

Mr Shaun Seddon and Mrs Kathryn Seddon

Bromborough Dental Practice

Inspection Report

61 Woodyear Road
Bromborough
Wirral
CH62 6AY

Tel: 0151 327 4080

Website: www.bromboroughdentalpractice.co.uk

Date of inspection visit: 31 May 2017

Date of publication: 26/06/2017

Overall summary

We carried out this announced inspection on 31 May 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 with remote access to 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

Bromborough Dental Practice is close to the centre of Bromborough and provides treatment to patients of all ages on a privately funded basis.

Summary of findings

The provider has installed a ramp at the front entrance to facilitate access to the practice for wheelchair users. Car parking is available in the practice's own car park.

The dental team includes two dentists, a dental hygienist, and four dental nurses, one of whom is a trainee. The practice has two treatment rooms. The team is supported by a practice manager.

The practice is owned by a partnership and as a condition of registration must have in place a person registered with the Care Quality Commission as the registered manager. Registered managers have a 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 Bromborough Dental Practice is one of the partners.

We received feedback from 18 people during the inspection about the services provided. The feedback provided was positive about the practice.

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

The practice is open: Monday, Tuesday and Thursday 8.30am to 5.30pm, Wednesday 9.00am to 5.00pm, and Friday 9.00am to 12.30pm.

Our key findings were:

- The practice's clinical and non-clinical areas were clean and uncluttered.
- 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.
- The appointment system took patients' needs into account. Dedicated emergency appointments were available.
- The practice had a leadership structure. Staff felt supported and worked well as a team.
- The practice asked patients and staff for feedback about the services they provided.
- The practice had infection control procedures in place. Minor improvements were needed to these.
- The practice had systems in place to help them manage risk. There were some areas in which risk could be reduced further.
- The practice had staff recruitment procedures in place. Some improvements were needed to these.

There were areas where the provider could make improvements and should:

- Review the practice's recruitment policy and procedures to ensure character references for new staff as well as proof of qualifications, where appropriate, are requested and recorded suitably.
- Review the practice's system for assessing, monitoring and mitigating the various risks arising from undertaking of the regulated activities, specifically in relation to waste security externally, display of radiation warning signs, and staff immunity.
- Review the practice's infection control procedures and protocols, including in relation to the frequency of infection control audits, taking into account guidelines issued by the Department of Health in the Health Technical Memorandum 01-05: Decontamination in primary care dental practices, and The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance.
- Review the storage of dental care records to ensure they are all stored securely, specifically paper based dental care records.

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.

Staff received training in safeguarding and knew how to recognise the signs of abuse and how to report concerns.

The premises and equipment were clean and properly maintained.

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

The practice completed recruitment checks before employing staff but some improvements were needed to recruitment procedures. The provider assured us this would be addressed.

The practice had arrangements in place to assess risks in the practice and reduce these to an acceptable level but minor improvements were needed to reduce some risks further. The provider assured us this would be reviewed.

The practice followed recognised guidance for cleaning, sterilising and storing dental instruments but some deviations from the guidance were observed. The provider assured us these 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 arrangements in place where patients needed to be referred to other dental or health care professionals.

The practice supported staff to complete training relevant to their roles and had systems in place to monitor this.

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 friendly, attentive and caring. They said that they were given helpful explanations about dental treatment, and that their dentist listened to them.

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

Patients said staff treated them with dignity and respect.

No action



Summary of findings

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.

Staff considered patients' needs and made reasonable adjustments to meet these. This included providing facilities for patients with disabilities.

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 review 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, electronically and on paper. Electronic records were maintained securely but improvements were needed to the storage of paper records. The provider was aware of this and was reviewing this.

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 in place 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 received national patient safety and medicines alerts, for example, 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 safeguarding policies and procedures in place to provide staff with information about identifying, reporting and dealing with suspected abuse. Staff knew their responsibilities should they have concerns about the safety of children, young people or adults who are vulnerable due to their circumstances. Staff received safeguarding training and knew the signs and symptoms of abuse and neglect and how to report concerns.

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

We looked at the practice's arrangements for providing safe dental care and treatment. These included risk assessments which staff reviewed regularly. 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 procedures in place to help them employ suitable staff. These reflected the relevant legislation. We looked at staff recruitment records for the two most recently recruited staff and found these contained most of the prescribed information, but did not contain references or evidence of qualifications. The provider said these were not routinely requested which was in conflict with their policy. Staff recruitment records were not stored securely. The provider assured us these issues would be addressed.

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 had an overarching health and safety policy in place, underpinned by several specific policies and risk assessments to help manage potential risk. These covered general workplace and specific dental practice risks.

We observed that radiation warning signs were not displayed appropriately.

The provider had a system in place to ensure clinical staff had received appropriate vaccinations, including the vaccination to protect them against the Hepatitis B virus, and that the effectiveness of the vaccination was identified. People who are likely to come into contact with blood products, and are at increased risk of injuries from sharp instruments, should receive the Hepatitis B vaccination to minimise the risks of acquiring blood borne infections. Systems were in place to check staff immunity but the practice did not have a risk assessment in place in relation to staff working in a clinical environment when the vaccination had not been effective.

