

Review of compliance

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Eastbury Dental Practice

Region:

East

Location address:

99 Eastbury Road
Watford
Hertfordshire
WD19 4JP

Type of service:

Dental service

Date of Publication:

August 2012

Overview of the service:

Eastbury Dental Practice has two treatment rooms, a waiting area and a central reception area.

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

Our current overall judgement

Eastbury Dental Practice 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 3 August 2012, talked to staff and talked to people who use services.

What people told us

People said that they were happy with the treatment that they had received.

People told us "Staff are very welcoming" and "The appointment system works well for me".

What we found about the standards we reviewed and how well Eastbury Dental Practice 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 privacy, dignity, choices and independence were respected.

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

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

Outcome 07: People should be protected from abuse and staff should respect their human rights

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

Outcome 08: People should be cared for in a clean environment and protected from the risk of infection

The provider was meeting this standard. People were protected from the risk of infection because appropriate guidance had been followed.

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 the 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

People we spoke with told us that they were happy with the service provided. They found that staff were informative and helpful. One person we spoke with told us that they had been attending the practice for years and that staff were always respectful. They had also used the practice website to obtain information prior to booking an appointment. The waiting room had magazines available for people to read and the area was clean and well maintained. The costs of dental treatments were clearly displayed around the waiting area. People that we spoke with confirmed that their treatment plans were explained to them in a way they understood and any costs of treatment were made clear before treatment commenced. People told us that they felt comfortable to ask the dentist questions about their treatment and that the dentist always had time to answer.

Other evidence

We saw that staff attended to people as soon as they entered the surgery and people were seen on time. People were escorted to the treatment room by the dentist or the receptionist.

Staff we spoke with had a good understanding of the importance of ensuring patients had their privacy respected. The treatment rooms were located away from the waiting

area. We were told that the doors were kept closed when patients received dental treatment, so their privacy was maintained.

The registered manager told us that on the day of the appointment, prior to the treatment commencing, the dentist would again explain the proposed treatment and answer any question people may have.

Our judgement

The provider was meeting this standard. People's privacy, dignity, choices and independence were respected.

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 during consultation the dentist discussed all the options with them and that they were given a written report of the treatment required. They felt they were given adequate time to decide whether or not to continue with the treatment. They confirmed that they were always asked about their medical history prior to treatment.

Other evidence

The registered manager told us that the treatment options were discussed privately in the treatment rooms. Visual aids and leaflets had been used to explain the treatments. Where possible visual videos were also used and people are talked through the video by the dentist. The registered manager confirmed that written treatment plans were provided during consultation and people are given time to decide on their course of treatment.

The practice had held regular staff meetings in which they discussed training needs and any changes to their practices. The registered manager would discuss and share with staff the latest clinical guidance and advances. This ensured that all staff were kept up to date. We viewed two records of a staff meeting held in May and August 2012. During May meeting topics that had been discussed included patients satisfaction surveys and records of audits.

Records viewed showed that staff had been trained in basic life support, and health and safety.

Our judgement

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

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

On this occasion we did not speak to people who use the service about this outcome.

Other evidence

We saw the practice had a safeguarding policy for vulnerable adults and children, which included information about who to contact if concerns about the safety of a child or adult were identified. The dentist told us that all staff had attended training in safeguarding adults and children and that this was discussed in team meetings.

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 to prevent abuse from happening.

Outcome 08: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

What we found

Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

One person we spoke with said that the practice always smelt and looked clean.

Other evidence

During our tour of the premises we saw that both treatment rooms had two sinks. One sink was used for hand washing only. The other sink was used for instruments. Once the instruments were used they were transported in secure trays to the designated decontamination room. We were shown the decontamination room and staff talked us through their routine. There was a clear process in place to ensure that dirty instruments did not contaminate clean ones. We were shown how instruments that required decontamination were processed. We were told that instruments that were not used within twenty-one days were re-sterilised before being used.

The decontamination room also housed two x-ray machines, the practice filing cabinets and a small sink that was used for washing cups. The entrance to the toilet is situated in the decontamination room. The registered manager told us that when the toilet is in use the x-ray machines and/or sterilization equipment are not used. People are escorted to and from the toilet by staff.

We asked the dental nurse to explain how they prepared the room between patients. They told us that the surfaces were wiped, chairs were cleaned, all items used were disposed of or decontaminated. The registered manager told us that the treatment rooms were cleaned at the start and end of each session. We were shown evidence of this.

Staff we spoke with and records we viewed showed that all staff had undertaken

training in infection control. We also saw evidence that the practice clinical waste was disposed of by an external company.

Our judgement

The provider was meeting this standard. People were protected from the risk of infection because appropriate guidance had been followed.

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

One person we spoke with told us that they had completed a satisfaction survey.

Other evidence

We were showed evidence that the practice had undertaken patient's satisfaction surveys in April 2012. Fifteen surveys were issued and eight were completed and returned. The results showed that six people had no concerns, one did not like the waiting room chairs and one wanted magazines to be updated weekly. As a result of the survey the magazines in the reception area had been updated weekly.

We were shown the practice complaints procedure and policy. We were told that all complaints were reported to the Primary Care Trust (PCT) on an annual basis. We viewed the complaints folder; we were able to see that the last complaint received was in 2010 and was dealt with appropriately. The practice also held a compliment folder we saw that in March 2012 the practice received two thank you letters and one thank you card.

Our judgement

The provider was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of the 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

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Author	Care Quality Commission
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