

# Ashton Rix Limited

# The Dental Practice

## Inspection Report

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## Overall summary

We undertook a follow up focused inspection of The Dental Practice on 12 February 2020.

This inspection was carried out to review in detail 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 a specialist dental adviser.

At our inspection on 4 November 2019 we found the registered provider was not providing well led care and was in breach of regulation 17 and regulation 19 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 The Dental Practice on our website [www.cqc.org.uk](http://www.cqc.org.uk).

### As part of this inspection we asked:

- Is it safe?
- Is it well-led?

When one or more of the five 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 area where improvement was required.

### Our findings were:

#### Are services safe?

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

#### Are services well-led?

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 November 2019.

#### Background

The Dental Practice is in High Wycombe and provides private treatment to adults and children.

There is level access for people who use wheelchairs and those with pushchairs. Car parking spaces, including space for blue badge holders, are available outside the practice.

The dental team includes one dentist, one specialist endodontist, one oral surgeon, three dental nurses, three dental hygienists and a practice manager. The practice has two treatment rooms.

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.

# Summary of findings

During the inspection we spoke with one dentist 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, Tuesday and Thursday 8.00am – 5.00pm
- Wednesday 1.00pm – 8.00pm

## **Our key findings were:**

- The provider had effective staff recruitment procedures.
- The provider had systems to help them manage risk to patients and staff.
- The practice had effective management leadership.

# Summary of findings

## The five questions we ask about services and what we found

We asked the following question(s).

### **Are services safe?**

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

**No action** ✓

### **Are services well-led?**

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

**No action** ✓

# Are services safe?

## Our findings

At our previous inspection on 4 November 2019 we judged the provider was not providing safe care and was not complying with the relevant regulations.

We told the provider to take action as described in our requirement notice.

At the inspection on 12 February 2020 we found the practice had made the following improvements to comply with the regulation:

Recruitment procedures were established and operated effectively to ensure only fit and proper persons were employed.

- The practice introduced a checklist to complete when recruiting staff. We looked at three staff recruitment records which showed the checks carried out met with current legislation.

# Are services well-led?

## Our findings

At our previous inspection on 4 November 2019 we judged the provider was not providing well-led care and was not complying with the relevant regulations.

We told the provider to take action as described in our requirement notice.

At the inspection on 12 February 2020 we found the practice had made the following improvements to comply with the regulation:

Effective systems and processes were established to ensure good governance in accordance with the fundamental standards of care. Specificity management of fire safety, legionella safety, electrical safety, radiography and staff appraisal.

- A fire risk assessment had been undertaken and resulting action plan followed. This included testing fire alarms and emergency lighting.
- A legionella risk assessment was carried out in November 2019. The resulting action plan was completed in full. This included water temperature monitoring.

- An electrical installation check was completed and the fixed wiring was deemed to be satisfactory.
- Radiography audits were carried out for all relevant staff.
- Appraisals were underway for all of the people who worked at the practice. This included self-employed hygienists and visiting clinicians.

### **The practice had also made further improvements:**

- The practice took into account the guidance provided by the Faculty of General Dental Practice. An audit was carried out in November 2019 which confirmed this.
- The practice had arrangements in place to support patients who experienced sight or hearing loss. The practice purchased a hearing loop which was present and working in the reception.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulations when we inspected on 12 February 2020.