

# Review of compliance

Mr. Cornelis Du Plessis Pembury Dental Surgery	
<b>Region:</b>	South East
<b>Location address:</b>	67 Hastings Road Pembury Tunbridge Wells Kent TN2 4JS
<b>Type of service:</b>	Dental service
<b>Date of Publication:</b>	March 2012
<b>Overview of the service:</b>	Pembury Dental Surgery is located in the village of Pembury, near to Tunbridge Wells. It is a well established local practice providing a service to adults and children. The practice is near to local bus routes. The premises have disabled access and an accessible toilet. There is no car park, on street parking is available near to the building.

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

## Our current overall judgement

**Pembury Dental Surgery was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.**

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 and carried out a visit on 8 March 2012.

### What people told us

The people we spoke with during our visit told us they were very satisfied with the service they received at the practice.

People were happy with the appointment system and said that they were seen on time when they arrived for appointments.

People said the surgery was clean, and they had no concerns about the hygiene of the premises.

They said that they were always given the information they needed about treatment options and the price of treatments. One person said, " You are always given a plan with the price"

People said staff were friendly, polite and helpful. One person who said they had been nervous of visiting dentists told us "They are very good at putting you at ease" and another that "They are helpful when offering appointments "

### What we found about the standards we reviewed and how well Pembury Dental Surgery 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 using the service were treated with respect and dignity and were involved in

making decisions about their treatment.

Overall, we found that Pembury Dental Surgery was meeting this essential standard.

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

People using the service experienced effective, safe and appropriate care, treatment and support that met their needs.

Overall, we found that Pembury Dental Surgery was meeting this essential standard.

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

Systems were in place to protect people from abuse. However, there were no systems for recording the risk assessment of the need for staff to have Criminal Records Bureau checks to make sure people were kept safe.

Overall, we found that Pembury Dental Surgery was meeting this essential standard but, to maintain this we have suggested that some improvements are made.

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

Systems were in place to make sure that the clinic was clean and hygienic and people were protected from risk of infection.

Overall, we found that Pembury Dental Surgery was meeting this essential standard.

#### **Actions we have asked the service to take**

We have asked the provider to send us a report within 14 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

#### **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 the practice was friendly and welcoming and that staff were helpful. They said they were involved in making decisions about their treatment and that they received information about treatment options and the prices.

##### Other evidence

The practice provided people with information about its services, there was an information leaflet about the practice, a price list was displayed in the waiting area that was available on request, and people could be given information over the telephone.

The practice was well established in the village and staff told us that often new patients came to them through word of mouth, or because people's family members were patients and recommended it to them.

The practice offered a late night once a month and opened at eight in the morning, changes made to the opening hours had proved popular with patients. It offered an appointment reminder service, people using this service could choose to receive a text or telephone message reminding them of appointments.

The surgery had been renovated and was accessible to wheelchair users, it had an

accessible toilet.

There was a complaints procedure, there had been no complaints and staff said that any concerns were dealt with without delay. The complaints procedure was on display in the waiting area. Although there had been no complaints staff knew the process for addressing them if they needed to.

People were given the opportunity to offer their views on the service in annual surveys. We looked at some of the most recent survey forms from summer 2011 and saw that people had expressed a high level of satisfaction with the service they received.

A comment on one survey was, " We are not local but choose to travel as we are so happy with the practice" and on another "I moved 30 miles away but still come here as I have for years, that says it all".

Another person wrote" I am always more than satisfied"

### **Our judgement**

People using the service were treated with respect and dignity and were involved in making decisions about their treatment.

Overall, we found that Pembury Dental Surgery was meeting this essential 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

People told us that they were given plenty of information about treatments and that their medical information was updated at each visit. They were put at ease if they were worried or nervous about anything, and the dentist always carefully explained what was involved in their treatment.

People said staff were kind and patient and they appreciated the advice staff gave them about dental care.

##### Other evidence

We looked at some patient records, they were mainly held on computer. We saw that all patient information was kept confidentially and securely. The information on computer included up to date medical details, including information on any medicines people were taking. Medical histories were reviewed at each appointment.

Staff told us that treatment options were always verbally explained to patients, and patients needing treatment were offered leaflets explaining what was involved in the treatment they were considering. Patients could also choose to confidentially see a short film on computer about treatments available. A record was made on the computer of any information provided to patients. Staff said that people were also given advice on issues such as diet or smoking, if it was relevant to their dental health.

As well as computer records, paper records such as signed consent to treatment, including agreements to the cost of treatments were kept, we saw some examples of

completed consent forms that were signed and dated.

