

Diss Dental Health Centre Limited

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Inspection report

3 & 4 Mount Street Diss IP22 4QG Tel: 01379642522

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Overall summary

We carried out this announced focused inspection on 13 September 2022 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 adviser.

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

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive?
- Is it well-led?

These questions form the framework for the areas we look at during the inspection.

Our findings were:

- The dental clinic was visibly clean and well-maintained.
- The practice had infection control procedures which reflected published guidance.
- Staff knew how to deal with medical emergencies and appropriate medicines and life-saving equipment were available.
- The practice had systems to help them manage risk to patients and staff.
- Safeguarding processes were in place and staff knew their responsibilities for safeguarding vulnerable adults and children.
- The practice had staff recruitment procedures which reflected current legislation.
- The clinical staff provided patients' care and treatment in line with current guidelines.
- Patients were treated with dignity and respect and staff took care to protect their privacy and personal information.
- Staff provided preventive care and supported patients to ensure better oral health.
- There was effective leadership and a culture of continuous improvement.
- Staff felt involved and supported and worked as a team.
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Summary of findings

- Staff and patients were asked for feedback about the services provided.
- Complaints were dealt with positively and efficiently.

Background

Diss Dental Health Centre provides both NHS and private dental care and treatment for adults and children. In addition to general dentistry, the practice offers patients dental implants and sedation services.

The practice has made reasonable adjustments to support patients with additional needs. There is full access to the practice via a ramp for people who use wheelchairs and those with pushchairs. Car parking for people with limited mobility is available directly outside the premises.

The dental team includes an administrator, six dentists, one dental therapist, three hygienists, seven nurses, and two reception staff. The practice has eight treatment rooms,

During the inspection we spoke with the practice principal, two dentists, the administrator and four dental nurses. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open Mondays to Thursdays from 8.30 am to 6 pm, and on Fridays from 8.30 am to 5 pm. Saturday appointments are also available.

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	\checkmark
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. Most staff had completed level three training and we noted information about protection agencies around the practice making it easily accessible to both patients and staff.

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.

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

We saw the practice was visibly clean and there was an effective cleaning schedule to ensure the premises were kept clean.

The practice had a recruitment policy and procedure to help them employ suitable staff. These reflected the relevant legislation. Staff records we reviewed demonstrated that appropriate pre-employment information had been obtained. Staff described their recruitment interview and induction to their role as extremely thorough.

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

The practice ensured equipment was safe to use and maintained and serviced according to manufacturers' instructions.

A fire risk assessment had been carried out in line with the legal requirements and the management of fire safety was effective.

The practice had arrangements to ensure the safety of the X-ray equipment and we saw the required radiation protection information was available.

Risks to patients

The practice had implemented systems to assess, monitor and manage risks to patient and staff safety.

Emergency equipment and medicines were available and checked in accordance with national guidance. Staff knew how to respond to a medical emergency and had completed training in emergency resuscitation and basic life support every year. Immediate Life Support training with airway management for staff providing treatment to patients under sedation was also completed.

The practice had risk assessments to minimise the risk that could be caused from substances that were hazardous to health. We noted that these were regularly reviewed and updated.

Safe and appropriate use of medicines

The practice had systems for appropriate and safe handling of medicines and prescriptions. Antimicrobial prescribing audits were carried out to ensure clinicians followed nationally recommended guidelines.

Information to deliver safe care and treatment

Are services safe?

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

Track record on safety, and lessons learned and improvements

The practice had implemented effective systems for reviewing and investigating incidents and accidents. Incident forms we reviewed were detailed with clear evidence of learning from them to prevent their recurrence.

There was 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. Staff demonstrated a good awareness of patient periodontal assessment and care.

The practice offered dental implants and we saw the provision of dental implants was in accordance with national guidance.

The practice offered conscious sedation for patients. The practice's systems included checks before and after treatment, emergency equipment requirements, medicines management, sedation equipment checks, and staff availability and training.

Helping patients to live healthier lives

The practice provided preventive care and supported patients to ensure better oral health in line with the Delivering Better Oral Health toolkit. We noted good information in patients' notes about their smoking and alcohol intake, and information about oral cancer awareness was on display in the waiting area.

Consent to care and treatment

Staff obtained patients' consent to care and treatment in line with legislation and guidance.

