

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

## S S Lawson Dentist Limited

450 Rayners Lane, Pinner, HA5 5DX

Tel: 02088662140

Date of Inspection: 20 March 2013

Date of Publication: April 2013

We inspected the following standards as part of a routine inspection. This is what we found:

<b>Care and welfare of people who use services</b>	✓ Met this standard
<b>Safeguarding people who use services from abuse</b>	✓ Met this standard
<b>Cleanliness and infection control</b>	✓ Met this standard
<b>Requirements relating to workers</b>	✓ Met this standard
<b>Records</b>	✓ Met this standard

## Details about this location

Registered Provider	S S Lawson Dentist Limited
Registered Manager	Mr. Stephen Lawson
Overview of the service	S S Lawson Dentist Limited is a dental practice in Harrow that treats mainly NHS patients.
Type of service	Dental service
Regulated activities	Diagnostic and screening procedures Surgical procedures Treatment of disease, disorder or injury

## Contents

*When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.*

	Page
<b>Summary of this inspection:</b>	
Why we carried out this inspection	4
How we carried out this inspection	4
What people told us and what we found	4
More information about the provider	5
<b>Our judgements for each standard inspected:</b>	
Care and welfare of people who use services	6
Safeguarding people who use services from abuse	7
Cleanliness and infection control	8
Requirements relating to workers	9
Records	10
<b>About CQC Inspections</b>	11
<b>How we define our judgements</b>	12
<b>Glossary of terms we use in this report</b>	14
<b>Contact us</b>	16

## Summary of this inspection

---

### Why we carried out this inspection

---

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

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 20 March 2013, observed how people were being cared for and talked with people who use the service. We talked with staff.

---

### What people told us and what we found

---

We spoke with three people who use the service and two members of staff. We also observed two patient consultations.

People told us they were satisfied with their treatment and that everything was explained to them. They were aware of their treatment plan, including its risks and benefits, and the associated costs. We found the provider was prepared to deal with a medical emergency and that people were being provided with safe treatment.

Everyone said they had no concerns regarding their treatment. Staff were aware of their legal responsibilities regarding safeguarding children and how to report any allegation of abuse. However not all staff had been trained regarding the Mental Capacity Act 2005 and how to safeguard vulnerable adults.

People told us that they were treated in a clean and tidy environment. They said the dentist took measures to protect them from the risk of infection. We found both the premises and the provider's equipment was clean and that appropriate procedures were followed to prevent the risk of infection.

Staff were appropriately checked to ensure they could work with people who use the service before they were employed by the provider.

Staff told us that people's records were always up to date and were easy to follow. The provider's records, policies and procedures were up to date which ensured that staff could provide safe treatment.

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](http://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

### Care and welfare of people who use services

✓ Met this standard

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

---

### Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

---

### Reasons for our judgement

There were arrangements in place to deal with foreseeable emergencies. Staff records showed they were trained to deal with a medical emergency and this training was kept up to date. The provider had equipment in place to deal with a medical emergency. This included a first aid kit, emergency medicines and resuscitation equipment. Records showed these were regularly checked to ensure all the necessary equipment was working. Medicines that were required to be kept cool were stored in the refrigerator. However the provider may find it useful to note that the temperature of the refrigerator was not checked which meant the medicines were not stored appropriately.

People's needs were assessed and treatment was planned and delivered in line with their individual treatment plan. People told us they were satisfied with their treatment and that everything was explained to them. We saw evidence that people were aware of their treatment plan, including its risks and benefits, and the associated costs. One person said, "I feel comfortable here." We observed staff explaining people's treatment during their consultation and giving them options for how they wished to be treated. Staff gave advice to people to maintain and improve their oral health and this included leaflets that were displayed on the premises.

Treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. We saw evidence that staff were up to date with their professional training so that they were aware of any changes to dental guidance. We observed staff checking people's medical history in case any treatment may have an adverse effect on their health. However the provider may find it useful to note that items that could be hazardous to people's health, such as toilet cleaners, were not always stored in locked cabinets. This meant that there was a risk that a vulnerable person could access them.

