

Review of compliance

<p>Oasis Dental Care Limited Oasis Dental Care - Wellington</p>	
Region:	West Midlands
Location address:	22 Church Street Wellington Telford Shropshire TF1 1DG
Type of service:	Dental service
Date of Publication:	May 2012
Overview of the service:	Oasis Dental Care is located in Wellington, Shropshire. The practice provides a range of dental treatment to around 5,000 people of all ages. The majority of people pay privately for their treatment.

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

Our current overall judgement

Oasis Dental Care - Wellington was meeting all the essential standards of quality and safety inspected.

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 24 April 2012, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

We spoke with six people who used Oasis Dental Care in Wellington to gain their experiences of the service they received. People we spoke with included people with a physical disability, people who had received extensive treatment and people who had attended the practice over a number of years.

People we spoke with said they were happy with the service they received and said they had recommended the practice to many of their family and friends. One person told us they travelled numerous miles to continue to use the practice. They said "It's worth travelling the distance as they are so good. I have total trust in them." People told us they were always made very welcome and the staff knew them well. We observed this during our visit when people arrived at the practice. One person told us, "I'm very happy and confident going there, it's such a relief to find such an exceptional dentist." Everybody said they felt respected by the staff and said their privacy was upheld.

People told us they felt fully involved in their treatment and were provided with sufficient information to make an informed decision about their treatment. They said their check ups were thorough and they were always provided with a copy of their treatment plan and an estimation of costs. People with restricted mobility or physical disability told us the practice accommodated them and ensured their routine check ups and treatment were provided in the ground floor surgery. They said staff were attentive to their individual needs. One person said, "I really feel well looked after."

Everybody confirmed they had completed a health questionnaire and at each appointment staff asked about their health and medication. One person said, "My dentist is fully aware of my health condition and is careful any treatment does not affect it. I trust her

impeccably".

People said they felt safe attending the practice and had no concerns about their care and welfare. Staff confirmed they had received some training in child protection and adult safeguarding. They acknowledged training in local procedures would better equip them to deal with concerns regarding a person's wellbeing or if they observed abuse.

People told us the practice was always clean and tidy and confirmed clinical staff always wore personal protective clothing such as a short sleeved uniform, gloves and eye protection. One person said, "It's a very hygiene conscious practice." Staff told us they had received training in infection control and prevention to help minimise the risk of cross infection.

What we found about the standards we reviewed and how well Oasis Dental Care - Wellington 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's views and experiences were taken into account in the way the service was provided and delivered in relation to their care and treatment.

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

The provider was meeting this standard.

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

The provider was meeting this standard.

People who used the service were generally 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

The provider was meeting this standard.

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

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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that 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.

A moderate impact means that 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.

A major impact means that 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.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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 they were treated them with respect and staff maintained their privacy when receiving treatment. They said they felt fully involved in their treatment and were given lots of information to inform their decision before agreeing to any treatment.

Dentists said they always explained procedures in a way people understood. For example if a person had a learning disability or dementia they would use models and pictures to demonstrate procedures so people knew what their treatment involved. We saw the practice had access to an interpretation service to accommodate people whose first language was not English.

We saw people had access to a range of information to include leaflets on treatments available, oral hygiene and treatment costs. The leaflets were not available in number of formats and languages. The manager told us this was being addressed to ensure information was accessible to everyone.

People with physical disabilities told us the practice was able to accommodate them. One person said the practice provided portable ramps to ensure they were able to access the surgery. They said staff were very helpful and attentive and provided assistance with the doors. We saw staff operated under the restrictions of an old

building and therefore not all areas were accessible to people with a physical disability. For example the entrance to the practice was not easily accessible and the toilet facilities could not accommodate a person in a wheelchair. The manager advised us this was being addressed. One person said, "Investment is required in the infrastructure to provide a better and safer environment for staff and patients."

Other evidence

We observed confidentiality being maintained at the reception desk and staff we spoke with shared sound examples of how they promoted privacy when providing treatment. Discussions evidenced they provided people with respect and ensured the door to the surgery was closed when providing treatment. We observed this during our visit. One staff member said, "We are polite to our patients and do not discriminate, everybody is treated equally. I treat people as I wish to be treated."

Our judgement

The provider was meeting this standard.

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

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 spoke with six people who had received a range of treatment. They all shared positive experiences and said they were 'very' satisfied with the treatment and service they received. People told us they felt confident in discussing their options with the dentists and were able to ask questions before deciding their treatment. Dentists said they always explained the risks and benefits of treatment and this was reflected in discussions held with people who used the service.

People told us they could get appointments when they needed them and were generally seen on time. During our visit we saw the practice accommodate people who required emergency treatment. People told us their routine check ups were thorough and included checks to their gums and soft tissues. One person said, "They are always very thorough and tell me exactly what state my mouth is in and advise me accordingly, they are excellent."

People who had received diagnostic tests such as X-rays said they were shown their X-rays and the dentists discussed the results with them. They told us the risks and benefits of any treatment was discussed with them and they were always given time to consider their options. People said they were given opportunities to ask questions and dentists gave them advice where necessary such as how to improve their oral health. We saw any advice given had been clearly documented on their records. People who had received extensive treatment said they were given a copy of their treatment plan and estimation of charges.

