

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

Halton Lodge Dental Surgery

49 Festival Way, Runcorn, WA7 5JU

Tel: 01928581382

Date of Inspection: 08 March 2013

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

| | | |
|---|---|-------------------|
| Respecting and involving people who use services | ✓ | Met this standard |
| Care and welfare of people who use services | ✓ | Met this standard |
| Safeguarding people who use services from abuse | ✓ | Met this standard |
| Cleanliness and infection control | ✓ | Met this standard |
| Staffing | ✓ | Met this standard |
| Complaints | ✓ | Met this standard |

Details about this location

| | |
|-------------------------|---|
| Registered Provider | Kotecha & Partners |
| Registered Manager | Dr. Shailesh Kotecha |
| Overview of the service | <p>Halton Lodge dental surgery is located in a residential area of Runcorn. It provides general dental treatment to NHS patients. This service has one dentist who works at the practice from one treatment room.</p> <p>The practice has ground floor access to the treatment room. Outside there is an accessible ramp with handrails. The service has a car park and local street parking is accessible for cars near to the practice.</p> |
| Type of service | Dental service |
| Regulated activities | Diagnostic and screening procedures Surgical procedures Treatment of disease, disorder or injury |

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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'.

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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 8 March 2013, checked how people were cared for at each stage of their treatment and care and talked with people who use the service. We talked with staff and reviewed information we asked the provider to send to us.

What people told us and what we found

We spoke with three patients via the telephone to gain their views about the service. They all told us they were "Very happy" with the service provided and overall they were positive about their experiences at Halton Lodge dental surgery. Patients collectively told us they were very happy with the staff and they all knew the names of the dentist and staff and felt the service they received was very good. One person told us, "The dentists manner is superb" and another patient told us "I've known the staff here for years it's a relaxed atmosphere were we can have a laugh and a joke."

Patients were given various information about their treatment and knew what to expect. Patients told us they could ask any questions about their care and treatment. Everyone stated they were always consulted and they gave full consent about their treatment and check ups and were made aware of their costs.

The treatment room offered privacy to patients' with blinds provided to the window. Staff and patients told us the treatment room door was always kept shut which helped maintained people's privacy and dignity.

Staff had worked at the service for several years which offered a lot of stability for patients in seeing the same staff during their appointments. Staff said they liked working at the surgery and they felt they had a good supportive team to work with. Staff told us it was a "Small friendly practice that's not too big and we have a good boss."

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

Respecting and involving people who use services ✓ Met this standard

People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

Our judgement

The provider was meeting this standard.

People's privacy, dignity and independence were respected.

Reasons for our judgement

We spoke with three patients via the telephone to gain their views about the service. They all told us they were "Very happy" with the service provided and overall they were positive about their experiences at Halton Lodge dental surgery.

Patients were given various information about their treatment and knew what to expect. Patients knew the name of their dentist and told us they could ask any questions about their care and treatment. Everyone stated they were always consulted and they gave full consent about their treatment and check ups and were made aware of their costs.

The treatment room offered privacy to patients with blinds provided to the window. Staff and patients told us the treatment room door was always kept shut which helped maintained people's privacy and dignity. They told us there was always a dental nurse assisting the dentist and that everyone at the practice was friendly and reassuring.

The service used equipment called an 'autoclave' to help keep dental instruments clean and functional.

Staff showed us protective equipment which they always used for their patients' to help keep them safe and maintain their dignity including the use of aprons.

Staff explained how they made the clinic accessible to patients with mobility problems on the ground floor in which they accommodated people in wheelchairs to be given their treatment. On the first floor they offered a toilet facility which wasn't accessible to people in wheelchairs.

The reception area was separate to the waiting area. This meant that staff could safely manage patient's records and protect patient's confidentiality as records could not be seen or accessed by other patients at the counter.

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

The patients we spoke with told us that the care they experienced was "Very good"; "Superb" and "A really good service." Everyone told us they were happy with the level of service and care offered and that they had no problems. They told us they were offered advice on how to look after their teeth. One patient told us they had previously had a fear of 'dentists' but since coming to the practice they felt the treatment, care and manner of the staff and dentist had put them completely at ease. Patients told us they also had families signed up with the practice including children for some families. They felt the service their family and children received was very good and reassuring especially for nervous family members.

We looked at samples of dental notes for three patients and noted that their relevant medical history and consent was recorded and periodically checked by staff and the patient at each visit. We looked at records of dental treatments' and information advising patients' about various treatments and options around their care. Regular advice around health promotion was provided during visits to the dentist including the effects of 'smoking.' This helped to show what assessment, care and attention was provided to patients to help cater for their needs and requests.

The provider produced various audits they periodically carried out to show how they reviewed the care and treatments provided at the service. These care record reviews helped ensure they were in line with best practice and up to date with evidence of appropriate treatment provided to patients.

The practice used diagnostic x-ray equipment we saw that local rules for its use were displayed. The provider was identified as the radiation protection supervisor and we saw that they carried out regular reports offering additional checks to this facility.