**People should be protected from abuse and staff should respect their human rights**

---

### **Our judgement**

---

The provider was meeting this standard.

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

---

### **Reasons for our judgement**

---

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. All the people we spoke with who use the service said they had no concerns regarding their treatment.

Staff records showed that they had been trained regarding safeguarding children from abuse. The staff we spoke with were aware of their responsibilities in reporting an allegation of abuse and who the lead person in the provider was to report concerns to the local authority safeguarding team. The safeguarding lead for the provider told us they were aware of how to safeguard vulnerable adults and had attempted to get professional advice in this area. However the provider may find it useful to note that we saw no formal training regarding safeguarding vulnerable adults and the Mental Capacity Act 2005. This meant there was a risk an allegation of abuse or someone's capacity to make a decision may not be dealt with appropriately.

The provider had policies and procedures in place to prevent the possibility of abuse. This included ensuring patient information was kept confidential. A comments box was available so people could raise concerns anonymously.

**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.

---

**Reasons for our judgement**

---

There were effective systems in place to reduce the risk and spread of infection. People told us that they were treated in a clean and tidy environment. They said they were always given equipment to protect them from the risk of infection such as eye protectors and aprons. Records showed that staff were trained in infection control and were aware of their responsibilities in this area.

Checks had been undertaken to ensure staff had immunisations against infections such as Hepatitis A. This ensured staff would not pass on serious infections. We observed staff following infection control guidance such as wearing personal protective equipment, washing their hands and wearing short sleeved clothing. The premises and the provider's equipment was suitable for controlling the risk of infection on the premises. This included elbow operated sink taps and work surfaces that could be cleaned easily. The provider had a cleaning schedule and the premises was checked to ensure this cleaning schedule was followed.

Staff ensured they cleaned and disposed of equipment appropriately to prevent the risk of infection. This included disposing of single use items in either clinical waste or sharps bins. Equipment that required reusing was washed, cleaned, sterilised and inspected in line with professional guidance. The provider had two sterilisers in case one required repair. Once sterilised, equipment was either placed in plastic pouches or in closed trays. These were dated to show when they were sterilised. Staff told us they re-sterilised these items 21 days later if the equipment was not used in that time. This ensured the equipment was always clean to use. We saw evidence that equipment and the infection control process was checked regularly to ensure there were no issues.

## Requirements relating to workers

✓ Met this standard

People should be cared for by staff who are properly qualified and able to do their job

---

### Our judgement

---

The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

---

### Reasons for our judgement

---

Appropriate checks were undertaken before staff began work. Staff were checked to ensure they could work with people who use the service. This included a check of their criminal record, professional registration, liability insurance and practising certificates. However the provider may find it useful to note that they had not checked staff were eligible to work.

## 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

---

Staff records and other records relevant to the management of the services were accurate and fit for purpose.

Staff records were up to date. These included professional training certificates and performance reviews.

Records of checks staff made were up to date. These included checks of equipment, feedback from people who use the service and risk assessments. Records of staff meetings showed the training staff had undertaken. This included safeguarding children, first aid, and infection control.

People's personal records including medical records were accurate and fit for purpose. The records contained a medical history that included any allergies people had that may affect their treatment. Records of each appointment showed the person's dental history. Staff we spoke with told us they were able to follow the notes in people's records so that they could plan future consultations.

## 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 dentists and other services at least once every two years. 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 but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

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. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. 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.

## Contact us

---

Phone: 03000 616161

---

---

Email: [enquiries@ccq.org.uk](mailto:enquiries@ccq.org.uk)

---

---

Write to us  
at: Care Quality Commission  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA

---

---

Website: [www.cqc.org.uk](http://www.cqc.org.uk)

---

---

Copyright Copyright © (2011) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

---