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Grovefield Dental Surgery & North Norfolk Dental Implant Centre

Inspection report

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Overall summary

We carried out this announced comprehensive inspection on 19 April 2023 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 practice was meeting the legal requirements in the Health and Social Care Act 2008 and associated regulations.

The inspection was led by a Care Quality Commission (CQC) inspector who was supported by a specialist dental advisor.

To get to the heart of patients' experiences of care and treatment, we always ask the following 5 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:

- The dental clinic appeared clean and well-maintained.
- The practice had infection control procedures which reflected published guidance.

Summary of findings

- Safeguarding processes were in place and staff knew their responsibilities for safeguarding vulnerable adults and children.
- Clinical staff provided patients' care and treatment in line with current guidelines.
- Staff provided preventive care and supported patients to ensure better oral health.
- Patients were treated with dignity and respect. Staff took care to protect patients' privacy and personal information.
- Staff felt involved, supported and worked as a team.
- Staff and patients were asked for feedback about the services provided.
- Recruitment procedures were not robust and inadequate checks were undertaken on new staff.

Background

Grovefield Dental Surgery & North Norfolk Dental Implant Centre provides NHS and private dental care and treatment for adults and children. In addition to general dentistry, the practice also offers dental implants and sedation services.

The practice has made reasonable adjustments to support patients with access requirements including ramp access and a ground floor treatment room.

The dental team includes 4 dentists, a dental hygienist, 3 dental nurses, a receptionist and a practice manager.

During the inspection we spoke with 2 dentists, the practice manager, 2 dental nurses and the receptionist. We looked at practice policies, procedures and other records to assess how the service is managed.

The practice is open Mondays to Fridays from 8.30 am to 5pm.

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

- Implement an effective recruitment procedure to ensure that appropriate checks are completed prior to new staff commencing employment at the practice.
- Take action to ensure that out of date glucagon is identified and strengthen the security of privately issued prescriptions.
- Take action to ensure dentists are aware of the guidelines issued by the British Endodontic Society for the use of rubber dam for root canal treatment.
- Improve the practice's protocols and procedures for the use of X-ray equipment in compliance with The Ionising Radiations Regulations 2017 and Ionising Radiation (Medical Exposure) Regulations 2017 and ensure all X-ray units have a rectangular collimator.

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?	No action ✓
Are services effective?	No action ✓
Are services caring?	No action ✓
Are services responsive to people's needs?	No action ✓
Are services well-led?	No action ✓

Are services safe?

Our findings

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

Safety systems and processes, including staff recruitment, equipment and premises and radiography (X-rays)

The practice had safeguarding processes and staff knew their responsibilities for safeguarding vulnerable adults and children. Information about protection agencies and how to report concerns was on display around the practice. Some staff had downloaded an NHS Safeguarding App to their phones, making it easily accessible.

The practice had infection control procedures which reflected published guidance.

The practice had procedures to reduce the risk of Legionella, or other bacteria, developing in water systems, in line with a risk assessment. Staff managed dental unit waterlines in line with guidance.

The practice had policies and procedures in place to ensure clinical waste was segregated and stored appropriately.

The practice appeared clean and there was an effective schedule in place to ensure it was kept clean.

The practice had a recruitment policy and procedure to help them employ suitable staff, which reflected the relevant legislation. Staff files we reviewed showed that the provider had not always obtained a recent Disclosure and Barring Services (DBS) check and references prior to employing a new member of staff. However, the day following our inspection, the practice manager sent us evidence to show that missing DBS checks had been applied for, for all staff.

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

The practice ensured equipment was safe to use, maintained and serviced according to manufacturers' instructions. The practice manager had arranged for fixed wire testing to be undertaken just prior to our inspection.

A fire safety risk assessment had been carried out in November 2022 and the practice manager was in the process of obtaining quotes for its recommendations to be undertaken.

The practice had arrangements to ensure the safety of the X-ray equipment and the required radiation protection information was available. However, we noted one X-ray unit that did not have a rectangular collimator attached to reduce radiation scatter.

Risks to patients

The practice had implemented systems to assess, monitor and manage risks to patient and staff safety. However, we noted there was no risk assessment in place for the dental hygienist who worked without chairside support, and the practice's sharps risk assessment could be improved to include all the different types of sharps used in the practice.

Emergency equipment and medicines were available and checked in accordance with national guidance, however we noted that the Glucagon stored in the fridge had become out of date and this had not been picked up by staff. Staff knew how to respond to a medical emergency and had completed training in emergency resuscitation and basic life support every year.

The practice had assessments to minimise the risk that could be caused from substances that were hazardous to health.

Information to deliver safe care and treatment.

Patient care records were complete, legible, kept securely and complied with General Data Protection Regulation requirements.

Are services safe?

The practice had systems for referring patients with suspected oral cancer under the national two-week wait arrangements.

Safe and appropriate use of medicines

The practice had systems for appropriate and safe handling of medicines, and prescription pads were held securely, although this needed to be strengthened for privately issued prescriptions.

Antimicrobial prescribing audits were carried out to ensure clinicians were following nationally recommended guidelines.

Track record on safety, and lessons learned and improvements.

The practice had systems to review and investigate incidents and accidents, and these were discussed at practice meetings.

The practice had a system for receiving and acting on national safety alerts.

Are services effective?

