Review of compliance

Miss Mignonne Davies Victoria Road Dental Care	
Region:	South East
Location address:	98 Victoria Road Horley Surrey RH6 7AB
Type of service:	Dental service
Date of Publication:	May 2012
Overview of the service:	Victoria Road Dental practice has been an established practice since 1939 and currently provides general and cosmetic treatments. The practice is located on a first floor with access provided by a shaft lift or stairs. The practice is centrally located in Horely town centre. There are three dental surgeries within the practice along with a waiting room, decontamination and reception areas. There are two other registered dental

	providers also operating from this location.

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

Our current overall judgement

Victoria Road 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 27 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 four people who use the service either on the day of our site visit or via telephone following our visit. We also consulted with two staff members along with the provider.

People who use the practice told us that the service was comfortable and accommodating and they were happy with the service provided. They told us that appointments were largely flexible to meet their needs including emergency appointments. People told us that they felt their dignity was maintained and their privacy protected. People said they were encouraged to ask questions and felt staff had the time to answer their queries.

People told us they understood the care and treatment choices available to them. They told us that they were told about how much their treatment would cost and that they had enough time to make decisions about their treatment and that the dentists listened to their queries. A person told us "I am 100% happy with the whole experience, you are always made to feel welcome, staff are always friendly and laughing which helps".

A person told us that the potential risks of the treatment they were to receive had been discussed with them. People told us they were provided with clear after care instructions following their treatment. A person told us "My children receive treatment there and so do my grandchildren I have every confidence that they are safe from harm".

A person told us about the cleanliness of the premises that "although the building is a bit tired it is always clean". Another person told us that they were more than happy with the

standard of cleanliness.

People told us hat they felt confident to raise any concerns or feedback they had with the dentist directly.

What we found about the standards we reviewed and how well Victoria Road 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

The provider was meeting this standard. People who use the practice are respected and involved in decisions about their treatment. People's dignity and privacy was upheld.

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.

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 they need to promote effective infection control practices

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 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.

People consistently told us that they are involved in the development of their treatment plans. They told us that they were told about how much their treatment would cost. People told us that their main source of information about the practice and services available was verbal provided during the consultation process.

People who use the practice told us they understood the care and treatment choices available to them.

Other evidence
All consultations took place in private. Staff we consulted with showed a 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, providing people with mobility needs more time to walk to treatment rooms and ensuring that personal details are never discussed in communal areas. The receptionist told us that they can use a private room

if there was a need to discuss personal details with people.

The service does not currently have an operational website or a brochure that provides people with details about the practice. A price list is however available. The provider told us of their plans to redevelop their website in order to provide more detailed information about the various treatments available to help better inform people in advance.

We were told that there is a suggestion box in which people are invited to comment on their experiences. We observed staff sensitively supporting a person to be able to understanding the contact details of the practice, due to their visual impairment.

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 and privacy was upheld.

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 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 person told us "I am 100% happy with the whole experience you are always made to feel welcome, staff are always friendly and laughing which helps".

People told us that the service was comfortable and accommodating and that appointments were largely flexible to meet their needs. There were arrangements in place for emergency appointments and treatments.

A person told us that the potential risks of the treatment they were to receive had been discussed with them. People told us they were provided with clear after care instructions following their treatment.

Other evidence
Many people who use the practice have been registered with the practice for many years, this included several generations of the same family. A person who has recently registered with the practice told us how the practice had been recommended to them by several current patients.

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

People's individual records are gradually becoming computerised. In the interim paper records are maintained of consent forms, treatment plans and x rays. All people who use the practice that we consulted told us that they are routinely asked for an update on their medical history. Records showed that medical histories are routinely reviewed every six months.

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 the dentists for the purposes of further learning.

We observed a staff member contacting people who had recently undergone extensive treatment to check whether there were any issues and that they were recovering.

Clinical staff told us about the further training they undertake to ensure they keep up to date with changes in dental practices and equipment.

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.

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 who uses the practice told us "My children receive treatment there and so do my grandchildren I have every confidence that they are safe from harm".

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 the protection of staff and children.

There was a child protection policy in place with contact numbers available for the local safeguarding teams. Staff told us about the training they have undertaken in 'safeguarding children in the role of the dental team'. We were told that staff are also about to receive training in adult safeguarding and the mental capacity act. 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
A person told us about the cleanliness of the premises that "although the building is a bit tired it is always clean". Another person told us that they were more than happy with the standard of cleanliness.

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 provider is the designated person regarding infection control at the practice.

Staff told us that a cleaning roster has been introduced 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. Decontamination of instruments is currently undertaken manually. Instruments are transported in boxes from and to the decontamination room. Staff were very clear on the flow of instruments to ensure effective decontamination. Staff also demonstrated to us the manual checking of instruments after the washing phase, including the use of a magnify glass They described how any residual matter would be cleaned, and then the instrument re-washed prior to sterilisation. There was a process in the room to ensure that clean and dirty instruments did not contaminate each other.

The decontamination room currently does not have a hand washing sink, the edges of the flooring are not watertight and the cupboard fronts showed much sign of wear and tear with several chipped areas. The provider confirmed that they will be addressing these issues within three months, now that decisions regarding the long term location of the practice have been made.

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. 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 they need to promote effective infection control practices

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
A person told us that they felt 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.

There was a suggestion box available for people to provide anonymous comments. 'Patient satisfaction surveys' have also been used to gain a more in-depth feedback from people using the service. The provider took account of the comments and feedback from these surveys to improve aspects of the practice. We were told about changes to the waiting room in response to these surveys.

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 medical history audits. We were told of the changes that have been implemented as a result of these audits in order to further improve practices.

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

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Author	Care Quality Commission
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