Staff understood their responsibilities under the Mental Capacity Act 2005 and the requirements of Gillick competency in relation to younger patients.

Monitoring care and treatment

The practice kept detailed dental 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 radiography audits every six months following current guidance and legislation.

Effective staffing

Staff had the skills, knowledge and experience to carry out their roles. Staff told us they had enough time for their role and did not feel rushed in their work.

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.

Are services caring?

Our findings

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

Kindness, respect and compassion

Staff were clear about the importance of emotional support needed by patients when delivering care and gave us specific examples of where they had gone out of their way to support patients.

Staff conveyed a good understanding of supporting more vulnerable members of society. All staff had recently undertaken an autism awareness course and described some of the practical ways they would support a patient with this condition to attend their appointment. The practice was part of a charity that provided free dental care for children affected by the 1986 Chernobyl nuclear disaster.

Privacy and dignity

Staff were aware of the importance of patient privacy and confidentiality. Although the reception area was not particularly private, staff had installed a TV screen displaying a virtual fish tank and played music to help distract waiting patients from overhearing staff and patients at the reception desk. Ground floor windows in treatment rooms had frosted glass in them to ensure patient privacy.

Staff password protected patients' electronic care records and backed these up to secure storage. Patients' paper dental care records were stored securely in locked cabinets.

Involving people in decisions about care and treatment

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

Staff described to us the methods they used to help patients understand treatment options discussed. These included the use of study models, X-ray images and treatment plans.

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 had made good adjustments for patients with disabilities which included ramp access, a fully accessible toilet, dental knee break chairs, a portable induction loop and access to reading glasses. Staff had carried out a disability access audit and had formulated an action plan to continually improve access for patients such as painting the toilet walls a different colour to make sanitary ware more visible to patients.

Timely access to services

At the time of our inspection, the practice was unable to take on any new NHS patients, but was liaising with NHS England to try and review this.

The practice opened until 6 pm four days a week, and appointments were available to private patients over the weekend. We were told that the average wait for a routine appointment was about two weeks. Specific emergency slots were available each day for any patent experiencing dental pain.

Listening and learning from concerns and complaints

The practice responded to concerns and complaints appropriately and discussed outcomes with staff to share learning and improve the service, evidence of which we viewed in practice meeting minutes. We reviewed the management of two recent complaints and noted they had been dealt with in a timely, empathetic and professional way.

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

The practice principal had overall responsibility for the clinical leadership and was well supported by an administrator who took on responsibility for day to day running of the practice and associated staff management tasks. We found senior staff to be knowledgeable, organised and experienced.

There was strong and effective leadership and an emphasis on continually striving to improve. Very minor shortfalls we identified both before and during our inspection were addressed immediately, demonstrating staff's commitment to improvement.

The information and evidence presented during the inspection process was clear and well documented.

We saw the practice had effective processes to support and develop staff with additional roles and responsibilities.

Culture

The practice demonstrated a transparent and open culture in relation to people's safety.

Staff stated they felt respected and valued, citing good communication, access to training and teamwork as the reasons. They told us the practice principal and administrator were approachable, supportive and listened to them.

Staff discussed their training needs during annual development reviews. They also discussed learning needs, general wellbeing and aims for future professional development.

Governance and management

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

The practice had a system of clinical governance in place which included policies, protocols and procedures that were accessible to all members of staff and were reviewed on a regular basis by the practice's administrator. There was a system in place to ensure staff had read and understood all policies.

We saw there were clear and effective processes for managing risks, issues and performance. The practice used an on-line dental compliance tool to assist in the management of the service.

Appropriate and accurate information

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

Engagement with patients, the public, staff and external partners

Staff gathered feedback from patients via clinician specific surveys and a suggestion box in the waiting room. We noted that a patient's suggestion for a coat hook on the back of a door had been implemented, demonstrating staff listened to patients' ideas.

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 acted on such as their need for a larger changing area.

Continuous improvement and innovation

Are services well-led?

The practice had systems and processes for learning, continuous improvement and innovation.

The practice had arrangements to ensure staff training was up-to-date and reviewed at the required intervals. Training records we reviewed showed that staff had completed all essential training.

The practice had quality assurance processes to encourage learning and continuous improvement. These included audits of dental care records, radiographs, hand hygiene, information governance, and infection prevention and control.

Staff kept records of the results of these audits and the resulting action plans and improvements.