

# Review of compliance

<p>Hurlfield Limited Castle Dental Practice</p>	
<p><b>Region:</b></p>	<p>Yorkshire &amp; Humberside</p>
<p><b>Location address:</b></p>	<p>309 City Road Sheffield South Yorkshire S2 5HJ</p>
<p><b>Type of service:</b></p>	<p>Dental service</p>
<p><b>Date of Publication:</b></p>	<p>February 2012</p>
<p><b>Overview of the service:</b></p>	<p>Castle Dental Practice provides dental treatment to both NHS and private patients. The practice has a contract with Sheffield PCT to offer NHS care to children and adults, subject to availability. The practice has four dentists. The surgery is modern, there is a reception area, waiting room, patient toilet and baby changing facilities. There is wheelchair access and induction loop. Disabled parking and patient parking is</p>

	provided at the rear of the building.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Castle Dental Practice was meeting all the essential standards of quality and safety.**

The summary below describes why we carried out this review, what we found and any action required.

### Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

### How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 31 January 2012, talked to staff and talked to people who use services.

### What people told us

We spoke privately with four people who were attending the practice for check ups or treatment. All four people told us that they were "very pleased" and "more than satisfied" with all aspects of the service. They told us that staff were "very friendly" and "professional". People told us they had "no grounds for complaint". Everyone commented on the cleanliness of the practice. They said they regularly saw staff making sure that the surgery was clean, tidy and hygienic.

### What we found about the standards we reviewed and how well Castle Dental Practice was meeting them

#### **Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run**

People understand the treatment available to them and are provided with enough information to enable them to make an informed choice. People's privacy, dignity and confidentiality is recognised and maintained.

#### **Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights**

The delivery of treatment is effective, appropriate and flexible to meet individual needs. The service uses appropriate and accepted guidance in a consistent way.

#### **Outcome 07: People should be protected from abuse and staff should respect their human rights**

People who use the service are protected from abuse. Staff are aware of their responsibilities with regard to safeguarding and have had some training on how to identify and react to potential abuse.

**Outcome 08: People should be cared for in a clean environment and protected from the risk of infection**

People who use the service are protected by effective arrangements based on national guidance for the prevention and control of risks from infection.

**Other information**

Please see previous reports for more information about previous reviews.

**What we found  
for each essential standard of quality  
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

**Compliant** means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

## Outcome 01: Respecting and involving people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

- \* Understand the care, treatment and support choices available to them.
- \* Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- \* Have their privacy, dignity and independence respected.
- \* Have their views and experiences taken into account in the way the service is provided and delivered.

### What we found

#### Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

#### Our findings

##### What people who use the service experienced and told us

We asked people if they understood the care and treatment they were receiving and if they had been given choices and different options. One person told us: "This dentist is much better than the other person I used to go to. He takes his time and explains what he's doing." Another person said "I don't like visiting the dentist but they are all nice and make me feel relaxed." All people that were spoken to said that staff always took into consideration their privacy and dignity. One person said "Staff are very good, I have never heard them speak inappropriately, they are always professional." Another person said "I always recommend this practice to others, as I can't fault anything." And "I've never needed to complain but if I was concerned about anything I would go straight to the dentist or reception staff."

##### Other evidence

In the reception and waiting areas we saw that there was a variety of useful and relevant information for patients. For example the complaints procedure, costs of treatments, opening hours and emergency contact details. There was also an area for children to play and toys were provided. Staff told us this helped children to enjoy their visit to the dentist.

The dentist explained to us how people were encouraged to be involved in their care and treatment. We observed that people were given appropriate time for their treatment

and consultations. Throughout the inspection we saw that all staff spoke to people in a respectful and friendly manner.

We looked at a sample of treatment plans. These showed what treatment people had received and the cost of the treatment. Information about people's medical history was recorded and reviewed each time a new course of treatment began. People were asked sign to confirm that they understood their treatment and that they had consented to the treatment. Accompanying adults signed the plans for treatments provided to children. We asked the provider if they had conducted a 'customer satisfaction survey'. They told us that they did this each year. We were shown the surveys that had recently been completed. The registered manager told us when all the surveys had been returned a report would be written to summarise the outcome. The report would be displayed for patients to see. The results of the returned survey's were very positive. People had been very complementary about the way the service was run and the attitude and professionalism of the staff. People had said, "I have always been treated with courtesy and kindness." And "You are all a credit to your chosen profession and we as patients are extremely fortunate to have such a practice."

### **Our judgement**

People understand the treatment available to them and are provided with enough information to enable them to make an informed choice. People's privacy, dignity and confidentiality is recognised and maintained.



## Outcome 04: Care and welfare of people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

### What we found

#### Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

#### Our findings

##### What people who use the service experienced and told us

We spoke to four people who were at the surgery for check up's or follow on treatment. All four people spoke very highly about the care, support and treatment they were given by the practice. They told us "The dentist told me I needed a tooth taken out, I am a nervous patient and the dentist managed to make me feel comfortable". "My teeth are so much better since I joined this practice. This has made me feel much more confident. "I have complete faith in the dentist and the treatment that I get here."