The practice provided a service to adults and children, staff told us that they made sure that children were treated sensitively when they came for appointments. Staff explained that if children or adults were at all nervous they did all they could to put them at ease. An example was given of a child with a disability who was carefully introduced to the surgery before any examination took place, part of the process had been to provide them with photos of staff and informal visits to the practice. Staff said this approach had proved successful.

Staff had attended an educational event on the Mental Capacity Act and received information about it during safeguarding training. They demonstrated that they were aware of the action they would need to take if a person was unable to make a significant decision about having treatment, or the options available to them.

### **Our judgement**

People using the service experienced effective, safe and appropriate care, treatment and support that met their needs.

Overall, we found that Pembury Dental Surgery was meeting this essential 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

There are minor concerns with Outcome 07: Safeguarding people who use services from abuse

#### Our findings

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

We did not speak directly to people about this outcome.

##### Other evidence

We spoke with staff about how they safeguarded children and vulnerable adults. They confirmed they had attended safeguarding training and knew who to contact if they were concerned that a person may be at risk of abuse or was suffering abuse. The practice had a copy of the Department of Health's document, "child protection and the dental health team" and an internal safeguarding policy.

The dentist and three other permanent staff worked at the practice, an dental hygeinist who was self-employed worked there some of the time. A Criminal Records Bureau (C.R.B) check was in place for the dentist and the hygeinist had supplied their own C.R.B.

There was no written risk assessment in place to show that the practice had considered which staff should have a check undertaken, or that they had assessed the associate's check as satisfactory.

Staff were trained in emergency first aid and there was a procedure to be used if there was a medical emergency on the premises. We saw that medicines and equipment for emergency use were safely stored, and that medicines were regularly checked to make sure they were in date.

Monthly staff meetings were held that often included specific topics, such as the

outcomes of the quality assurance survey, or discussion on a policy such as infection control. This made sure that staff had the up to date information they needed to provide a service that met people's needs and was safe.

**Our judgement**

Systems were in place to protect people from abuse. However, there were no systems for recording the risk assessment of the need for staff to have Criminal Records Bureau checks to make sure people were kept safe.

Overall, we found that Pembury Dental Surgery was meeting this essential standard but, to maintain this we have suggested that some improvements are made.

## 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 we spoke with said that the surgery was always clean and they had no concerns about its hygiene.

##### Other evidence

We talked with staff about how the consulting room was kept clean, how it was cleaned in between patients and how instruments used were decontaminated or disposed of. They demonstrated how the consulting rooms were cleaned in between patients, and how used instruments were moved in a safe and hygienic way to the room where they were to be sterilised. The practice had two adjoining consulting rooms, and the decontamination room leading directly from one of them, so staff could go straight from the consulting to the decontamination room with used instruments. Each consulting room had a hand washing area.

The rest of the premises were clean and tidy. Staff confirmed that they received infection control training every year. There was an infection control policy in place.

##### Our judgement

Systems were in place to make sure that the clinic was clean and hygienic and people were protected from risk of infection.

Overall, we found that Pembury Dental Surgery was meeting this essential standard.

## Action we have asked the provider to take

### Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Diagnostic and screening procedures	Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 07: Safeguarding people who use services from abuse
	<p><b>Why we have concerns:</b></p> <p>Systems were in place to protect people from abuse. However, there were no systems for recording the risk assessment of the need for staff to have Criminal Records Bureau checks to make sure people were kept safe.</p> <p>Overall, we found that Pembury Dental Surgery was meeting this essential standard but, to maintain this we have suggested that some improvements are made.</p>	
Treatment of disease, disorder or injury	Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 07: Safeguarding people who use services from abuse
	<p><b>Why we have concerns:</b></p> <p>Systems were in place to protect people from abuse. However, there were no systems for recording the risk assessment of the need for staff to have Criminal Records Bureau checks to make sure people were kept safe.</p> <p>Overall, we found that Pembury Dental Surgery was meeting this essential standard but, to maintain this we have suggested that some improvements are made.</p>	
Surgical procedures	Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 07: Safeguarding people who use services from abuse

	<p><b>Why we have concerns:</b></p> <p>Systems were in place to protect people from abuse. However, there were no systems for recording the risk assessment of the need for staff to have Criminal Records Bureau checks to make sure people were kept safe.</p> <p>Overall, we found that Pembury Dental Surgery was meeting this essential standard but, to maintain this we have suggested that some improvements are made.</p>
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The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us within 14 days of the date that the final review of compliance report is sent to them.

CQC should be informed in writing when these improvement actions are complete.

# 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

<b>Document purpose</b>	Review of compliance report
<b>Author</b>	Care Quality Commission
<b>Audience</b>	The general public
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