

Review of compliance

Dr J D Hull And Associates Limited Manor Dental Care

Region:	West Midlands
Location address:	1 Manor Road Solihull West Midlands B91 2BH
Type of service:	Dental service
Date of Publication:	September 2012
Overview of the service:	Dr J D Hull And Associates Limited provides a range of dental treatments to patients requiring dentistry at Manor Dental Care in Solihull.

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

Our current overall judgement

Manor Dental Care 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 15 August 2012, 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

During our visit on 15 August we spoke with the practice manager, one dentist, two dental nurses and the receptionists.

We spoke with seven people who had attended Manor Dental Care. People gave positive feedback about the service they had received. They told us, "In my opinion it's an excellent dentist, I wouldn't go anywhere else" and "I have been going to that practice for many years. Everyone there makes you feel welcome and the dentist is very professional."

People told us that they were able to make an appointment quite easily and did not have to wait very long to see the dentist when they arrived. One person said "The last time I didn't have to wait at all. If I have had to wait it's only been for five minutes."

People we spoke with told us that everything was always explained to them. One person said, "The dentist always takes time to explain exactly what he is going to do."

People told us that everything in the practice always looked clean and tidy. People confirmed that the dentists and nurses offered them glasses to protect their eyes during treatment. We were told that the dentists wore these themselves and that they always wore disposable gloves.

People we spoke with said that they had never had any reason to complain. But they would speak to the dentist if they were unhappy with anything. One person said "I've never felt badly treated and never had to complain."

What we found about the standards we reviewed and how well Manor 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's views and experiences were taken into 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

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

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 who use the service are protected by effective practices and procedures for the prevention and control of risks from infection.

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

The provider was meeting this standard. There were enough qualified, skilled and experienced staff to meet people's needs.

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 received.

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

We visited the Manor Dental Care on 15 August 2012. The dental surgery had four treatment rooms and employed two dentists and two hygienists. We met with the practice manager and the lead nurse in the practice. We also spoke with a dentist, a dental nurse and the receptionists during our visit.

We spoke with seven people who had recently visited the practice. We asked them about their experiences of using the dental service and if they were happy with the treatment provided.

People we spoke with said that they were happy with the service they received. People told us, "In my opinion it's an excellent dentist, I wouldn't go anywhere else" and, "I have been going to that practice for many years. Everyone makes you feel welcome and the dentist is very professional."

We asked people if they were kept informed about their treatment. People told us, "The dentist always takes time to explain exactly what he is going to do," and "Yes, they always talk it through with you and ask if that's ok."

Other evidence

On the day of our visit we observed that all the staff in the practice spoke to people in a friendly, welcoming way.

We looked at the information available to people who used the practice. This included a practice leaflet included opening times and treatments provided. We were told that this information was only available in English but could be translated into other languages if needed. We saw that the information available in the waiting room included several policies and procedures as well as leaflets about the different treatments available.

We asked people if they were kept informed about their treatment. People told us that treatment options were clearly explained to them. Six people said that they were aware of the charges before they had treatment. We saw that detailed information about costs was included in the folders available in the waiting room.

We saw that people had signed to consent to their treatment plan.

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.

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 happy with the care and treatment they had received. People said, "I've never felt badly treated, and never had to complain. It's a really good practice with excellent standards of care. They are very good with nervous patients." and "They always ask if there have been any changes in my health since the last visit"

People said that they didn't have to wait after long after their appointment time to see the dentist. People said "The last time I didn't have to wait at all. If I have had to wait it's only been for five minutes," and "I've never had to wait long, if there is a delay the receptionist lets you know."

We spoke to two people who were nervous of visiting the dentist. They told us, "I am quite nervous but my dentist talks to you which takes your mind of what they are doing." and "The nurse with my dentist is great at helping you relax, she is very reassuring"

Other evidence

The surgery offers mainly private treatments but does provide treatment to children through the NHS. The practice provides dental care to people of all ages including children less than five years of age.

During our visit we looked at the procedures followed by staff for the assessment and treatment of patients. We also looked at how medication was managed and stored.

We asked about the process for accepting a new person to the practice. We were

shown the documents that are completed for each patient. This included a medical assessment that was updated at each visit.

