Inspection Report

We are the regulator: *Our job is to check whether hospitals, care homes and care services are meeting essential standards.*

Luton Dental Centre

1A Peel Street, Luton, LU1 2QR

Date of Inspection: 14 November 2012

Date of Publication: December 2012

We inspected the following standards as part of a routine inspection. This is what we found:

Respecting and involving people who use services	✓ Met this standard
Care and welfare of people who use services	✓ Met this standard
Cleanliness and infection control	✓ Met this standard
Supporting workers	✓ Met this standard
Complaints	✓ Met this standard

Details about this location

Registered Provider	Luton Centre Limited
Registered Manager	Dr. Sab Bhandal
Overview of the service	Luton Dental Centre is a practice from which eight associate dentists work. They mainly provide primary dental care via the NHS to adults and children. They also provide some private treatments as required.
Type of service	Dental service
Regulated activities	Diagnostic and screening procedures Surgical procedures Treatment of disease, disorder or injury

Contents

When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

	Page
Summary of this inspection:	
Why we carried out this inspection	4
How we carried out this inspection	4
What people told us and what we found	4
More information about the provider	4
Our judgements for each standard inspected:	
Respecting and involving people who use services	5
Care and welfare of people who use services	6
Cleanliness and infection control	7
Supporting workers	8
Complaints	9
About CQC Inspections	10
How we define our judgements	11
Glossary of terms we use in this report	13
Contact us	15

Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We reviewed all the information we have gathered about Luton Dental Centre, looked at the personal care or treatment records of people who use the service, carried out a visit on 14 November 2012 and talked with people who use the service. We talked with staff.

What people told us and what we found

During our visit to Luton Dental Centre on 14 November 2012 we spoke with six people who were waiting to see one of the dentists. We also looked at a variety of comments made by people as part of the centres quality surveys. The comments were all very positive and included, "I am really happy with this practice" and "Everyone does a great job." We observed reception staff helping people to make appointments that best suited them in an effort to reduce the number of people who failed to attend their appointments.

We spoke with people who told us they felt involved in their treatment. One person said, "You can ask as many questions as you like and they will answer them." The records that we looked at and the conversations we had with people confirmed that treatment options were discussed with the person using the service.

The centre had sufficient processes in place to ensure that treatment was delivered safely. All areas of the centre were clean and tidy and there were robust infection control processes in place to ensure people were treated safely.

People told us that they would be confident to make a complaint if it were necessary and we saw that people were given the appropriate information to do so.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Respecting and involving people who use services ✓ Met this standard

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

Our judgement

The provider was meeting this standard.

Peoples' privacy and dignity was respected and their views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

Reasons for our judgement

During our visit to Luton Dental Centre on 14 November 2012 we spoke with six people who were waiting to see one of the dentists. Everyone we spoke with was positive about the service they received and could not think how it could be improved. One person said, "I really appreciate this surgery, everyone is so helpful". We also looked at a number of comments made about the service through formal quality satisfaction surveys. The comments were all very positive and indicated that people felt respected and involved in their treatment because they were given information by the dentist. We looked at six electronic records which confirmed that any treatment options were discussed with people using the service.

We observed the reception team helping people to make appointments at times that best suited them and ensuring they understood their treatment options. In the reception area we saw information leaflets. These told people about the staff team, surgery times and available treatments. The practice manager told us that the staff team could speak a variety of languages and that a translation service was available via the Primary Care Trust (PCT)
In addition people were given the opportunity to write comments about the service and leave them in a box. The centre had also set up a patients forum which met to discuss any improvements people thought could be made to the service provided. This ensured that everyone visiting the surgery fully understood the services that were offered and had the opportunity to influence how the service was provided.

The centre was fully accessible to everyone, including those with mobility needs as a proportion of the 11 surgeries were on the ground floor.

Care and welfare of people who use services ✓ Met this standard

People should get safe and appropriate care that meets their needs and supports their rights

Our judgement

The provider was meeting this standard.

People experienced treatment that met their needs and protected their rights.

Reasons for our judgement

The people that spoke with and the comments we saw indicated that people were satisfied with the care that they received. One person leaving the surgery following treatment said to us, "You need to know, the dentist is excellent, the nurses amazing and the reception staff are helpful."

We looked at the electronic records for six people. These showed that following examination the dentist recorded in detail the condition of people's teeth, the treatment options available to them and the results of the soft tissue screening checks carried out. A treatment plan was produced and people were asked to sign a copy as their agreement to the proposed treatment. Treatment charges were clearly indicated. The provider had robust systems in place to ensure that all of the dentists working out of this centre provided a consistent level of treatment. This showed that peoples' needs were assessed and their treatment was planned and delivered in line with their individual treatment plan.