(for example, treatment is effective)

Our findings

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

Effective needs assessment, care and treatment

The practice had systems to keep dental professionals up to date with current evidence-based practice. We saw clinicians assessed patients' needs and delivered care and treatment in line with current legislation, standards and guidance supported by clear clinical pathways and protocols. However, we noted that patients risk level for tooth wear had not always been documented.

We found that the provision of dental implants and patient sedation was in accordance with national guidance.

Helping patients to live healthier lives.

The practice provided preventive care and supported patients to ensure better oral health.

The practice sold dental sundries such as interdental brushes, floss, mouthwash and toothpaste to help patients manage their oral health.

Consent to care and treatment

Staff obtained patients' consent to care and treatment in line with legislation and guidance. We found that staff understood their responsibilities under the Mental Capacity Act 2005 and Gillick Competency guidelines.

Monitoring care and treatment

The practice kept detailed patient care records in line with recognised guidance.

We saw evidence the dentists justified, graded and reported on the radiographs they took. The practice carried out regular radiography audits.

Effective staffing

Staff had the skills, knowledge and experience to carry out their roles. Staff told us did not feel rushed in their job.

Newly appointed staff had a structured induction and clinical staff completed continuing professional development required for their registration with the General Dental Council.

Co-ordinating care and treatment

Staff worked together and with other health and social care professionals to deliver effective care and treatment.

The dentists confirmed they referred patients to a range of specialists in primary and secondary care for treatment the practice did not provide.

Are services caring?

Our findings

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

Kindness, respect and compassion

Patient reviews we read mentioned the friendliness and helpfulness of staff, and that staff took the time to discuss treatment options with them. Staff described to us how they had recently helped one patient with autism undertake their treatment.

Staff told us they regularly contacted patients after complex treatment to check on their welfare and allowed extra appointment time for patients with special needs.

Staff had recently undertaken training in autism and learning disability awareness to increase their understanding of patients with these conditions.

Privacy and dignity

Staff were aware of the importance of privacy and the patient waiting areas were sited away from the reception desk to allow for greater privacy when answering telephone calls.

Staff password protected patients' electronic care records and backed these up to secure storage. Archived patients' records were stored securely.

Involving people in decisions about care and treatment

Staff helped patients to be involved in decisions about their care and gave patients clear information to help them make informed choices about their treatment.

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

The dentists explained the methods they used to help patients understand their treatment options. These included photographs, study models, and X-rays. Written information leaflets about denture care, tooth whitening, post tooth extraction care and jaw joint disorders were available to give to patients.

Are services responsive to people's needs?

Our findings

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

Responding to and meeting people's needs

The practice was accessible to wheelchair users via a portable ramp and there was a ground floor dental surgery. There was a portable hearing loop to assist patients who wore hearing aids and information could be produced in large print if needed. However, there was not an accessible toilet.

The provider had plans in place to change the layout the car park to make the premises more accessible to people with disabilities.

Staff had access to translation services for patient who did not speak or understand English.

Timely access to services

At the time of our inspection, the practice was unable to take on any new NHS or privately paying patients but would see nonregistered patients in pain for emergencies if needed. Emergency slots were available each day, and there was a rota system in place when the practice was closed. The practice opened on some Saturdays to help meet patient demand. Patient feedback surveys we reviewed indicated that respondents were able to get appointments at a time suited to them.

The practice offered an email and text appointment reminder service for patients.

Listening and learning from concerns and complaints

Information about how patients could raise their concerns was available in the waiting area and the receptionist spoke knowledgeably about how they would deal with a complaint.

Are services well-led?

Our findings

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

Leadership capacity and capability

A new manager had started at the practice in February 2023, and we found her to be knowledgeable and clearly committed to improve the service. She had already identified some of the shortfalls and was working hard to address them. Staff spoke highly of her, one describing her as 'on the ball'.

Culture

Staff stated they felt respected, supported and enjoyed their work. They described the principal dentist as approachable and understanding of their family commitments.

Communication systems in the practice were good, with regular monthly meetings for all staff, evidence of which we viewed.

Staff discussed their training needs during annual appraisals which they told us were useful.

Governance and management

Staff had clear responsibilities, roles and systems of accountability to support good governance and management.

The practice had a governance system which included policies, protocols and procedures that were accessible to all members of staff and were reviewed on a regular basis.

Engagement with patients, the public, staff and external partners

Patients were encouraged to complete a survey which asked them to comment on the helpfulness of staff, how well their treatment was explained to them and the availability of appointments. We noted high levels of patient satisfaction in the dozen or so completed surveys we viewed. This feedback was shared with staff at their monthly meetings.

Feedback from staff was obtained through meetings and informal discussions. Staff were encouraged to offer suggestions for improvements to the service and said these were listened to and acted on where appropriate. Their suggestion on changing the appointment booking system and to purchase an ultra-sonic bath had been implemented.

Continuous improvement and innovation

The practice had systems and processes for quality assurance and continuous improvement. These included audits of patient care records, radiography, disability access, hand washing, antimicrobial prescribing, and infection prevention and control. Staff kept records of the results of these audits and the resulting action plans and improvements. Audits results were discussed as part of the regular staff meetings so that learning could be shared.

The new practice manager told us she had recently introduced regular training days for staff to help ensure everyone was up to date with the latest guidance and to discuss ways to improve the service.