We spoke to one person who was in the surgery with their small child. They told us, "My daughter wouldn't allow the dentist to look in her mouth at our first visit, so the dentist suggested we kept bringing her in so she got used to the surgery. She's now visited several times and today she has allowed the dentist to check her teeth." The child told us that she "liked the dentist", and proudly showed us the badge she had been given as a reward. Her mother said she had also been given a new toothbrush.

##### Other evidence

Records showed and people confirmed to us that they were involved in the planning of their treatment. We looked at a sample of patient records during the visit. Paper and electronic records were both being kept. Information seen in records showed that each person was treated as an individual and a variety of treatment options were available to everyone.

Emergency and first aid equipment was seen to be available within the practice. Staff interviewed were aware of where the equipment was and had received training in how and when it should be used. We saw evidence that equipment such as the defibrillator was checked and maintained as required.

The practice had a file which contained the services policies and procedures, staff training information, contracts for maintenance of equipment and other required information. This showed us that the provider kept up to date with published guidance and managed risk.

Staff told us that staff meetings were held each month. This time was used to complete updated and refresher training in such things as safeguarding and emergency procedures. Training for staff was also provided through the British Dental Association (BDA) best practice scheme.

**Our judgement**

The delivery of treatment is effective, appropriate and flexible to meet individual needs. The service uses appropriate and accepted guidance in a consistent way.

## Outcome 07: Safeguarding people who use services from abuse

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

### What we found

#### Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

#### Our findings

##### What people who use the service experienced and told us

We asked four people if they felt safe at the service. Everyone said "yes" and one person added "I always feel safe here and don't panic."

##### Other evidence

The practice had child and adult protection policies in place. Staff were aware of the content of the policies and where they were stored at the practice. Staff were aware of their roles and responsibilities with regards to protecting children and people from abuse or the risk of abuse. They were able to provide us with a range of potential signs of abuse and knew how to react to these should the situation arise.

We spoke with the provider who confirmed that there was a adult safeguarding and child protection lead at the practice. The provider said staff within the practice had received safeguarding training. At a team meeting the safeguarding lead had held a training session for all other staff to pass on their knowledge. We asked the staff about their understanding of the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguard's (DOL's). Although the staff had heard about this they were unsure about what it meant. We suggested to the provider that they arranged training for staff in these areas.

Criminal Records Bureau (CRB) checks had been completed for all staff that worked within the practice. We saw evidence of the completed checks.

The practice had a complaints procedure in place. This was displayed in the patients waiting room. Staff spoken to were aware of the complaints policy and procedure.

There had been no recent complaints made to the service and there were no outstanding complaints that remained unresolved.

**Our judgement**

People who use the service are protected from abuse. Staff are aware of their responsibilities with regard to safeguarding and have had some training on how to identify and react to potential abuse.

## Outcome 08: Cleanliness and infection control

### What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

### What we found

#### Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

#### Our findings

##### What people who use the service experienced and told us

The people we spoke with said that the practice was always clean. They confirmed that the dentists and nurses always offered them glasses to protect their eyes, should they wish to use these. People told us that dental practitioners wore gloves, masks and aprons when it was appropriate to do so. They told us they see staff washing their hands before, during and after treatments. They said that they thought the treatment rooms were very clean and hygienic. One person added "The surgery always smells nice and is kept very clean."

##### Other evidence

During our discussions with staff it was clear that they were all very aware of, and were implementing government guidance on decontamination within dental practice. All the staff we spoke with understood the importance of infection prevention and control, including decontamination, and could clearly describe their own roles and responsibilities within this area.

The practice had policies and procedures in place for the prevention and control of infection. Personal protective equipment (PPE) was available for staff when carrying out dental procedures.

Each surgery had designated dirty and clean areas. Dental instruments, once used, were placed in the 'dirty box' and sprayed with sanitizer. The box was then sealed prior to transporting the instruments to the decontamination room. During our inspection we observed that clinical areas were clean and tidy.

In 2009 the Department of Health published Health Technical Memorandum 01-05: Decontamination in primary care dental practices 2009. This provides guidance for the decontamination of dental instruments and infection control in general dental practice. The practice had a dedicated decontamination room. The room was found to be laid out

in accordance with this guidance. There were guidance documents placed on the walls at each stage of the decontamination process and coloured stickers clearly showed the flow of the cleaning process to be followed.

A dental nurse showed us, and explained to us, the process for managing used instruments within the decontamination room to ensure clear and separate areas for clean and dirty instruments. This room is utilised to ensure that all the used equipment is cleaned and sterilised between each use. The dental nurses wash and rinse the instruments, check them for debris and use the autoclaves to sterilise them to ensure they reach the approved level of sterilisation.

Cleaning schedules, daily, weekly, monthly and annual checklist were in place within each of the treatment areas. Preparations were undertaken in the morning prior to using the treatment rooms.

We saw that the treatment rooms were cleaned, by the dental nurses between each person, using appropriate equipment to agreed standards.

There was a supply of gloves, aprons, wipes, paper towels and hand gel available within the treatment rooms.

Legionella risk assessments were in place and checked on a regular basis; appropriate waste disposal arrangements were also in place. Validation of technical dental equipment such as autoclaves and x-ray machines was in place and recorded.

### **Our judgement**

People who use the service are protected by effective arrangements based on national guidance for the prevention and control of risks from infection.

# What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

**Improvement actions:** These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action:** These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

## Information for the reader

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