We were shown how appointments were allocated to patients. We saw that patients were allocated sufficient time for their treatment. This meant that subsequent patients did not have to wait very long after their appointment time to see the dentist. We were told that patients were informed if there was going to be a delay in their treatment.

We saw that the practice provided a comfortable environment for people who used the dentist. The waiting room had a wide selection of magazines and a television for patients use. There was a notice informing patients that they could have a hot or cold drink while waiting. This was confirmed by one of the people we spoke with who told us he could get a cup of tea while he waited. In the treatment room we saw there was a TV screen fixed to the ceiling so patients could watch programmes during treatments. The exterior glass door into one of the treatment rooms had been fitted with a mirrored film to maintain people's privacy. There were comfortable chairs in the treatment room for relatives/carers to use while they waited for patients' during treatments.

We asked the dentist how they decided on a treatment plan with a person. We were shown the assessment process that looked at the patient's teeth, gum and mouth health. We asked to see a patient's treatment plan. The dentist showed us a treatment plan on the computer that had been completed that morning. The information recorded on the screen confirmed that people's medical history is recorded and updated. We were shown how the dentist is made aware of any medication or condition that could influence the patients treatment. The dentist also showed us photographs and models of different treatment options which he used for patients. We could see how this would help patients understand the treatment being recommended, and to make an informed choice about their treatment options.

We asked about the recall arrangements for people to have check ups. We were told that this would depend on their treatment plan but usually between 6 and 24 months.

We asked how the practice reassured anxious patients. We were told "We try to reassure people and make them feel at ease. We listen to patients and explain everything so they know what we are going to do. We will offer several shorter appointments for them to feel more comfortable and relaxed." The dental nurse also told us that patients could bring in music tapes or DVD's to use during treatments. One person told us that their son had previously had an absolute fear of dentists' but the practice had been 'brilliant' in helping him overcome his anxieties.

We asked the receptionist about the systems in place to offer an emergency service. We were told that they offer a same day service for emergencies where possible. We saw that there were spaces in the appointment schedules where people could be offered emergency appointments.

We asked what procedures were in place to safeguard children and vulnerable adults. The practice manager, dentist and dental staff we spoke with showed an understanding of safeguarding issues relating to both children and vulnerable adults. We saw that they had a safeguarding policy for children and adults. Records in staff files confirmed that staff had completed safeguarding training. We saw that information about safeguarding was available to people in the waiting rooms. We also saw that safeguarding

information including the procedure to follow if concerns were identified displayed in the staff room. People we spoke with told us that they were never left on their own in the treatment room, and that they always had a nurse present during their treatment. We saw that criminal records checks (CRB) had been completed for all dental staff working in the practice. The manager told us it was not company policy to complete a CRB check on the reception staff. She told us that she had raised her concerns about this with the organisation. The provider might like to note that people's safety could be compromised if staff who have unsupervised contact with patients and access to personal and confidential information do not have CRB checks completed.

We looked at the systems in place to manage the storage and administration of medication. We saw that emergency drugs were kept in a portable box which was stored in an accessible area. The practice made sure that dates on emergency drugs were checked regularly. We did notice that the record of emergency medication did not include the amount of ampoules available. The lead nurse responsible for managing medication advised that this would be added to the record to make sure stock could be audited more accurately. We looked at the storage of other medications used in the practice. We saw that these were stored in a safe way. A record of the different medicines was kept so that medication could be accurately audited. The practice had a safe procedure for handling prescriptions.

Our judgement

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

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 asked people who used the practice about the cleanliness in the surgery. People told us the surgery was always clean and tidy. One person said, "The surgery has always been clean when I've visited."

People we spoke with confirmed that the dentists and nurses always wore disposable gloves and offered them glasses to protect their eyes. They told us that the dentists also wore gloves, a face mask and protective glasses.

Other evidence

We looked around the surgery including the treatment rooms and the waiting room and saw that the environment was clean and tidy. We asked the manager about the systems in place for maintaining a good level of cleanliness and hygiene. We were told that they employed a cleaner to clean the communal areas and the floors. The dental nurses were responsible for cleaning the treatment rooms.

