

Poulton Practice Limited

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Inspection Report

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Overall summary

We undertook a follow up focused inspection of Poulton Dental Practice Limited on 16 March 2020. 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 remotely by a specialist dental adviser.

We undertook a comprehensive inspection of Poulton Dental Practice Limited on 28 November 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 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 Poulton Dental Practice Limited on our website www.cqc.org.uk.

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 area 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 breach we found at our inspection on 28 November 2019.

Background

Poulton Dental Practice is on the outskirts of Poulton le Fylde and provides private treatment for adults and children.

There is level access for people who use wheelchairs and those with pushchairs. Car parking spaces are available near the practice.

The dental team includes the principal dentist, one dental nurse and one dental hygienist. The practice has one treatment room.

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. The registered manager at Poulton Dental Practice Limited is the principal dentist.

During the inspection we spoke with the principal dentist and the dental nurse. We looked at practice policies and procedures and other records about how the service is managed.

Summary of findings

The practice is open:

Monday to Thursday 9am – 5pm

Friday 9am – 2pm

Our key findings were:

- Dental care records were completed as per the guidance provided by the Faculty of General Dental

Practitioners. In particular treatment plans were in place for all patients receiving dental implants. The recordings regarding gum health/periodontal diagnosis and treatment options had improved.

- The provider had reviewed their facilities in line with the requirements of the Equality Act 2010 with regards to the accessible toilet facilities
- The systems and processes had been improved to ensure good governance in accordance with the fundamental standards of care.

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 our previous inspection on 28 November 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 16 March 2020 we found the practice had made the following improvements to comply with the regulation:

- The registered person had introduced an effective governance system to ensure policies and procedures were reviewed and kept up to date. We saw that all policies had been reviewed and updated in January 2020.
- There was an effective system for the reporting and management of serious incidents and accidents. A serious incidents framework was now in place.
- The practice's safeguarding policy had been updated and included the telephone numbers for other agencies.
- The practice's recruitment policy had been updated to meet the requirements specified in Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. It included the requirement for the registered person to uptake references before a person was employed.

- Various sizes of adult oxygen masks had been purchased and were available in the medical emergencies kit.
- A referral records book had been put into place to monitor the referrals made to external bodies.
- Dental care records were completed as per the guidance provided by the Faculty of General Dental Practitioners. We saw that treatment plans were in place for all patients receiving dental implants. The recordings regarding gum health/periodontal diagnosis and treatment options had improved. The practice had introduced a new dental check recording system.

The practice had also made further improvements:

- The provider had reviewed their facilities in line with the requirements of the Equality Act 2010 with regards to the accessible toilet facilities. They had removed the disabled toilet sign and had identified the nearest place with disabled facilities to which patients could be directed.
- An effective process for the recording of fire safety checks had been implemented.
- New systems had been introduced to support the culture of high quality and sustainable care.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation when we inspected on 16 March 2020.