People told us they were asked at each appointment if there had been any changes to their health and well being. One person said their dentist was fully aware of a health condition they had and their dentist always took this into consideration when considering treatment. One staff member said, "It's essential to check medical histories." We saw written medical questionnaires had been obtained and evidence that health information was regularly updated on the records of four people we reviewed. This ensured people received treatment safely and in accordance with their specific health needs.

Records were stored electronically and in paper format. We reviewed the records held for four people with a range of needs. These were detailed and included contact details, GP, medical history, treatment plans, costs and X-rays where required. We saw people had been referred for specialist treatment if required. We saw evidence that people were involved in their treatment. For example 'patient given option for treatment and venue', this was in relation to diagnostic screening.

We asked staff about how they gained consent for treatment. One person said, "We never do anything without gaining consent". Staff told us people with a learning disability or dementia related illness were supported by a relative or carer and they would help explain procedures with them. One member of staff said, "We always talk to the patient first". Staff shared examples of when they had declined treatment if they considered it was not in a person's best interest and they told us how they supported people who were anxious about their treatment. One staff member said, "It's all about gaining trust and starting off with simple procedures and giving them time to consider their options."

We saw the provider had suitable arrangements in place for dealing with medical emergencies, including emergency equipment. Staff we spoke with confirmed they had received training in dealing with an event. Staff knew what the emergency procedure was and where the emergency equipment was kept. We saw the practice had a written policy and procedure in place.

Other evidence

We saw people were given opportunities to feedback their views on the service they had received through patient satisfaction questionnaires. Surveys reviewed evidenced that people would recommend the service.

Our judgement

The provider was meeting this standard.

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

People told us the staff were competent and they felt in 'safe hands' when receiving their treatment. They said they had no concerns about their health and welfare when visiting the practice.

Other evidence

We saw that the provider had a corporate child protection and safeguarding policy in place in the event of concerns for a person's welfare. This included information on definitions of abuse, understanding the different forms of abuse and staff responsibilities. Staff confirmed they had received some basic training in safeguarding. They said if they had concerns about the welfare of a child or vulnerable adult they would report it to the manager. Discussions with staff evidenced they were not familiar with local procedures. Following our visit the manager confirmed they had since obtained a copy of these procedures and contact details of the local team in the event they had to make a safeguarding referral.

The manager said they had received training in child protection. They told us they were planning to undertake further training in child protection in addition to the Mental Capacity Act. This will help in assessing capacity and decision-making on behalf of adults who may not be able to take particular decisions. Staff spoken with demonstrated an understanding of obtaining consent prior to providing treatment.

We saw Criminal Records Bureau (CRB) checks had been obtained for all staff that had immediate contact with people who used the service. These checks ensured that

persons unsuitable to work with children or vulnerable adults were not employed in the dental practice.

Our judgement

The provider was meeting this standard.

People who used the service were generally 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

We spoke with six people who used the service. They said they had no issues about the cleanliness of the practice. Comments included, "It's always absolutely spotless." "It's a very hygiene conscious practice." "I think the standard of hygiene is very good". People confirmed clinical staff wore personal protective equipment such as short sleeved uniforms and disposable gloves to help safeguard them from the risk of cross infection. They told us they were offered eye protection to help protect their eyes during procedures. Staff confirmed they had access to sufficient supplies of equipment and instruments and we saw this during our tour of the premises.

We saw the practice had an infection control policy in place and records evidenced that staff had read and signed this. Staff confirmed they had received training in infection prevention and control. They were confident in describing the systems in place to ensure they and the people who used the service were not placed at risk of cross infection.

Arrangements were in place for the safe disposal of clinical waste and sharps (used needles). We saw immunisation records were maintained for all clinical staff. Staff confirmed their immunisation status had been checked to provide protection and prevent the spread of infection. Where staff had obtained a sharps injury appropriate action had been taken that ensured people were not placed at risk of infection. The manager agreed to ensure bins used for the disposal of needles were labelled as required.

We saw the practice had a separate decontamination room for the sterilising of instruments. Records evidenced staff responsible for sterilising equipment had

received training. We observed the decontamination room to be clean and tidy in addition to all three surgeries and waiting areas. A member of staff described to us how they cleaned and sterilised all the equipment used in surgery. They demonstrated a clear understanding of the procedures to ensure equipment was effectively cleaned to minimise the risk of cross infection. They showed us the records they maintained for the autoclaves (sterilisers) to demonstrate the instruments were cleaned as required and that equipment was maintained and safe for use.

No daily cleaning schedules for each of the surgeries were available to evidence specific areas cleaned and by whom. The manager confirmed that staff currently do not complete records however visual checks were carried out each evening. The manager agreed to implement a record system so that any action taken resulting from the checks were documented. The manager also agreed to remove any unlabelled cleaning bottles from surgeries to ensure people were not placed at risk of harm from using unknown products.

Other evidence

As part of our review we liaised with an infection prevention and control professional from Shropshire PCT. They confirmed they had undertaken an infection control audit of the practice in 2009 and had provided staff with training. We saw the majority of findings identified had been actioned.

Our judgement

The provider was meeting this standard.

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

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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. 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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