In treatment rooms we saw that the computer key board, the handles on the adjustable light and the headrests on the patient chair were protected with a disposable film. We were told that the film was replaced after each person. This procedure should minimise cross contamination between patients.

We saw that staff wore clean, smart, short sleeved uniforms so they could wash their hands thoroughly to reduce the risk of contamination from clothing. Staff said there was always a sufficient supply of disposable gloves, aprons, hand wash, and other items required to ensure good standards of hygiene were maintained. Staff we spoke with demonstrated a good knowledge of how to safely dispose of waste materials.

We saw that there were a number of policies and procedures available including an infection control policy so that staff knew about good practice.

We watched the nurse working in the decontamination room and the process undertaken from dirty to clean instruments. We saw that the decontamination room had a designated dirty and clean area. The nurse was able to describe the process and explain the reason for each activity and the safety measures in place. We were shown the process including how she scrubbed instruments and used the ultrasonic to make sure they were clean, checked them for debris and the use of the autoclave to sterilise them. Clean instruments were then stored in sealed packaging and dated according to national guidelines. We were told that packaged instruments were stored in the treatment rooms and packages were checked regularly to make sure they were in date. We saw that the nurse wore protective clothing, a face mask, and gloves at all times. The dental nurse told us that they had completed training in the decontamination of equipment. She said that she felt confident carrying out the procedures and that there was additional guidance to follow if needed.

The dental staff were aware of the best practice guidance set by the Department of Health. This guidance tells dentists how they should decontaminate dental instruments so that they are properly cleaned between patients. We found the practice was following procedures recommended in the guidance.

Our judgement

The provider was meeting this standard. People who use the service are protected by effective practices and procedures for the prevention and control of risks from infection.

Outcome 13: Staffing

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us

We asked people about the staff in the practice and if they could get an appointment when they wanted. We were told, "I don't have a problem getting an appointment", and "The dental nurses are very kind and thoughtful".

Other evidence

On the day of our visit there were two dentists, a hygienist, the manager, a lead nurse, four dental nurses and two receptionists working in the practice.

We were told that the surgery can respond well to annual leave or sickness. They do this by utilising the flexibility of part time staff, or by using staff from other practices within the organisation. They also had links with an organisation that provided bank dental staff.

We asked about training courses for staff and how these were arranged. We were told some training is provided by the organisation and that the dental nurses also organise their own training to maintain registration with the General Dental Council (GDC). We saw records and certificates that confirmed that staff had attended training including, Cardiac Pulmonary Resuscitation (CPR), emergency first aid and infection control. Records we looked at showed that the new staff member was in the process of completing a structured induction procedure.

Staff spoken with told us that they were very happy working at the practice and that they they received a good level of training and support. Staff told us that they had

regular staff meetings and that annual appraisals were completed by the manager.

Our judgement

The provider was meeting this standard. There were enough qualified, skilled and experienced staff to meet people's needs.

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

Comments we received from people who used the practice were complimentary about the dentist and the service they had received.

Comments included,

"It's an excellent dentist, everyone is really friendly."

"The quality of work has always been very good."

"It's an excellent service."

"I have nothing but praise for the surgery. 100% plus for my dentist."

We asked people about making a complaint and if they had ever had cause to complain. One person said 'I've never felt badly treated, and never had to complain.'

Other evidence

We asked about the process for auditing the quality of the service provided. We saw that the practice had good auditing procedures. Evidence was available to show that checks were regularly made on records and equipment. This was to make sure that the practice operates safely and efficiently.

We asked about complaints and how these were managed. We were shown the

complaints log. The last complaint received was August 2011. Records showed complaints were taken seriously and investigated. We saw that complaints information was available in the waiting room. The patients we spoke with said they had never had cause to complain.

The practice had a procedure for obtaining the views and opinions of patients. A satisfaction survey is carried out by the practice. We were shown the responses from the survey carried out in July 2012. These showed that people were satisfied with the service provided. That staff were friendly and polite and that people had confidence in their dentist. People said that they would recommend the practice to their friends.

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 received.

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

Document purpose	Review of compliance report
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