

Regency Dental Practice (Cheltenham) Limited

Regency House Dental Practice

Inspection Report

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Overall summary

We carried out an announced responsive follow up inspection on 23 May 2017 to ask the practice the following key questions; Are services well-led?

We had undertaken an announced comprehensive inspection of this service on 5 December 2016 as part of our regulatory functions where a breach of legal requirements was found.

Our findings at this inspection were:

Are services well-led?

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

Background

Regency House Dental Practice is set in a Grade 2 listed regency town house building in central Cheltenham. There are a number of stairs to ascend outside the building with hand rails on both sides.

The practice comprises a reception area and two waiting rooms, one treatment room on the ground floor one treatment room on the first floor and one treatment room on the top floor, a toilet and office space. Parking is

available nearby in public car parks. As the practice is not accessible to patients with disabilities, the provider has an arrangement with the local community dental service to see patients who cannot access the practice.

The surgery provides a full range of private dental services to patients of all ages including preventative treatments, implants and full mouth reconstructions on a private basis to adults. Fees are displayed in information leaflets available in the practice for patients and on the website.

The opening times are: Monday, Tuesday and Thursday 8.30am-5.15pm; Wednesday 8.30am-7.00pm; Friday 9.00-1.00pm. The practice is closed at weekends. The Out of Hours number is available from the telephone answering service and on the practice website. The practice is staffed by three dentists; one dental therapist and one dental hygienist; two qualified dental nurses, one of which is the practice manager; three trainee dental nurses and a receptionist.

The practice is registered with the Care Quality Commission (CQC) as a limited company and the practice manager is the registered manager. Like registered

Summary of findings

providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the practice is run.

Patients commented staff put them at ease and listened to their concerns. They also reported they felt proposed treatments were fully explained to them so they could make an informed decision which gave them confidence in the care provided. Patients we spoke with and the comment cards reviewed corroborated these comments.

Our key findings were:

- The practice was well-led by an empowered practice manager and the principal dentist.
- The practice was clean and well maintained.
- Infection control procedures were robust and the practice followed published guidance.
- Staff had been trained to handle emergencies and appropriate medicines and life-saving equipment were readily available in accordance with current guidelines.
- The practice had systems in place manage risks.
- Fire management policies had been reviewed and fire risk assessments completed together with regular checks of the systems.
- There were systems in place to check all equipment had been serviced regularly, including the air compressor, autoclave, fire extinguishers, oxygen cylinder and the X-ray equipment.
- Staff understood and received safeguarding training and knew how to recognise signs of abuse and how to report it.
- Safe recruitment of staff was in place.
- Staff felt involved, supported and worked well as a team.
- There were sufficient numbers of suitably qualified staff who maintained the necessary skills and competence to support the needs of patients.
- The practice had implemented a performance review system and established an effective process for the on-going assessment and supervision of all staff.
- Treatment was well planned and provided in line with current guidelines.
- Patients were treated with dignity and respect and confidentiality was maintained.
- The appointment system met patients' needs.
- The practice sought feedback from staff and patients about the services they provided.
- Complaints were responded to in an efficient and responsive manner.
- The storage of records relating to people employed and the management of regulated activities was in accordance with current legislation and guidance.
- The practice protocols for medicines management had been reviewed and ensured all medicines were managed and dispensed in accordance with current legislation.
- Opportunities for training and learning were available for staff and records of training were maintained.

All products identified under the Control of Substances Hazardous to Health (COSHH) 2002 Regulations had been risk assessed and stored securely.

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 well-led?

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

The practice had arrangements to ensure the smooth running of the service. These included systems for the practice team to discuss the quality and safety of the care and treatment provided. There was a clearly defined management structure and staff felt supported and appreciated in their own particular roles.

Arrangements were in place to support communication about the quality and safety of services.

The practice regularly 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 well-led?

Our findings

Since the last inspection the provider had taken action to address the areas of non-compliance and our findings are outlined below.

Governance arrangements

During the inspection, we reviewed the clinical governance file. The practice manager was responsible for the day to day running of the service. She took the lead role for individual aspects of governance such as complaints, risk management and audits within the practice. We were shown an effective management system had been implemented which sought to ensure there were systems to monitor the quality of the service such as risk assessments, staff training, the management of medicines and the safe storage of substances hazardous to health under the Control of Substances Hazardous to Health (COSHH) regulations.

The practice manager told us they had nearly completed their management course and this had benefitted the running of the practice as they had been able to implement robust systems and processes to manage risks and quality improvement of the service. The practice manager demonstrated to use the effectiveness of the systems.

Staff were supported, managed and were clear about their roles and responsibility. We were told staff met their professional standards and followed their professional code of conduct.

There was a range of policies and procedures in use at the practice. We saw they had systems in place to monitor the quality of the service and to make improvements.

The practice had an approach for identifying where quality or safety was being affected and addressing any issues. Health and safety and risk management policies and were in place and we saw a process to ensure the safety of patients and staff members. For example, we saw risk assessments relating to fire safety and the use of equipment which were effective and current.

Leadership, openness and transparency

Staff were aware of the duty of candour requirements to be open, honest and to offer an apology to patients if anything went wrong.

Staff told us there was an open, no blame culture at the practice. They said the practice manager encouraged them to raise any issues and felt confident they could do this. They knew who to raise any issues with and told us the practice manager was approachable, would listen to their concerns and act appropriately. The practice manager discussed concerns at staff meetings and it was clear the practice worked as a team and dealt with issues professionally.

The practice held meetings where staff could raise any concerns and discuss clinical and non-clinical updates. Immediate discussions were arranged to share urgent information. Minutes of meetings seen demonstrated staff meetings were held regularly and there was a clear system of communication of these minutes which ensured all staff working at the practice received the same information.

Learning and improvement

The practice had implemented a system of quality assurance processes to encourage learning and continuous improvement. These included audits of dental care records, X-rays and infection prevention and control. They had clear records of the results of these audits and the resulting action plans and improvements.

The principal dentist and practice manager showed a commitment to learning and improvement and valued the contributions made to the team by individual members of staff. The practice manager had implemented a system for regular appraisal of the whole staff team annually. They discussed learning needs, general wellbeing and aims for future professional development. We saw evidence of completed appraisals in the staff folders.

Staff told us they completed mandatory training, including medical emergencies and basic life support, each year. The General Dental Council requires clinical staff to complete continuing professional development. Staff told us the practice provided support and encouragement for them to do this.

Practice seeks and acts on feedback from its patients, the public and staff

The practice had systems in place to involve, seek and act upon feedback from staff and patients who used the service. We saw a patient feedback survey was in progress and we confirmed the practice responded to feedback.



Are services well-led?

The practice had compliments slips in the waiting area. Compliments seen included the following words and phrases: “excellent care and treatment; Professional and courteous; kind and caring”.