

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

Moonz Orthodontics Fulham

14 Farm Lane, London, SW6 1PP

Tel: 02073859469

Date of Inspection: 30 January 2014

Date of Publication: March 2014

We inspected the following standards to check that action had been taken to meet them. This is what we found:

| | |
|--|---------------------|
| Cleanliness and infection control | ✓ Met this standard |
| Staffing | ✓ Met this standard |
| Records | ✓ Met this standard |

Details about this location

| | |
|-------------------------|--|
| Registered Provider | Moonz Orthodontics Limited |
| Registered Manager | Miss Angela Gomez-Tembleque |
| Overview of the service | Moonz Orthodontics provides private orthodontic work to children and adults. There is one orthodontist, a dental nurse and administrative staff. The practice is based in Fulham and is open Monday to Friday. |
| Type of service | Dental service |
| Regulated activities | Diagnostic and screening procedures Treatment of disease, disorder or injury |

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Summary of this inspection

Why we carried out this inspection

We carried out this inspection to check whether Moonz Orthodontics Fulham had taken action to meet the following essential standards:

- Cleanliness and infection control
- Staffing
- Records

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 30 January 2014, observed how people were being cared for and talked with staff.

What people told us and what we found

There were enough qualified, skilled and experienced staff to meet people's needs. There were appropriate arrangements in place to cover staff annual leave and sickness. Staff demonstrated sufficient skills and knowledge to meet people's needs.

There was a system in place to reduce the spread of infection. We saw that instruments were sterilized in line with published infection control guidance. Staff had received recent and appropriate training for infection control. Records were stored securely and were fit for purpose.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Cleanliness and infection control

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

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

People were cared for in a clean, hygienic environment.

Reasons for our judgement

Our inspection on the 27 September 2013 found that the provider did not have appropriate systems in place to reduce the risk and spread of infection. The provider wrote to us and told us they had implemented measures to reduce the risk and spread of infection control. This included providing training for staff and setting up and carrying out regular checks and tests on equipment.

The practice had infection control policies and procedures in which included hand hygiene, decontamination of instruments and clinical waste. Staff had signed to confirm they had read and understood them. Staff we spoke with demonstrated an understanding of the Health Technical Memorandum 01-05 guidance. Staff had received infection control training in January 2014.

During our inspection the dental nurse, who was the infection control lead demonstrated the process for decontaminating reusable instruments which was in line with nationally published infection control guidance. There was a designated decontamination area which was had a clear flow from "dirty" to "clean". Instruments were transported in a lidded box to the designated decontamination area. They were manually washed and cleaned in an ultrasonic washer, rinsed and then inspected using an illuminated magnifying glass. instruments were then bagged, sterilised in a vacuum autoclave and date stamped with an expiry date of one year. Staff told us they "always" wore personal protective equipment (PPE) when treating people and decontaminating instruments. We saw that appropriate levels of PPE were available on the day of our visit.

There was a contract in place for the safe storage and disposal of clinical waste, which was collected on a monthly basis. Clinical waste was stored in a locked room until collection. We saw the contract and records of collections over the previous year. The practice was cleaned every day by an external company and records were kept of all

visits. The dental nurse cleaned all clinical areas between patients. On the day of our visit the practice was visibly clean and well maintained.

Records were kept of the daily and weekly tests carried out on the decontamination equipment to ensure they were working effectively. The practice used the standard Health Technical Memorandum 01-05 log books to record their daily and weekly tests. Staff told us they carried out monthly audits of their infection control procedures. We saw that the most recent audit was conducted in January 2014.

Staffing

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

There were enough qualified, skilled and experienced staff to meet people's needs.

Reasons for our judgement

Our inspection on the 27 September 2013 found that the provider did not have sufficient staff with enough skills and experience to meet people's needs. The provider wrote to us and told us that they had employed additional staff and provided training to staff to enable them to meet people's needs.

During our visit we found that there were enough qualified, skilled and experienced staff to meet people's needs. There was one orthodontist, a dental nurse and a receptionist. The manager told us that they saw on average eight to ten people a day. People were only seen on the days the principal orthodontist was working.

There was a rota in place to cover staff leave. If the orthodontist was away the practice was only open to take bookings or respond to emergencies. Depending on the circumstance the orthodontist would be called on or people were directed to another service where they would receive appropriate care.

We spoke with all the staff during our visit. All staff displayed appropriate levels of skills and knowledge to carry out their duties. For example, the dental nurse gave an adequate demonstration of the decontamination process.

Records

✓ Met this standard

People's personal records, including medical records, should be accurate and kept safe and confidential

Our judgement

The provider was meeting this standard.

People were protected from the risks of unsafe or inappropriate care and treatment because accurate and appropriate records were maintained.

Reasons for our judgement

Our inspection on the 27 September found that the provider was not ensuring that medical records were fit for purpose. Following the inspection the provider wrote to us and told us that had changed the way they recorded and stored people's information and they had begun storing information in both English and Spanish.

The provider held information in paper and electronic formats. All computers were password protected and only accessible to staff. Paper records were kept in a locked filing cabinet in the staff office. The staff office was kept locked when not in use. All staff knew where records were kept and how to locate them.

People's files were fit for purpose. Staff told us that people completed forms in the language that was "most suitable" for them. Information from the completed forms was then transferred to the computer and available in English so that they were accessible to all people, including auditors and regulators. We reviewed the provider's records during our visit and saw they were fit for purpose.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact - people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact - people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact - people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

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