Clinical waste was stored in locked bins externally but access to the storage area was not restricted. The provider intended to review this.

Infection control

Are services safe?

The practice had an infection prevention and control policy and associated procedures in place to keep patients safe. They followed the 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 arrangements in place for transporting, cleaning, checking, sterilising and storing instruments in accordance with HTM 01-05, but there were a number of minor deviations from the guidance, for example, the autoclaves had no means of recording every sterilisation cycle. The provider assured us these would be addressed.

The records showed equipment staff used for cleaning and sterilising instruments was maintained appropriately.

Staff completed infection prevention and control training regularly as a team. One of the principal dentists carried out infection prevention and control audits once a year. We were not provided with an action plan to show how and identified issues were addressed.

The practice had procedures in place, in accordance with current guidance, to reduce the possibility of Legionella or other bacteria developing in the water systems. These were regularly reviewed.

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 accordance with the manufacturers' recommendations.

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

Radiography (X-rays)

The practice had arrangements in place to ensure X-ray procedures were carried out safely. 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. We noted the dentists carried out X-ray audits quarterly 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 supported patients to achieve better oral health in accordance with the Department of Health publication 'Delivering better oral health: an evidence-based toolkit for prevention'. The dentists told us they prescribed high concentration fluoride products if a patient's risk of tooth decay indicated this would help them. The dentists 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.

Staffing

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

The General Dental Council requires dental professionals to complete continuing professional development as a requirement of their registration. Staff told us the practice

provided training opportunities to assist them in meeting the requirements of their registration. The practice routinely monitored staff training to ensure essential training was completed each year.

Staff told us they had annual appraisals. These were used to discuss learning needs, general wellbeing and future professional development.

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.

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

Staff understood their responsibilities under the Mental Capacity Act 2005 when treating adults who may not be able to make informed decisions. The dentists were aware of the need to consider Gillick competency 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, caring and helpful. 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. Patients told us staff were kind and helpful when they were in pain, distress or discomfort.

Patients could choose whether they saw a male or female dentist.

Staff were aware of the importance of privacy and confidentiality. The layout of reception and waiting areas provided privacy when reception staff were dealing with patients. Staff told us that if a patient requested further privacy facilities were available. The reception computer screens were not visible to patients and staff did not leave patient information where other patients might see it.

Involvement in decisions about care and treatment

The dentists provided patients with information to help them make informed choices. Patients confirmed that staff listened to them, discussed options for treatment with them, and gave them time to think. Dentists described the conversations they had with patients to help them understand their treatment options.

Information about the range of treatments provided was available on the practice's website and in leaflet format in the waiting room.

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 account of patients' needs. Staff told us that patients requiring urgent appointments were seen the same day.

We saw that the dentists tailored appointment lengths to patients' individual needs and patients could choose from morning and afternoon appointments. Patients told us they had enough time during their appointment and did not feel rushed.

Tackling inequity and 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.

One of the treatment rooms was at ground floor level.

The practice was accessible to wheelchair users and a ramp at the front entrance was installed to facilitate access to the practice.

Patient toilet facilities were on the first floor accessed by a flight of stairs internally.

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 see patients experiencing pain or other dental emergencies on the same day and had appointments available for this. The website, information leaflet and answerphone provided contact details for patients requiring emergency dental treatment during the working day and when the practice was not open. 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 aimed to resolve these in-house where possible. Staff told us they raised any formal or informal comments or concerns with the principal dentists to ensure the patient received a quick response.

Information was available about organisations patients could contact should they not wish to complain to the practice directly or if they were not satisfied with the way the practice dealt with their concerns.

We looked at comments, compliments and complaints the practice received in the previous 12 months. We saw that the practice responded to concerns appropriately and discussed outcomes with staff to share learning and improve the service.

Are services well-led?

Our findings

Governance arrangements

The principal dentist and the registered manager had overall responsibility for the management and clinical leadership of the practice.

We saw staff had access to suitable 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 guide staff. We saw that policies, procedures and risk assessments were regularly reviewed to ensure they were up to date with regulations and guidance.

We saw the practice had arrangements in place to monitor the quality of the service and make improvements where required.

The practice had information security arrangements in place and staff were aware of the importance of these in protecting patients' personal information. We observed that paper dental care records were stored in unlocked cabinets. The provider was aware of the need to store these securely.

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 culture in the practice. They said they were encouraged to raise issues and they felt confident to do this. They told us the partners were approachable, would listen to their concerns and act appropriately.

The practice held regular meetings where staff could communicate information, exchange ideas and discuss updates. Where appropriate meetings were arranged to share urgent information.

Learning and improvement

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

We saw evidence of learning from complaints, incidents, audits and feedback.

Staff had annual appraisals, which helped identify individual learning needs. Staff told us the practice provided training opportunities for their on-going learning.

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.

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.