Review of compliance

Dentistree Horley Limited Dentistree Horley	
Region:	South East
Location address:	36b High Street Horley Surrey RH6 7BB
Type of service:	Dental service
Date of Publication:	May 2012
Overview of the service:	Dentistree Horley is an established practice which currently provides general and cosmetic treatments to both private and NHS patients. The current providers have been operation the practice since 2010. The premises are a ground floor practice located within Horely town centre. There are three dental surgeries within the practice along with a waiting room, decontamination room and reception

	areas. Dental Hygiene services are also provided.

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

Our current overall judgement

Dentistree Horley 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 29 March 2012, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

Our inspection visit was undertaken across four hours during working hours at the practice. We told the provider in advance that we were visiting in order to ensure that we were able to speak to all the people we needed to. We spoke with five people who use the service either on the day of our site visit or via telephone following our visit. We also consulted with four staff members along with the provider.

Several people who use the practice told us that they decided to register with the practice on the recommendation of friends and family who were currently registered at the practice. A person said "I would have no problems in recommending this practice to anyone, they are just fantastic friendly and accommodating". People told us that they were involved in the development of their treatment plans. They told us that they were told how much their treatment would cost.

All people we consulted told us that they were happy with the service provided, their comments included "Staff are always very smiley and welcoming, I am not the best patient but they always make you feel relaxed" and "it is a bright, modern and young practice". People felt that their dignity was maintained and their privacy protected with a person telling us "They always treat you respectfully".

People consistently told us about the high standard of cleanliness which they have observed when visiting the practice.

People told us that staff were always knowledgeable and helpful and that they felt very confident to raise any concerns or feedback they had with the dentist directly. A person said "I feel my children are in completely safe hands".

What we found about the standards we reviewed and how well Dentistree Horley 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

The provider was meeting this standard. People who use the practice are respected and involved in decisions about their treatment. People's dignity is upheld and further work is being done to ensure that people are informed of the use of CCTV at the practice.

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

The provider was meeting this standard. Treatment was planned and delivered in a way that ensured people's safety and welfare and took into account changes in good practices and clinical research.

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

The provider was meeting this standard. Staff knew what to do if they had concerns about a child or vulnerable adult. There are practices in place to protect children and vulnerable adults whilst using the practice.

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

The provider was meeting this standard. There are systems in place to ensure the practice is clean and people are protected from risks of infection. Staff have the guidance and training they need to promote effective infection control practices.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

The provider was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people receive.

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
People who use the service told us that they were happy with the service provided. They felt their dignity was maintained and their privacy protected. They were encouraged to ask questions and felt staff had the time to answer their queries. A person told us "They always treat you respectfully".

People consistently told us that they were involved in the development of their treatment plans. They told us that they were told how much their treatment would cost. They found the providers web site to be informative as well as any written information provided.

People reported that staff were good at discussing all their treatment options and they felt they had realistic expectations of the procedures they were having.

Other evidence
Staff we consulted with showed a very clear understanding of how to promote peoples privacy and dignity and were able to give us many examples of how they promote this in their every day practice. This included ensuring that doors are closed during treatment, ensuring that personal details are not discussed in communal areas and

referring to people by their preferred names.

We were told that CCTV had been installed throughout the practice by the previous providers, which included cameras in each treatment room. Images are recorded with no audio. The monitors are located at reception, footage from within treatment rooms is not displayed. The provider confirmed that the use of CCTV has been registered with relevant government bodies regarding data protection. At the time of our site visit although there was signage to indicate the use of CCTV on the premises there were no visible signage or information available to people informing them of their rights regarding the recording of their image. Subsequently following our visit the provider confirmed that CCTV monitors have been disconnected in all treatment rooms and clearer information has been provided to people about the use of CCTV within the practice. Therefore no further action by the Commission was deemed necessary at this stage.

We saw examples of a range of patient information leaflets available to people using the practice. The provider has a website which provides information on the types of treatments available.

All of the people we consulted said that they had been involved in decisions around their treatment and in the development of their treatment plan. One person told us that "We usually discuss the various options and but I usually follow his recommendations, he always tells me the costs of each option". All people told us that they recall singing consent forms.

There are opportunities for people to feedback their views about the practice this included a comments book at the reception desk for people to complete. We noted that the comments book contained many positive entries and compliments regarding the service.

Staff told us that new people registering with the practice are provided with a choice of male or female dentist.

Our judgement
The provider was meeting this standard. People who use the practice are respected and involved in decisions about their treatment. People's dignity is upheld and further work is being done to ensure that people are informed of the use of CCTV at the practice.

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
Several people told us that they decided to register with the practice on the recommendation of friends and family who were currently registered at the practice. A person told us "I would have no problems in recommending this practice to anyone they are just fantastic friendly and accommodating".

People who use the practice told us that they felt they had enough time to make a decision about their treatment and that the dentists listened to them and talked through all the different treatment options. A sample of peoples comments about their overall experience at the practices includes "Staff are always very smiley and welcoming, I am not the best patient but they always make you feel relaxed" and "it is a bright, modern and young practice".

People told us they were routinely asked if there were any changes to their medical history at each visit and that they were provided with clear after care instructions following their treatment.

Other evidence
The service provides both general and cosmetic dental treatments. Dental hygiene services are also provided two days a week. People told us that the service was accommodating and that appointments were flexible to meet their needs. People told us that the practice calls them prior to their appointment to remind them. There were arrangements in place for emergency appointments and treatments. Out of hours emergency details are displayed and recorded on the answer machine message. A

person told us how the practice had called then to inform them of a sooner emergency appointment, which was due to a cancellation.

