of their performance, and an appraisal was in place for the dental nurse.

These improvements demonstrated the provider had taken sufficient action to comply with regulation.