

Mr. Nicholas Patrick Marray

Rice Lane Dental Practice

Inspection Report

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Overall summary

We carried out this announced inspection on 12 April 2017 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 provider was meeting the legal requirements in the Health and Social Care Act 2008 and associated regulations. The inspection was led by a CQC inspector who was supported by a specialist dental adviser.

We told the NHS England Cheshire and Merseyside area team that we were inspecting the practice. We did not receive any information of concern from them.

To get to the heart of patients' experiences of care and treatment, we always ask the following five 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:

Are services safe?

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

Are services effective?

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

Are services caring?

We found that this practice was providing caring services in accordance with the relevant regulations.

Are services responsive?

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

Are services well-led?

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

Background

Rice Lane Dental Practice is situated in a residential suburb of Liverpool, and provides NHS and privately funded treatment to patients of all ages.

There are steps at the front entrance to the practice with a handrail positioned alongside to assist patients. Car parking is available near the practice.

The dental team includes two dentists, a dental hygienist, a dental hygiene therapist, eight dental nurses, one of whom is a trainee, and two of whom also carry out reception duties. The practice has three treatment rooms.

Summary of findings

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

We received feedback from 38 people during the inspection about the services provided. The feedback provided was positive about the practice.

During the inspection we spoke to dentists, dental nurses, receptionists and the practice manager. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open: Monday and Tuesday 9.00am to 6.00pm, Wednesday 9.00am to 5.30pm, Thursday 9.00am to 5.00pm, and Friday 9.00am to 3.30pm.

Our key findings were:

- The practice was clean and well maintained.
- The practice had infection control procedures in place which reflected published guidance.
- Staff knew how to deal with emergencies. Appropriate medical emergency medicines and equipment were available.
- The practice had safeguarding processes in place and staff knew their responsibilities for safeguarding adults and children.
- Staff provided patients' care and treatment in line with current guidelines.
- The practice had a procedure in place for dealing with complaints.
- Staff treated patients with dignity and respect and took care to protect their privacy and personal information.
- The appointment system took patients' needs into account. Dedicated emergency appointments were available.
- The practice had a leadership structure. Staff felt involved and supported and worked well as a team.
- The practice asked patients and staff for feedback about the services they provided.
- The practice had systems in place to help them manage most risks at the practice, but the procedures relating to staff immunisation were not robust.
- The practice had staff recruitment procedures in place. Minor improvements were needed.

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

- Review the system to assess, monitor and mitigate the various risks arising from undertaking of the regulated activities, specifically in relation to staff working in a clinical environment where the effectiveness of the Hepatitis B vaccination is not known.
- Review the practice's recruitment policy and procedures to ensure references for new staff are requested and recorded suitably.
- Review the security of NHS prescriptions in the practice to ensure they are all monitored and tracked.
- Introduce a system to ensure staff are up to date with training and their continuing professional development.

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?

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

The practice had systems and processes in place to provide safe care and treatment. They used learning from incidents and complaints to help them improve.

The practice had robust safeguarding procedures in place. Staff received training in safeguarding and knew how to recognise the signs of abuse and how to report concerns.

We found the equipment used in the practice was well maintained and tested at regular intervals.

The premises were secure and well maintained. The practice was cleaned regularly.

The practice had suitable arrangements for dealing with medical and other emergencies.

Staff were qualified for their roles, where necessary. The practice completed essential recruitment checks but recruitment procedures needed minor improvements. The provider assured us this would be addressed.

The practice had arrangements in place to manage risk but risks had not been assessed in relation to staff immunisation. The provider assured us this would be addressed.

NHS prescription pads were securely stored but improvements were needed to monitoring their use. The provider assured us this would be addressed.

No action



Are services effective?

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

The dentists assessed patients' needs and provided care and treatment in line with recognised guidance. Patients described the treatment they received as excellent. The dentists discussed treatment with patients so they could give informed consent and recorded this in their records.

The practice had clear arrangements when patients needed to be referred to other dental or health care professionals.

The practice supported staff to complete training relevant to their roles but did not have a system in place to monitor this. The provider assured us this would be addressed.

No action



Are services caring?

We found that this practice was providing caring services in accordance with the relevant regulations.

Patients were positive about all aspects of the service. They told us staff were caring, friendly and welcoming. They said that they were given helpful, honest explanations about dental treatment and options, and that the dentists listened to them. Patients commented that staff made them feel at ease, especially when they were anxious about visiting the dentist.

No action



Summary of findings

We saw that staff protected patients' privacy and were aware of the importance of confidentiality.

Patients said staff treated them with dignity and respect.

Are services responsive to people's needs?

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

The practice's appointment system took account of patients' needs. Patients could obtain an appointment quickly in an emergency.

The practice considered patients' individual needs and made reasonable adjustments to meet these. This included providing facilities for patients with disabilities and families with children. The practice had access to interpreter services and made arrangements to help patients who had sight or hearing loss.

Staff responded to concerns and complaints quickly.

No action



Are services well-led?

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

The practice had arrangements in place to ensure the smooth running of the service. These included systems for the practice team to discuss the quality and safety of the care and treatment provided.

There was a clearly defined management structure and staff felt supported and appreciated.

The practice team kept accurate patient dental care records which were stored securely.

The practice monitored clinical and non-clinical areas of their work to help them improve and learn. This included asking for and listening to the views of patients and staff.

No action



Are services safe?

Our findings

Reporting, learning and improvement from incidents

The practice had policies and procedures to report, investigate, respond to and learn from accidents, incidents and significant events. Staff knew about these and understood their role in the process.

The practice recorded, responded to and discussed all incidents to reduce risk and support future learning.

The practice received national patient safety alerts from the Medicines and Healthcare Products Regulatory Authority. Relevant alerts were discussed with staff, acted on and stored for future reference.

Reliable safety systems and processes (including safeguarding)

The practice had robust safeguarding policies and procedures in place to provide staff with information about identifying, reporting and dealing with suspected abuse. Staff fully understood their responsibilities should they have concerns about the safety of children, young people and adults who are vulnerable due to their circumstances. We saw that staff received safeguarding training. Staff knew the signs and symptoms of abuse and neglect and how to report concerns. We saw that the practice had arrangements in place to follow-up children and vulnerable adults if they did not attend their dental appointments.

The practice had a whistleblowing policy in place. Staff told us they felt confident they could raise concerns without fear of recrimination.

We looked at the practice's arrangements for safe dental care and treatment. These included risk assessments which staff reviewed every year. The practice followed relevant safety laws when using needles and other sharp dental items. We reviewed the procedures the dentists followed when providing root canal treatment and found these were in accordance with recognised guidance.

The practice had a business continuity plan describing how the practice would deal with events which could disrupt the normal running of the practice.

Medical emergencies

Staff knew what to do in a medical emergency and completed training in medical emergencies and life support every year.

Emergency equipment and medicines were available as recommended in recognised guidance. Staff carried out, and kept records of, checks to make sure the medicines and equipment were within their expiry dates and in working order.

Staff recruitment

The practice had a staff recruitment policy and procedure to help them employ suitable staff. This reflected the relevant legislation. We looked at some staff recruitment files. These showed the practice followed their recruitment procedure, with the exception that they had not obtained references for the two most recently appointed staff.

Clinical staff were qualified and registered with the General Dental Council, where necessary, and had professional indemnity cover.

Monitoring health and safety and responding to risks

The practice's health and safety policies and risk assessments were reviewed regularly to help manage potential risk. These covered general workplace and specific dental risks. The practice had current employer's liability insurance.

The provider ensured clinical staff had received appropriate vaccinations, including the vaccination to protect them against the Hepatitis B virus, but did not routinely request evidence of the effectiveness of the vaccination. The practice did not have a risk assessment in place in relation to staff working in a clinical environment when the effectiveness of the vaccination was unknown.

Dental nurses worked with the dentists, dental hygienists and dental therapists when they treated patients.

Infection control

The practice had an infection prevention and control policy and procedures in place to keep patients safe. They followed guidance in The Health Technical Memorandum 01-05: Decontamination in primary care dental practices (HTM01-05) published by the Department of Health.

The practice had suitable arrangements for transporting, cleaning, checking, sterilising and storing instruments in

Are services safe?

line with HTM 01-05. The records showed that the equipment staff used for cleaning and sterilising instruments was maintained and used in line with the manufacturers' guidance.

The practice carried out infection prevention and control audits twice a year. The most recent audit showed the practice was meeting the required standards.

The practice had procedures in place to reduce the possibility of Legionella or other bacteria developing in the water systems, in line with current guidance.

We saw cleaning schedules for the premises. The practice was clean when we inspected and patients confirmed this was usual.

Equipment and medicines

We saw servicing documentation for the equipment used in the practice. Staff carried out checks in line with the manufacturers' recommendations.

The practice had suitable systems for prescribing, dispensing and storing medicines.

The practice stored and kept records of blank NHS prescriptions in accordance with current guidance. We saw that records of the serial numbers for prescriptions issued and void were not maintained but the provider assured us this would be put in place.

Radiography (X-rays)

The practice had arrangements to ensure the safety of the X-ray equipment. They complied with current radiation regulations and had the required information available.

We saw evidence that the dentists justified, graded and reported on the X-rays they took. The practice carried out X-ray audits every year following current guidance.

Where appropriate, staff completed continuing professional development in respect of dental radiography.

Are services effective?

(for example, treatment is effective)

Our findings

Monitoring and improving outcomes for patients

The practice kept detailed dental care records containing information about patients' current dental needs, past treatment and medical history. The dentists assessed patients' treatment needs in line with recognised guidance.

We saw that staff audited patients' dental care records to check that the clinicians recorded the necessary information.

Health promotion and prevention

The practice had a strong focus on preventative care and supported patients to achieve better oral health in line with the Delivering Better Oral Health toolkit.

The dentists told us they prescribed high concentration fluoride products if a patient's risk of tooth decay indicated this would help them.

The clinicians told us they discussed smoking, alcohol consumption and diet with patients during appointments. The practice had a selection of dental products for sale and provided health promotion leaflets to help patients with their oral health.

One of the practice administrators had designed and produced a bespoke range of posters to display in the waiting room. The posters provided information to accompany national health and dental health initiatives, for example, stop smoking initiatives and oral cancer awareness. There were also educational posters giving short, practical tips to help nervous patients relax prior to their appointment, and posters with a seasonal theme, for example, Halloween, which aimed to educate children about sugar content.

Staffing

Staff new to the practice completed a period of induction based on a structured programme.

We reviewed a number of staff records and found these contained a variety of CPD. The provider did not have a system in place to monitor training to ensure essential training was completed, including the continuing professional development required for their registration with the General Dental Council.

Staff told us they had annual appraisals. These were used to discuss learning needs, general wellbeing and future professional development. We saw several completed appraisals which confirmed this.

Working with other services

Dentists confirmed they referred patients to a range of specialists in primary and secondary care if they needed treatment the practice did not provide. This included referring patients with suspected oral cancer in accordance with the current guidelines. The practice monitored urgent referrals to ensure they were dealt with promptly.

Consent to care and treatment

The practice team understood the importance of obtaining and recording patients' consent to treatment. The dentists told us they gave patients information about treatment options and the risks and benefits of these so they could make informed decisions. Extensive information was also available on the practice's website about dental treatments.

Patients confirmed the dentists listened to them and gave them clear information about their treatment.

The practice's consent policy included information about the Mental Capacity Act 2005. Staff understood their responsibilities under the act when treating adults who may not be able to make informed decisions. The policy also referred to Gillick competence. The clinicians were aware of the need to consider this when treating young people under 16. Staff described how they involved patients' relatives or carers when appropriate and made sure they had enough time to explain treatment options clearly.

Are services caring?

Our findings

Respect, dignity, compassion and empathy

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

Patients commented positively that staff were friendly and caring. We saw that staff treated patients kindly and with respect and were friendly towards patients at the reception desk and over the telephone.

Staff understood the importance of providing emotional support for patients who were nervous of dental treatment.

Staff were aware of the importance of privacy and confidentiality. Staff told us that if a patient asked for more privacy facilities were available. Staff did not leave patient information where other patients might see it.

Patients' electronic and paper dental care records were securely maintained.

Involvement in decisions about care and treatment

The practice gave patients information about dental treatments to help them make informed choices. Patients confirmed that staff listened to them, did not rush them and discussed options for treatment with them. Dentists described the conversations they had with patients to help them understand their treatment options.