Many of the staff have worked at the practice for a number of years including the practice manager and had a range of experiences, all of whom were knowledgeable about working practices and of the people they treat.

People's individual records are gradually becoming computerised. We looked at four peoples records in detail. These showed that medical histories are routinely reviewed and that notes are kept of each visit, the treatment undertaken and of any medication used including anaesthetics. Records highlighted any medical alerts such as allergies.

Staff told us that they are trained in dealing with medical emergencies. The practice has emergency equipment available including oxygen and emergency drugs. Staff told us they have a system for recording adverse events, accidents and incidents. Staff told us that there are opportunities to discuss any challenging or interesting cases with senior clinical staff for the purposes of further learning.

Clinical staff told us about the further training they undertake to ensure they keep up to date with changes in dental practices and equipment. We were told of an example were treatment has been change in line with current research.

There was a clear process for referrals to specialist dental services where treatment is beyond that which the practice can provide.

Our judgement
The provider was meeting this standard. Treatment was planned and delivered in a way that ensured people's safety and welfare and took into account changes in good practices and clinical research.

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
A person told "I feel my children are in completely safe hands".

Other evidence
We were told that the practice provides services to children and vulnerable groups of people. People are told they must supervise their children at all times if they bring them to the practice. It is practice for children to be chaperoned at all times to ensure that staff are not left alone with children for their own protection along with that of the child,

There was a child protection policy in place with contact numbers available for the local safeguarding teams. We were told that staff have undergone some training in adult safeguarding and the mental capacity act as part of other training.

A policy on adult protection was being implemented. Staff we consulted knew who to report any concerns they had about a child or a vulnerable person.

Our judgement
The provider was meeting this standard. Staff knew what to do if they had concerns about a child or vulnerable adult. There are practices in place to protect children and vulnerable adults whilst using the practice.

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
People consistently told us about the high standard of cleanliness which they have observed when visiting the practice.

Other evidence
There was an infection control policy in place which provided staff with the guidance they needed to follow recommended guidance on infection control from the British Dental Association. The practice manager is the designated person regarding infection control at the practice.

We noted that all areas of the practice appeared clean. There is a cleaning roster in place to help ensure the regular cleaning of all areas of the practice. Staff wore uniforms and they are responsible for ensuring that they are laundered appropriately. There is a separate decontamination room. We were shown how instruments that require decontamination are processed. Instruments are transported in different coloured boxes from and to the decontamination room, depending upon whether they are dirty or clean. Staff were very clear on the flow of instruments to ensure effective decontamination. There was a clear process in the room to ensure that clean and dirty instruments did not contaminate each other with separate clean and dirty areas.

The practice had a system in place for quality testing the autoclave each day. In addition, we were told that quarterly and annual tests are conducted by the manufacturers for all sterilisation and autoclave equipment. We saw appropriate personal protective equipment available and in use by staff.

Clinical staff told us how they cleaned and prepared the treatment rooms between each person to ensure good standards of infection control. Clinical staff told us that they receive regular infection control training and demonstrated a clear understanding of their roles and responsibilities of effective infection control practices and in the disposal of clinical waste.

Infection control audits have been undertaken and any actions identified completed.

Our judgement
The provider was meeting this standard. There are systems in place to ensure the practice is clean and people are protected from risks of infection. Staff have the guidance and training they need to promote effective infection control practices.

Outcome 14:
Supporting staff

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 competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us
People told us that staff were always knowledgeable and helpful.

Other evidence
The practice is an approved 'Training practice' which means that they are able to support recently qualified dentists within the practice. This also enables them to access a wide range of resources including additional training and clinical support.

Staff told us of the 'Continual Professional Development' CPD's plans that are in place which highlights their minimal clinical training needs and also any additional training for their personal development. We were told about 'CPD lunches' have started to be held, whereby the protective lunch hour is used to discuss particular topics or to invite guest speakers.

All staff that we consulted with told us about the supportive environment at the practice. A staff member said " the team work is really good, they have really built up the practice, it is a great positive environment in which to work". Staff told us about the annual appraisal system where by their performance is measured against their job description.

Staff told us about the various opportunities they have to feedback any concerns, ideas they had to the provider, with a staff member saying "you are encouraged to challenge things if you feel they are not right".

Our judgement

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Outcome 16:
Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:
* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us
All people we consulted with told us that they felt very confident to raise any concerns or feedback they had with the dentist directly.

Other evidence
Staff told us that there are opportunities for them to feedback their views and suggestions directly to the provider and that they felt listened to when they have done this in the past.

'Patient satisfaction surveys' have recently been undertaken in order to gain a more in-depth feedback from people using the service. There were not comments noted from this feedback that needed further action. There was a comments book at the reception desk which contained many positive entries and compliments regarding the practice with particular reference to the friendless and professionalism of staff.

We saw that there has been a variety of recent audits carried out by the provider or external bodies to monitor procedures and practices at the practice. This has included clinical governance monitoring, infection control and patient notes. We were told of the changes that have been implemented as a result of these audits in order to further improve practices, which included the computerization of patient's notes and the standardisation of abbreviations used within notes.

We were told that records regarding the maintenance of the premises and equipment are maintained. This included a fire risk assessment which records any significant

findings and the actions taken to ensure adequate fire safety precautions in the practice.

Our judgement
The provider was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people receive.

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

Document purpose	Review of compliance report
Author	Care Quality Commission
Audience	The general public
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