We talked with three members of staff on duty and the provider during our visit. Staff told us they had received all necessary training to help them with their job roles in providing up to date care and treatment to meet their patients needs. They were happy working within the service and felt they all worked well as a team.

Emergency equipment was readily available and included emergency drugs. Staff showed us audit checks that they regularly carried out to check on the safe storage of all

emergency equipment and facilities.

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

We spoke to a sample of patients who had recently received treatment at the service. They said that they had no complaints. Patients' told us they felt safe and well looked after when they visited the service.

We spoke with staff during our visit to ask them about safeguarding procedures. Staff did understand their responsibilities and stated they would have no hesitation in reporting their concerns to the appropriate authorities. Staff told us they were happy with their training regarding 'safeguarding.' They felt confident they could raise any issues and discuss them openly with the provider. Staff advised they had all received recent training in the safeguarding of children and of vulnerable adults.

We looked at a sample of training records regarding safeguarding. There was evidence that staff had been updated with this training with updated records produced. The service had appropriate policies and procedures to address the safeguarding of 'children. Following our visit the provider has advised they now also have a policy for the 'safeguarding of vulnerable adults.' This will ensure the service has the most updated information to follow to help safeguard patients and to be able to contact the relevant department within the local authority.

The provider had updated evidence of his (CRB) police checks and he has advised that they are in the process of applying for these checks for all other staff who worked at the practice. These checks helped to protect patients to ensure suitable people were employed to work at the service.

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

We spoke to a sample of patients, some who had used the service for several years. Everyone told us they were happy with the cleanliness of the building and the surgery.

When we visited the practice we looked around the environment. We noted that the premises and treatment room were clean, tidy and organised and noted various good practices in providing a safe environment for managing infection control. We noticed that the practice had suitable access to hand washing facilities', liquid soap, and disposable towels were provided.

Although during our visit the practice did not have a clinic in attendance we noted that all staff wore uniforms. Staff told us that they always provided protective equipment for the safety and comfort of their patients.

We looked at various policies including the infection control policy. We also looked at a sample of audits and checks on the equipment and facilities used at the practice including the autoclaves. They showed updated, detailed checks to show how the service was being safely managed and maintained. The local PCT (primary care trust) had also produced a detailed report covering infection control during a recent visit to the service. The provider advised they would be looking at improving some aspects of the toilet facilities including replacing the current carpet for a smooth flooring and that they had ordered a 'sanitary bin' for this area.

Staff discussed their roles in maintaining good procedures for preventing cross infection. They advised that when each patient was seen in the treatment room that they had specific tasks in cleaning the clinic in between every patient's appointment.

Staff also explained their procedures for carrying out the processing, storage and transfer of 'dental instruments' to the autoclave machine which helped to safely keep instruments clean and safe. We spoke to staff about the procedures and it was clear that they were knowledgeable about their infection control procedures in helping to keep patients safe and well cared for during their visits to the service.

Staff advised that they did not have a 'decontamination room' which are rooms that provide specific specialist equipment for the cleaning and storage of 'dental equipment.' Staff told

us they had looked at plans to potentially have this facility in the future to help them keep up to date with published guidance in regard to the management of 'infection control.'

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

Patients collectively told us they were very happy with the staff and they all knew the names of the dentist and staff and felt the service they received was very good. One person told us, "The dentists manner is superb" and another patient told us "I've known the staff here for years it's a relaxed atmosphere were we can have a laugh and a joke."

Staff told us that they had enough staff to safely meet patient's needs. Staff told us the dentists always had an assistant to help them and to act as a chaperone to patients when receiving any treatment. They also had an additional two staff on duty each day to work in reception. Staff advised that during periods of sickness they always managed to provide appropriate cover so that there were no effects to the patients required treatments.

In talking with staff we noted they had worked at the service for several years which offered a lot of stability for patients in seeing the same staff during their appointments. Staff explained why they liked working at the surgery and they felt they had a good supportive team to work with. Staff told us they liked working at the service as it was a "Small friendly practice that's not too big and we have a good boss."

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

There was an effective complaints system available.

Reasons for our judgement

We asked about the services complaints procedures and all patients told us that if they had any concerns they would speak to the staff. Patients told us they were happy and had no complaints or concerns.

The practice displayed a summary of advice on how to make a complaint. The provider may wish to note that patients may benefit from having access to the full copy of the services complaints procedure and for the addition of relevant organisations contact details that can help people with raising concerns.

We looked at how the service stored and monitored all records regarding complaints. The service had received no complaints over the last 12 months. Staff advised that all details about complaints were also reported to the (PCT) the Primary Care Trust on an annual basis.

We noted the last patient survey was carried out in 2013. The provider had summarised the results and displayed them on the notice board in the patients' waiting area. The results were overall very positive. The service also had a notice advising patients to leave any comments and suggestions in their 'comment envelop.' The service provided various ways for patients to express their views and comments about the service.

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

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

Website: www.cqc.org.uk

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