Patients told us staff were kind and helpful when they were in pain, distress or discomfort.

The practice's website provided patients with information about the range of treatments available at the practice.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

Responding to and meeting patients' needs

The practice had an appointment system in place which took into account patients' needs. Staff told us that patients requiring urgent appointments were seen the same day. Patients told us they had enough time during their appointment and did not feel rushed.

Staff told us that they currently had patients for whom they needed to make adjustments to enable them to receive treatment, for example, the practice manager contacted some of their 'living with dementia' patients on the day of the appointment to provide them with an extra reminder.

Staff were prompted to be aware of patients' specific needs or medical conditions via the use of a flagging system on the dental care records which helped them treat patients individually.

Promoting equality

The practice had taken into consideration the needs of different groups of people, for example, people with disabilities, and put in place reasonable adjustments, for example, handrails to assist with mobility.

The practice was not accessible to wheelchair users. Staff provided information on nearby practices which were accessible.

Staff had access to interpreter and translation services for people who required them. The practice had a hearing induction loop available.

Access to the service

The practice displayed its opening hours on the premises, in the practice's information leaflet and on their website.

The practice made every effort to keep waiting times and cancellations to a minimum.

The practice was committed to seeing patients experiencing pain or other dental emergencies on the same day and had appointments available. The website, information leaflet and answerphone provided telephone numbers for patients who required emergency dental treatment during the working day and when the practice was closed. Patients confirmed they could make routine and emergency appointments easily.

Concerns and complaints

The practice had a complaints policy providing guidance to staff on how to handle a complaint. The practice information leaflet explained how to make a complaint. The practice manager was responsible for dealing with complaints. Staff told us they raised any formal or informal comments or concerns with the practice manager to ensure the patient received a quick response.

The practice manager told us they aimed to resolve complaints in-house and invited patients to speak to them in person to discuss these. Information was available about organisations patients could contact if they did not wish to approach the practice directly or were not satisfied with the way the practice dealt with their concerns.

The practice had not received any complaints in the previous 12 months.

Are services well-led?

Our findings

Governance arrangements

The principal dentist had overall responsibility for the management and clinical leadership of the practice. The practice manager was responsible for the day to day running of the service. We saw staff had access to supervision and support for their roles and responsibilities.

The practice had policies, procedures and risk assessments in place to support the management of the service and to protect patients and staff. These included arrangements to monitor the quality of the service and make improvements.

The practice had information security arrangements in place and staff were aware of the importance of these in protecting patients' personal information.

Leadership, openness and transparency

Staff were aware of the duty of candour requirements to be open, honest and to offer an apology to patients should anything go wrong.

Staff told us there was an open, transparent culture in the practice. They said they were encouraged to raise any issues and they felt confident to do this. They told us the managers were approachable, would listen to their concerns and act appropriately.

The practice held meetings where staff could communicate information, exchange ideas and discuss updates. Meetings were run by different staff in rotation to help staff have a better understanding of each other's responsibilities and points of view. The practice had arrangements in place to share urgent information when necessary.

Learning and improvement

The practice had used quality assurance processes to encourage learning and continuous improvement. These included audits of dental care records, X-rays and infection prevention and control. Staff kept records of the results of these and put action plans in place where necessary. We saw the auditing process resulted in improvements.

The practice was committed to learning and improving and valued staff contributions. We saw evidence of learning from complaints, incidents, audits and feedback. Staff had annual appraisals, which helped identify individual learning needs.

The General Dental Council requires dental professionals to undertake continuing professional development as a requirement of their registration. Staff told us the practice provided support, training opportunities and encouragement for them to do so.

Practice seeks and acts on feedback from its patients, the public and staff

The practice had a system in place to seek the views of patients about all areas of service delivery through the use of regular patient surveys and a suggestion box.

Patients were encouraged to complete the NHS Friends and Family Test. This is a national programme to allow patients an opportunity to provide feedback on NHS services they have used.

We saw that the provider acted on patient feedback, for example, patients had requested a better selection of magazines and these had been provided in response.

The practice gathered feedback from staff through meetings, appraisals and informal discussions. Staff were encouraged to offer suggestions for improvements to the service and said these were listened to and acted on.