People were asked to complete or update their medical history, including details of any medications they were taking at the start of each course of treatment. This ensured that the dentist considered any possible implications for the treatment being carried out and peoples' needs were assessed and treatment was planned and delivered in line with their individual treatment plan.

We observed the equipment, including oxygen and medication kept by the surgery for use in an emergency was easily accessible. We saw records that confirmed the medications and oxygen cylinders were regular checked to confirm they were ready for use. We saw that all of the staff had current certificates to confirm that they had been trained to deal with medical emergencies, including Cardio Pulmonary Resuscitation (CPR). This showed that the service had systems and processes to ensure the staff were ready to deal with an unforeseen emergency. The staff told us they had successfully responded to two non related medical emergencies the week before our visit.

Cleanliness and infection control ✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People were protected from the risk of infection because appropriate guidance had been followed.

Reasons for our judgement

When we visited this centre we saw all the areas, including clinical, non-clinical and storage areas, were clean, tidy and well equipped.

Each treatment room had clearly divided clean and dirty areas and a dental nurse explained the process for cleaning instruments and preparing the room for the next person to us. We saw records that monitored the infection control practices and ensured that standards were being maintained.

There was a good supply of dental equipment, which ensured that there was always an adequate supply of clean equipment. This allowed the required time for the sterilisation process, even during busy periods. We saw that sterilised equipment was correctly bagged, labelled and stored ready for use. There were systems in place to ensure that sterilised equipment was used in rotation and within the effective date. We saw records that confirmed staff had completed infection control training and waste materials were disposed of correctly to prevent contamination.

In the clinical areas we saw that a variety of protective equipment such as eye shields, gloves and bibs were available.

Supporting workers ✓ Met this standard

Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver treatment safely and to an appropriate standard.

Reasons for our judgement

During our visit we spoke with the provider, the practice manager, the business development manager, dentists, dental nurses and reception staff. They all told us that they were well supported to attend a variety of training opportunities to help them develop professionally. Personal files indicated that training was on-going and offered at regular intervals at the five centres owned by the provider. We saw documentation and certificates that confirmed staff undertook sufficient training to meet the needs of their registration bodies and had therefore received appropriate professional development.

The practice manager kept a file for each member of staff that detailed the training they had undertaken and when it was due to be refreshed. We also saw that training plans had been developed following staff appraisals. All training essential for an individual's role including cardio-pulmonary resuscitation was current and many staff had completed training to supplement their role and support them to provide specialist treatment. This showed that the provider created an environment where clinical excellence was observed.

Staff teams, for example the nurses, the dentists, the reception staff met together weekly to discuss issues relating to their speciality; once a month they reviewed a set of policies to ensure they were current. The whole staff team met together at least every three months and any training issues or policy changes were bought to these meetings.

Complaints ✓ Met this standard

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

There was an effective complaints system which staff were familiar with.

Reasons for our judgement

On display in the surgery we saw a notice that told people they could complain to or about the service and how this would be dealt with. The procedure was robust and encouraged people to tell staff about anything they were unhappy with before they left the surgery. It also told people how to make a formal complaint and when to expect a response. There was information for people to follow if they were not satisfied with the initial response and how it could be taken to the next tier.

The centre had a complaints log and the complaints manager recorded any complaints made to the service, how the complaint was investigated and the response sent to the complainant. The provider told us that in addition to writing to people in response to a complaint the complaints manager would be available to meet face-to face. We saw evidence that staff routinely contacted people after any treatment that was extensive to ensure they were recovering correctly. The provider told us that this courtesy call reassured people and also meant they could be advised to return if their recovery was not as expected.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of dentists and other services at least once every two years. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ **Met this standard**	This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.
✖ **Action needed**	This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.
✖ **Enforcement action taken**	If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. This could be a minor, moderate or major impact.

Minor impact – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)
Consent to care and treatment - Outcome 2 (Regulation 18)
Care and welfare of people who use services - Outcome 4 (Regulation 9)
Meeting Nutritional Needs - Outcome 5 (Regulation 14)
Cooperating with other providers - Outcome 6 (Regulation 24)
Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)
Cleanliness and infection control - Outcome 8 (Regulation 12)
Management of medicines - Outcome 9 (Regulation 13)
Safety and suitability of premises - Outcome 10 (Regulation 15)
Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)
Requirements relating to workers - Outcome 12 (Regulation 21)
Staffing - Outcome 13 (Regulation 22)
Supporting Staff - Outcome 14 (Regulation 23)
Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)
Complaints - Outcome 17 (Regulation 19)
Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

Contact us

Phone:	03000 616161
Email:	enquiries@cqc.org.uk
Write to us at:	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA
Website:	www.cqc.org.uk

Copyright Copyright © (2011) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.