

Review of compliance

Gowers Dental Surgery Limited
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Region: South East

Location address: 19 Clarendon Road
Southsea
Hampshire
PO5 2ED

Type of service: Dental service

Date of Publication: October 2012

Overview of the service: Gowers Dental Practice provides private and NHS dental care from a surgery close to the centre of Southsea. There are three dental rooms and two dentists practising from the surgery who are supported by a team of dental nurses, a dental hygienist and a decontamination specialist.

Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Gowers Dental Surgery Limited was meeting all the essential standards of quality and safety inspected.

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 26 September 2012, checked the provider's records, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

We spoke with three people who were attending the dental practice on the day of our visit. They all told us that they had no problems in making appointments. One person told us how helpful the receptionist had been in arranging a convenient time for them. People using the dental surgery were very positive about the dentists and told us that their treatment options and costs were explained to them. People told us that the dental staff respected their privacy and dignity. They were able to book appointments at times convenient to them and were seen promptly by dental staff when they arrived at the practice.

What we found about the standards we reviewed and how well Gowers Dental Surgery Limited 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's privacy, dignity and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care. The provider was meeting this standard.

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

People experienced care, treatment and support that met their needs and protected their rights. The provider was meeting this standard.

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

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. The provider was meeting this standard.

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

People were protected from the risk of infections because appropriate guidance had been followed. People were cared for in a clean, hygienic environment. The provider was meeting this standard.

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

There were enough qualified, skilled and experienced staff to meet people's needs. The provider was meeting this standard.

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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that 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.

A moderate impact means that 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.

A major impact means that 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.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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 spoke with three patients who told us that they were happy with the service provided. People using the dental surgery were very positive about the dentists and told us that their treatment options and costs were explained to them. People told us that the dental staff respected their privacy and dignity.

Other evidence

People who use the service understood the care and treatment choices available to them. We spoke with members of staff who told us that after each examination, the treatment options were discussed with patients and details of this were provided to the patients. If patients decided to proceed with the treatment a copy of the plan was signed by the patient and given to the dentist. For example, we found that relevant information about the surgery and dental health were posted in the dental surgery included. This included information about emergency appointments and how to complain.

People's diversity, values and human rights were respected. All treatments and consultations were conducted in the privacy of the treatment room. The surgery had a chair lift that enabled people with disability including wheelchair users to access the clinic.

People who use the service were given appropriate information and support regarding their care and treatment. For example, there were patient leaflets on dental hygiene, smoking cessation, oral cancers, and others. During our inspection, we found that patients were asked to provide feedback about the service and that they were encouraged to share their comments.

Our judgement

People's privacy, dignity and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care. The provider was meeting this standard.

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 with three patients who had received treatment from Gowers Dental Practice and they told us that they were satisfied with the treatment. Patients told us that members of staff were helpful and friendly. They were able to book appointments at times convenient to them and were seen promptly by dental staff when they arrived at the practice.

Other evidence

Care and treatment was planned and delivered in a way that ensured people's safety and welfare. We inspected twelve records and found that the diagnosis and treatment plans were discussed with the patients and their written consent was obtained. We also found that patient records showed that practice staff gave appropriate follow up advice to patients after their treatment.

Peoples' needs were assessed and care and treatment was planned and delivered in line with their individual care plan. In each of the record we inspected, we found that each patient's initial consultation with a dentist, appropriate personal details and an initial assessment were noted in their notes. We found information such as past dental and medical histories were also recorded. We spoke with four members of staff who told us that this information was updated at every dental visit.

There were arrangements in place to deal with foreseeable emergencies. We found that the dental practice had arrangements for dealing with foreseeable emergencies. We spoke with members of staff who told us that they had been trained in how to deal

with medical emergencies. All members of staff had received training in basic life support. They told us training was updated annually and the next update was in November 2012. The dental surgery had emergency equipment available including an automatic external defibrillator, oxygen, airways and emergency drugs. Emergency equipment was checked regularly by members of staff to ensure it was in working order if needed. Records were kept of this and we saw that all emergency drugs were within the expiry date.

Our judgement

People experienced care, treatment and support that met their needs and protected their rights. The provider was meeting this standard.

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 spoke with people using the service but their feedback did not relate to this standard.

Other evidence

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. Safeguarding procedures were included in the staff induction training for new staff. This is followed by further annual training on safeguarding. Members of staff we spoke with were able to tell us the signs of abuse. They demonstrated that they were aware of their responsibilities and what they would do if they had a concern. We found that the practice had a policy for child protection and vulnerable adults which provided staff with details of how to report concerns and agencies that should be contacted. The contact numbers of various agencies were readily available.

Our judgement

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. The provider was meeting this standard.

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

We spoke with three people who told us that the dental surgery was clean. Three people told us that they were always given protective glasses during their treatment.

Other evidence

There were effective systems in place to reduce the risk and spread of infection. There was antiseptic gel available for members of staff and patients in place at the entrance and in the dental surgery rooms. We inspected three dental surgery rooms and found it to be clean. We inspected the toilet and found it to be clean. The dental surgery had recently introduced daily audits of cleanliness and their audit found the dental practice to be 100% compliant to the standards of cleanliness.

Gower Dental Practice was using the Health and Social Care Act 2008 Code of Practice on the prevention and control of infections and related guidance. We were shown documentary evidence that demonstrated how the practice met the essential standards requirements of HTM01-05:decontamination in primary care dental practices. The HTM 01-05 was designed to assist all registered primary dental care services meet a satisfactory level of decontamination. For example, members of staff ensured equipments were appropriately cleaned. There was a separate decontamination area. We looked at a range of records relating to the cleaning and decontamination of instruments. These showed that the autoclave was regularly serviced and regularly checked by members of staff to ensure it was working properly.

Our judgement

People were protected from the risk of infections because appropriate guidance had been followed. People were cared for in a clean, hygienic environment. The provider

was meeting this standard.

Outcome 13: Staffing

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us

People told us that they had no concerns about the staff at the surgery. They said members of staff were helpful and friendly.

Other evidence

There was enough qualified, skilled and experienced staff to meet people's needs. On the day of our visit we saw that there was a friendly and calm atmosphere. We found members of staff were courteous and professional.

We spoke with six members of staff who told us that the dental practice was a good place to work. They told us that they worked as a team and that everyone got on well together. The manager told us that they had a good staff team who were flexible to cover for any sickness and holidays.

The practice manager told us that there was one receptionist, two dentists, three dental nurses, one dental hygienist and one decontamination specialist who worked flexibly throughout the week. This meant that there were sufficient number of staff with the right competencies, knowledge and qualifications to meet people's needs at all times.

Our judgement

There were enough qualified, skilled and experienced staff to meet people's needs. The provider was meeting this standard.

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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. 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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Author	Care Quality Commission
Audience	The general public
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Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA