Review of compliance

Heath Hayes Dental Care Chase Dental Care	
Region:	West Midlands
Location address:	Rugeley Road Chase Terrace Burntwood Staffordshire WS7 1AQ
Type of service:	Dental service
Date of Publication:	May 2012
Overview of the service:	This small practice offers dental services to people of all ages requiring a range of dentistry treatments. People can pay on a private basis or through NHS provisions.

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

Our current overall judgement

Chase Dental Care 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 21 March 2012, checked the provider's records, observed how people were being cared for, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

This practice provides a full range of general dental assessments and treatments. People who use the service have the option of visiting either of the surgeries run by this provider.

The Heath Hayes surgery has treatment rooms and the waiting room on the first floor so would not be suitable for people who use a wheelchair. People who use a wheelchair would be able to access treatment at the Chase Terrace surgery. There is ramped access and wider entrances. All services are provided on the ground floor at this surgery.

People receiving care and treatment from this practice location pay independently or can access their dentistry through NHS costs. The practice has a current contract with the NHS to provide NHS dental care to people.

As part of our review we spoke with five people by telephone (some of these people also told us about the experiences of other family members). People spoke highly of this dentist practice. People were satisfied with the care and treatment they had received. One person told us "I have been using this dentist for about 20 years. In my view is an excellent dentist and the practice is well run. The staff are extremely helpful, they are pleasant and polite", and "It is a nice friendly service. Nice happy staff which put me at ease".

We spoke with four of the staff. They made positive comments about working at this dental practice. One staff member told us that all staff work as a team. Another staff member told us;" We know all our patients very well. A number of patients have been coming here for a number of years. Their children then come here as do some people's grandchildren. We care about all the people. We provide a good quality service looking at the whole person rather than just their dental needs".

Evidence that we gathered during this review confirmed that people are assessed to decide what dental and oral healthcare needs they may have. Treatments that people may need are discussed with them and are carried out in a satisfactory way.

We found good practices regarding infection control and cleaning procedures which demonstrated compliance in this area.

What we found about the standards we reviewed and how well Chase Dental Care 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 views and experiences were taken in to account in the way the service was provided and delivered in relation to their care.

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.

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.

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 infection because appropriate guidance had been followed.

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 had an effective system in place to identify, assess and manage risks to the health, safety and welfare of the people using the service and others.

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 we spoke with told us staff kept them fully informed about their care and treatment. They told us the staff treated with respect and dignity. One person told us "they are informative and are not condescending in anyway".

We saw how staff spoke with people attending the surgery for appointments. We saw good interactions and staff were attentive to people's needs.

There were arrangements in place to support those people who may not have the capacity to consent to their care, treatment or support. Staff had been appropriately trained to understand the Mental Capacity Act 2005. They knew their role in supporting people who may not have the capacity to consent to their care, treatment and support.

The surgery was able to provide information to people in different formats. This means information was available in different languages, pictorial form and electronically. It was possible for people to view the dental treatment they could expect on a computer simulation. Staff also told us models of teeth are used to show people what treatment they may need. People can also see the health of their own teeth and gums through the use of an intra oral camera, the pictures are displayed above the person's head for them to see whilst treatment is happening.

For those people who do not speak English there are arrangements in place to make available interpreters, however the staff at the surgery are also able to talk in a number of languages.
The surgery has communication aids in place such as a hearing loop and leaflets are available in large print. There is a magnifying glass for people to use should they wish to.

People were encouraged to take part in surveys about the quality of service they are receiving. They are encouraged to say when they are either happy or unhappy and how to make a complaint should they have need to. There is a suggestions box held in the reception area of the surgery for people to use.

Other evidence
We do not have further evidence to consider for this outcome.

Our judgement
People's views and experiences were taken in to account in the way the service was provided and delivered in relation to their care.

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 found good practice which demonstrates that people's dental health and welfare needs are being met.

Staff we spoke with gave examples of how they managed people's anxieties. For people who are very nervous appointments are usually arranged first thing in the morning for them to prevent them from getting too anxious prior to attending. Once in the surgery staff told us they spend extra time with nervous people, putting them at their ease and making sure that all procedures are explained to them.

The staff we spoke with gave us a good account of how full oral examinations are undertaken. They told us they check teeth and gums but also the tongue and external facial tissue. These checks could identify early signs of disease which would allow early treatment and a better chance of full recovery for people.

Staff told us how important it is that they know of people's medical histories and any medication they may be taking. This is so that treatments and procedures are not undertaken which could place people at risk. The dentist told us that if they felt that people were unclear about any health condition they may contact the person's doctor for more information before providing treatment. Every person who attends the surgery is asked to complete a medical questionnaire. This information is updated every 6 months or as people's needs change. Staff at the surgery were very clear about which medical conditions may need further consultation with a person's doctor before proceeding with treatment.

Staff confirmed that some appointments are kept free each day to accommodate any dental emergency situations that people may have. Each emergency case is reviewed individually and treatment arranged as necessary.

We saw leaflets and information about treatments and cost of treatment on display in the reception area. Those people who pay privately for their treatments received an itemised bill that detailed their treatment plan.

We looked at two people's treatment plans. Both gave details of the treatment provided and the cost of the treatment. All the plans we saw had been agreed with the person or someone acting on their behalf and had been signed.

We saw certificates to confirm that the dentist and nurses had completed training in resuscitation. This was confirmed by the staff we spoke with. We looked at a sample of the medication available in the emergency kit and found that these were all in date.

We saw that public liability insurance for the practice was up to date. Current safety certificates were available for equipment used for people's dental care such as the X-ray machine, so people's safety should be maintained.

Other evidence
We do not have further evidence to consider for this outcome.

Our judgement
People experienced care, treatment and support that met their needs and protected their rights.

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 who used the service who told us they felt safe and looked after by the staff.

We spoke with 5 members of staff during our visit. All of the staff we spoke to told us they had taken part in training that showed them what abuse was and how to recognise the signs. They all told us they would feel confident reporting any allegation of abuse and knew how to do this.

We also spoke with the manager who was able to demonstrate clearly the action he would take if he suspected abuse had taken place or an allegation had been made.

The surgery has policies in place that offer additional guidance to staff about dealing with safeguarding and abuse.

Staff had also received training in the principles of the Mental Capacity Act 2005. This means that people who do not have the capacity to consent to areas of their treatment will be supported by staff who understood legislation and their role and responsibility in doing so.

Other evidence
There have been no referrals made to the local authority safeguarding team. We have no further evidence to consider for this outcome.

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.

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 practice had appointed a nurse as the lead person for infection control. All staff we spoke with confirmed they had completed training in infection prevention and control. We saw that this had also been covered in recent staff meetings. Further guidance was also available to staff in the surgery if needed.

Staff talked through and showed us cleaning processes. They told us that instruments that had been used were rinsed and scrubbed and placed in a solution. Staff told us that after the soak in the solution the instruments the instruments are placed in the autoclave to be sterilised. The instruments would then be bagged and dated. The staff members confirmed that these must be used within 21 days or be put through the sterilisation process again and re-dated.

We looked at bagged instruments that had previously been sterilised and saw that they were date labelled within a 21 day timeframe. We checked inside drawers when looking at what we needed to and found that these were visibly clean.

We checked the autoclave machines that are used to sterilise surgical instruments and equipment. 'Test strips' and 'confirmation strips' are used to allow a person to track back on what days and times the autoclaves had been used.

We saw that the surgery/treatment rooms were visibly clean and tidy. Equipment such as the x-ray machine was of a satisfactory standard and had been regularly tested.

To gain further evidence regarding the effectiveness of the surgery's decontamination and sterilising processes we spoke with two people who had previous extractions and

treatments. People confirmed that they had not developed any infection following their treatments.

We spoke with a further three people over the telephone. People we spoke with told us that the premises were clean. Each person we asked confirmed that the dentist and nurse always wear disposable gloves when they are examined and treated.

Other evidence
We also looked at evidence from the Primary care Trust (PCT). Their most recent audit of this service confirmed 98% compliance with expected standards.

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

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
We spent time talking with the manager about the systems the surgery has in place to monitor its performance. We saw evidence of regular audits being undertaken. This means recorded checks are done regularly on all aspects of service delivery such as making sure no equipment is used out of date, staff performance is kept under review and the "patient experience" is reviewed. The surgery is also visited regularly by external stakeholders, such as the PCT and the West Midlands Ambulance Service. These stakeholders also complete their own audits of the service provided to people.

The practice has very recently been awarded Vocational Training status. This means they are able to support, mentor and guide new dentists into the field.

People who used the surgery were invited to give their views on how the service is being run. Each member of the staff team also asked for feedback from people who used the service in order to develop their practice. The surgery has regular staff meetings to discuss the results of audits and questionnaires. They do this to make sure they are providing the service people need and that they are happy with the outcome.

We spoke with staff during this visit, all of whom were very clear about raising concerns about risks to people's health should this occur. Staff knew about and understood the purpose of the home's whistleblowing policy. They told us they would feel confident about raising concerns.

Other evidence

We have no further evidence to consider for this outcome.

Our judgement
The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of the people using the service and others.

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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Review of compliance

Heath Hayes Dental Care Heath Hayes Dental Care	
Region:	West Midlands
Location address:	36 Hednesford Road Heath Hayes Cannock Staffordshire WS12 3EA
Type of service:	Dental service
Date of Publication:	May 2012
Overview of the service:	This small practice offers dental services to people of all ages requiring a range of dentistry treatments. People can pay on a private basis or through NHS provisions.

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

Our current overall judgement

Heath Hayes Dental Care 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 21 March 2012, checked the provider's records, observed how people were being cared for, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

This practice provides a full range of general dental assessments and treatments. People who use the service have the option of visiting either of the surgeries run by this provider.

The Heath Hayes surgery has treatment rooms and the waiting room on the first floor so would not be suitable for people who use a wheelchair. People who use a wheelchair would be able to access treatment at the Chase Terrace surgery. There is ramped access and wider entrances. All services are provided on the ground floor at this surgery.

People receiving care and treatment from this practice location pay independently or can access their dentistry through NHS costs. The practice has a current contract with the NHS to provide NHS dental care to people.

As part of our review we spoke with five people by telephone (some of these people also told us about the experiences of other family members). People spoke highly of this dentist practice. People were satisfied with the care and treatment they had received. One person told us "I have been using this dentist for about 20 years. In my view is an excellent dentist and the practice is well run. The staff are extremely helpful, they are pleasant and polite", and "It is a nice friendly service. Nice happy staff which put me at ease".

We spoke with four of the staff. They made positive comments about working at this dental practice. One staff member told us that all staff work as a team. Another staff member told us;" We know all our patients very well. A number of patients have been coming here for a number of years. Their children then come here as do some people's grandchildren. We care about all the people. We provide a good quality service looking at the whole person rather than just their dental needs".

Evidence that we gathered during this review confirmed that people are assessed to decide what dental and oral healthcare needs they may have. Treatments that people may need are discussed with them and are carried out in a satisfactory way.

We found good practices regarding infection control and cleaning procedures which demonstrated compliance in this area.

What we found about the standards we reviewed and how well Heath Hayes Dental Care 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 views and experiences were taken in to account in the way the service was provided and delivered in relation to their care.

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.

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.

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 infection because appropriate guidance had been followed.

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 had an effective system in place to identify, assess and manage risks to the health, safety and welfare of the people using the service and others.

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 we spoke with told us staff kept them fully informed about their care and treatment. They told us the staff treated with respect and dignity. One person told us "they are informative and are not condescending in anyway".

We saw how staff spoke with people attending the surgery for appointments. We saw good interactions and staff were attentive to people's needs.

There were arrangements in place to support those people who may not have the capacity to consent to their care, treatment or support. Staff had been appropriately trained to understand the Mental Capacity Act 2005. They knew their role in supporting people who may not have the capacity to consent to their care, treatment and support.

The surgery was able to provide information to people in different formats. This means information was available in different languages, pictorial form and electronically. It was possible for people to view the dental treatment they could expect on a computer simulation. Staff also told us models of teeth are used to show people what treatment they may need. People can also see the health of their own teeth and gums through the use of an intra oral camera, the pictures are displayed above the person's head for them to see whilst treatment is happening.

For those people who do not speak English there are arrangements in place to make available interpreters, however the staff at the surgery are also able to talk in a number of languages.
The surgery has communication aids in place such as a hearing loop and leaflets are available in large print. There is a magnifying glass for people to use should they wish to.

People were encouraged to take part in surveys about the quality of service they are receiving. They are encouraged to say when they are either happy or unhappy and how to make a complaint should they have need to. There is a suggestions box held in the reception area of the surgery for people to use.

Other evidence
We do not have further evidence to consider for this outcome.

Our judgement
People's views and experiences were taken in to account in the way the service was provided and delivered in relation to their care.

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 found good practice which demonstrates that people's dental health and welfare needs are being met.

Staff we spoke with gave examples of how they managed people's anxieties. For people who are very nervous appointments are usually arranged first thing in the morning for them to prevent them from getting too anxious prior to attending. Once in the surgery staff told us they spend extra time with nervous people, putting them at their ease and making sure that all procedures are explained to them.

The staff we spoke with gave us a good account of how full oral examinations are undertaken. They told us they check teeth and gums but also the tongue and external facial tissue. These checks could identify early signs of disease which would allow early treatment and a better chance of full recovery for people.

Staff told us how important it is that they know of people's medical histories and any medication they may be taking. This is so that treatments and procedures are not undertaken which could place people at risk. The dentist told us that if they felt that people were unclear about any health condition they may contact the person's doctor for more information before providing treatment. Every person who attends the surgery is asked to complete a medical questionnaire. This information is updated every 6 months or as people's needs change. Staff at the surgery were very clear about which medical conditions may need further consultation with a person's doctor before proceeding with treatment.

Staff confirmed that some appointments are kept free each day to accommodate any dental emergency situations that people may have. Each emergency case is reviewed individually and treatment arranged as necessary.

We saw leaflets and information about treatments and cost of treatment on display in the reception area. Those people who pay privately for their treatments received an itemised bill that detailed their treatment plan.

We looked at two people's treatment plans. Both gave details of the treatment provided and the cost of the treatment. All the plans we saw had been agreed with the person or someone acting on their behalf and had been signed.

We saw certificates to confirm that the dentist and nurses had completed training in resuscitation. This was confirmed by the staff we spoke with. We looked at a sample of the medication available in the emergency kit and found that these were all in date.

We saw that public liability insurance for the practice was up to date. Current safety certificates were available for equipment used for people's dental care such as the X-ray machine, so people's safety should be maintained.

Other evidence
We do not have further evidence to consider for this outcome.

Our judgement
People experienced care, treatment and support that met their needs and protected their rights.

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 who used the service who told us they felt safe and looked after by the staff.

We spoke with 5 members of staff during our visit. All of the staff we spoke to told us they had taken part in training that showed them what abuse was and how to recognise the signs. They all told us they would feel confident reporting any allegation of abuse and knew how to do this.

We also spoke with the manager who was able to demonstrate clearly the action he would take if he suspected abuse had taken place or an allegation had been made.

The surgery has policies in place that offer additional guidance to staff about dealing with safeguarding and abuse.

Staff had also received training in the principles of the Mental Capacity Act 2005. This means that people who do not have the capacity to consent to areas of their treatment will be supported by staff who understood legislation and their role and responsibility in doing so.

Other evidence
There have been no referrals made to the local authority safeguarding team. We have no further evidence to consider for this outcome.

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.

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 practice had appointed a nurse as the lead person for infection control. All staff we spoke with confirmed they had completed training in infection prevention and control. We saw that this had also been covered in recent staff meetings. Further guidance was also available to staff in the surgery if needed.

Staff talked through and showed us cleaning processes. They told us that instruments that had been used were rinsed and scrubbed and placed in a solution. Staff told us that after the soak in the solution the instruments the instruments are placed in the autoclave to be sterilised. The instruments would then be bagged and dated. The staff members confirmed that these must be used within 21 days or be put through the sterilisation process again and re-dated.

We looked at bagged instruments that had previously been sterilised and saw that they were date labelled within a 21 day timeframe. We checked inside drawers when looking at what we needed to and found that these were visibly clean.

We checked the autoclave machines that are used to sterilise surgical instruments and equipment. 'Test strips' and 'confirmation strips' are used to allow a person to track back on what days and times the autoclaves had been used.

We saw that the surgery/treatment rooms were visibly clean and tidy. Equipment such as the x-ray machine was of a satisfactory standard and had been regularly tested.

To gain further evidence regarding the effectiveness of the surgery's decontamination and sterilising processes we spoke with two people who had previous extractions and

treatments. People confirmed that they had not developed any infection following their treatments.

We spoke with a further three people over the telephone. People we spoke with told us that the premises were clean. Each person we asked confirmed that the dentist and nurse always wear disposable gloves when they are examined and treated.

Other evidence
We also looked at evidence from the Primary care Trust (PCT). Their most recent audit of this service confirmed 98% compliance with expected standards.

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

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
We spent time talking with the manager about the systems the surgery has in place to monitor its performance. We saw evidence of regular audits being undertaken. This means recorded checks are done regularly on all aspects of service delivery such as making sure no equipment is used out of date, staff performance is kept under review and the "patient experience" is reviewed. The surgery is also visited regularly by external stakeholders, such as the PCT and the West Midlands Ambulance Service. These stakeholders also complete their own audits of the service provided to people.

The practice has very recently been awarded Vocational Training status. This means they are able to support, mentor and guide new dentists into the field.

People who used the surgery were invited to give their views on how the service is being run. Each member of the staff team also asked for feedback from people who used the service in order to develop their practice. The surgery has regular staff meetings to discuss the results of audits and questionnaires. They do this to make sure they are providing the service people need and that they are happy with the outcome.

We spoke with staff during this visit, all of whom were very clear about raising concerns about risks to people's health should this occur. Staff knew about and understood the purpose of the home's whistleblowing policy. They told us they would feel confident about raising concerns.

Other evidence

We have no further evidence to consider for this outcome.

Our judgement
The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of the people using the service and others.

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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