

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

## Monkmoor Dental

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We followed up on our inspection of 03 July 2012 to check that action had been taken to meet the following standard(s). We have not revisited Monkmoor Dental as part of this review because Monkmoor Dental were able to demonstrate that they were meeting the standards without the need for a visit. This is what we found:

<b>Care and welfare of people who use services</b>	✓	Met this standard
<b>Complaints</b>	✓	Met this standard
<b>Records</b>	✓	Met this standard

## Details about this location

Registered Provider	Mr. Robin Pope
Overview of the service	Monkmoor Dental Practice provides a range of NHS and private dental treatment to patients of all ages.
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 follow up review:</b>	
Why we carried out this review	4
How we carried out this review	4
What we found about the standards we followed up	4
More information about the provider	5
<b>Our judgements for each standard reviewed:</b>	
Care and welfare of people who use services	6
Complaints	7
Records	8
<b>About CQC Inspections</b>	9
<b>How we define our judgements</b>	10
<b>Glossary of terms we use in this report</b>	12
<b>Contact us</b>	14

## Summary of this follow up review

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### Why we carried out this review

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We carried out an inspection on 03 July 2012 and published a report setting out our judgements. We asked the provider to send us a report of the changes they would make to comply with the standards they were not meeting.

We have followed up to make sure that the necessary changes have been made and found the provider is now meeting the standard(s) included within this report. This report should be read in conjunction with the full inspection report.

We have not revisited Monkmoor Dental as part of this review because Monkmoor Dental were able to demonstrate that they were meeting the standards without the need for a visit.

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### How we carried out this review

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We reviewed information we asked the provider to send to us.

We have not revisited Monkmoor Dental as part of this review.

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### What we found about the standards we followed up

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When we inspected Monkmoor Dental Practice on 4 July 2012 we found that they were not meeting three of the five essential standards of quality and safety. At the time the provider told us that they would make required improvements and they sent us an action plan as to how they were going to do it.

In preparation for this review the provider sent us additional information detailing further improvements to practice.

They told us that medical information was now requested, documented and regularly updated. They also told us that any special requirements were recorded. We were told that treatment plans were now made available to people to inform them of planned treatment and any costs involved. People were also given copies of any referrals for specialist services.

Improvements had been made in relation to record keeping and audits of records now take place. We were told that records were now stored securely thus ensuring the confidentiality of information held.

The provider told us that improvements had been made in relation to complaints handling. They had systems in place for raising awareness of the policy and procedure including who to contact should they be dissatisfied with an investigation outcome. We were told that information could be made available in a range of formats.

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

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## More information about the provider

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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 reviewed

### 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

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### Our judgement

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The provider was meeting this standard.

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

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### Reasons for our judgement

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When we inspected the practice in July 2012 we found that people were very satisfied with the service they received. They felt that their treatment was appropriate, flexible and responsive to their needs. We also found that improvements were needed to ensure that dental staff had full and up to date recorded information about people's medical needs. We found that people who received a service did not always get written information to support their treatment options and plans. The dentist acknowledged these shortfalls and provided us with an action plan telling us how they were going to improve the service.

For this review the provider told us that improvements had taken place in relation to information recording processes. They told us, "Treatment plans are given and alternatives discussed. Drawings, pictures and models are used to support discussions about treatment". They also told us, "From now on all medical histories will be updated and signed to update people's medical information. Bitewing radiographs will be provided every two years. Written estimates for all band 2 and 3 treatments will be provided and kept in record cards together with a detailed treatment plan".

Since our last inspection the provider had also reviewed arrangements for storing and monitoring emergency drugs. We were told that, "Staff are trained annually in CPR and emergency procedures. A new emergency drug kit and oxygen is available and staff are trained in its use".

## Complaints

✓ Met this standard

People should have their complaints listened to and acted on properly

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### Our judgement

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The provider was meeting this standard.

There was an effective complaints system available.

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### Reasons for our judgement

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When we looked at the practice's complaints procedures in July 2012 we found that not all required information was available to share with people who received a service. This related in particular to who to contact should the complainant not be satisfied with the outcome of a complaint investigation. The provider told us that they were now compliant in this outcome area. They told us, "The complaints policy is displayed in the waiting room and patient's attention drawn to it by trained reception staff. The policy is available in large print or can be read to patients/carers if request". They also told us that they had a delegated complaints handler who had received training in this area.

They said that, "All complaints are dealt with promptly and documented records kept. Advice on how to contact Shropshire PALS, Shropshire PCT , The Care Quality Commission and the General Dental Council is available".

## Records

✓ Met this standard

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

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### Our judgement

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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.

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### Reasons for our judgement

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Since the time of our last inspection in July 2012 the provider has told us that recording processes had improved and records were now audited, "To ensure they are complete and fit for purpose". As well as telling us about improvements to the content of records kept they also told us about improvements to the way information was stored. They told us, "Freedom of information act and data protection act are adhered to".

The provider told us that the area where patient information was stored, "Is now secured with coded lock to ensure security of record cards and prevent unlawful entry. Non current records are stored securely".

The local Primary Care Trust (PCT) had worked with the practice to make improvements in relation to record keeping. The provider told us how they had actioned their suggestions for improvement.

## 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.

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**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.

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**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.

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**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

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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)

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### **(Registered) Provider**

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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'.

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### **Regulations**

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

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### **Responsive inspection**

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

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### **Routine inspection**

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

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### **Themed inspection**

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

## Contact us

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