

Ascot Aesthetic Suite Limited

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Inspection report

Ascot Dental Clinic
3 Warren Row
Ascot
SL5 8HN
Tel: 07713190069

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Overall summary

We undertook a follow up focused inspection of Ascot Aesthetic Suite on 9 March 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 two specialist dental advisors.

We had previously undertaken a follow up focused inspection of Ascot Aesthetic Suite on 4 October 2022 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 Ascot Aesthetic Suite 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 areas where improvement was required.

As part of this inspection we asked:

- Is it well-led?

Our findings were:

Are services well-led?

Summary of findings

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 4 October 2022.

Background

Ascot Aesthetic is in Ascot and provides private dental care and treatment for adults and children.

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

The dental team includes 4 dentists, 1 dental nurse, 1 student dental nurse, 1 receptionist and a practice manager.

The practice has two treatment rooms of which one was in use.

During the inspection we spoke with the business partners.

We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

- Monday 9.00am to 5.30pm
- Tuesday 9.00am to 7.00pm
- Wednesday 9.00am to 5.30pm
- Thursday 9.00am to 5.30pm
- Friday 9.00am to 5.30pm

There were areas where the provider could make improvements.

They should:

- Take action to ensure the clinicians take into account the guidance provided by the College of General Dentistry when completing dental care records.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services effective?

No action 

Are services well-led?

No action 

Are services effective?

(for example, treatment is effective)

Our findings

At the inspection on 9 March 2023 we found the practice had made the following improvements to comply with the regulations:

- A closed-circuit television (CCTV) privacy impact assessment was available.
- Smoke detectors were tested appropriately.
- Annual emergency light testing and service was carried out.
- Emergency fire escape directional signage was no longer confusing.
- Evidence was available to demonstrate all staff had carried out fire safety, infection control and radiography (IR(ME)R training.
- Conduct in previous employment evidence was available for a newly recruited clinician.
- The mirror and coat hooks in the wheelchair accessible toilet were sited appropriately.

Are services well-led?

Our findings

(For example, are they well-managed and do senior leaders listen, learn and take appropriate action?)

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

At the inspection on 9 March 2023 we found the practice had made the following improvements to comply with the regulations:

During our visit we looked at a sample of patient care records. We found that clinicians did not routinely record the appropriate treatment information in patients care records, many of which were derived from a generic template.

Omissions included:

- Patient address details.
- Confirmation of medical history check
- Referral letters and details of the healthcare professional undertaking radiographs on behalf of the implant surgeon.
- Radiographic imaging and the subsequent reports used to guide diagnosis, treatment planning and delivery of care.
- Written consent forms.
- Treatment plans.
- Justification for prescribing antibiotics and type of antibiotics after implant placement.

The provider assured us they would address these as soon as practicably possible.