

Review of compliance

P H Blackman Limited Thrapston Dental Practice	
Region:	East Midlands
Location address:	3-5 Chancery Lane Thrapston Kettering Northamptonshire NN14 4JL
Type of service:	Dental service
Date of Publication:	September 2012
Overview of the service:	Thrapston Dental Practice provides private dental treatment. It is located in the centre of the small town of Thrapston in Northamptonshire. Further information is available from the dental practice's statement of purpose.

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

Our current overall judgement

Thrapston 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 to check whether Thrapston Dental Practice had taken action in relation to:

Outcome 04 - Care and welfare of people who use services
Outcome 08 - Cleanliness and infection control
Outcome 09 - Management of medicines
Outcome 10 - Safety and suitability of premises
Outcome 14 - Supporting workers
Outcome 16 - Assessing and monitoring the quality of service provision
Outcome 21 - Records

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

We spoke with three people using the service who told us that the dentist and staff were very kind and caring, listened to them and explained things well.

One adult said he had been 'a patient since he was 10 years old' and was very pleased with the service.

Another said he 'felt very safe' as the dentist and the nurse wore personal protective equipment when giving treatment and also gave him goggles and a protective cover when receiving treatment.

Overall the people we spoke with gave us a positive account of their experience of care and treatment.

What we found about the standards we reviewed and how well Thrapston Dental Practice was meeting them

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

and supports their rights

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

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

People were protected from the risk of infection because appropriate guidance had been followed.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

People were protected against the risks associated with medicines because the provider had appropriate arrangements in place to manage medicines.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

People who use the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

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 had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people using the service and others.

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential

People were protected from the risks of unsafe or inappropriate care and treatment.

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 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

Two people we spoke with told us that their needs were assessed and treatment was planned and delivered in line with their individual needs. One person said that he had been 'a patient since he was 10 years old' and was very pleased with the service.

Other evidence

During our inspection on 5 April 2012 we found that medication for use in an emergency had not been checked or maintained in good order. This meant that people could not rely on receiving safe and effective treatment in the event of a medical emergency.

The provider wrote to us on 3 June 2012 and told us about the actions taken to make sure that suitable arrangements were in place in the event of a medical emergency.

In August 2012 we found that there were better systems in place for making sure that medication that may be needed in an emergency was available.

Our judgement

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

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 spoke with one person using the service about infection control. The person we spoke with said he 'felt very safe' as the dentist and the nurse wore personal protective equipment when giving treatment and also gave him goggles and a protective cover when receiving treatment.

Other evidence

During our inspection on 5 April 2012 we found that people using the service and staff were not protected from the risk of infection.

The provider wrote to us on 3 June 2012 and told us that they now had a suitable system to manage these risks.

In August 2012 we saw arrangements had been put in place to comply with the government's guidance on decontamination (HTM 01-05 Essential Quality Requirements) which gave the cleaning and decontamination requirements and standards for dental services. We saw there were specific responsibilities for the nurse and the contracted cleaning service in relation to cleaning of the treatment room after each person had received treatment. There were checks to ensure people who did the cleaning tasks were competent. There were audits and records against the government's guidance on decontamination of dental instruments including those that showed the effectiveness of the decontamination process and infection control. This meant that the service had systems to identify and manage the risks to people of getting an infection while receiving treatment.

Our judgement

People were protected from the risk of infection because appropriate guidance had been followed.

Outcome 09: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- * Will have their medicines at the times they need them, and in a safe way.
- * Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with Outcome 09: Management of medicines

Our findings

What people who use the service experienced and told us

We spoke with three people using the services but their feedback did not relate to this standard

Other evidence

During our inspection on 5 April 2012 we found that people using the service were not protected against the risks associated with the unsafe use and management of medicines.

The provider wrote to us on 3 June 2012 and told us that they now had a suitable system to manage risks relating to medication. We saw that the medicines were being managed in accordance with national guidelines. Medicines were kept safely. We saw the fridge used to store medicines was out of sight of the general public and was locked with a daily record of temperature kept. This ensured the integrity of the medicines within it. The list of medicines kept for use in an emergency was as recommended by the Resuscitation Council (UK). The medication was stored in a locked cabinet with keys available for staff who may need to access the medication in an emergency. We saw written records of weekly checks for emergency medicines. This ensured that medicines used in an emergency remained within the expiry date and were therefore effective.

Our judgement

People were protected against the risks associated with medicines because the

provider had appropriate arrangements in place to manage medicines.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

* Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with Outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us

We spoke with one person using the service about fire safety. The person we spoke with was aware of the fire notices displayed.

Other evidence

During our inspection on 5 April 2012 we found that people using and working in the service were not always protected from the risks of unsafe premises because of a lack of proper fire procedures. We also found that use of the premises by another business meant that people's confidential records were not secure.

The provider wrote to us and told us on 03 June 2012 that they had put in place suitable systems to manage these risks.

In August 2012 we saw a certificate showing that the premises had been inspected for fire regulations, and there were weekly records of the fire alarm test. There were written fire procedures available for people using the service with evidence of a recent fire drill. We saw that the arrangements for another business to share the dental practice front entrance have been stopped. This meant that patients and staff from the practice had adequate secure access to the dental practice. We also saw that improved arrangements had been made for securing patient records which meant that confidentiality was not compromised.

Our judgement

People who use the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

Outcome 14: Supporting workers

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 competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting workers

Our findings

What people who use the service experienced and told us

We spoke with three people using the services but their feedback did not relate to this standard

Other evidence

During our inspection on 5 April 2012 we found that people working in the service were not appropriately supported to enable them to deliver safe care and treatment to people using the service.

The provider wrote to us on 3 June 2012 and told us that they had put in place a suitable system to manage these risks. We saw that there were adequate arrangements in place to ensure staff were trained appropriately in order to protect people from risks to their health, welfare and safety. Staff were able, from time to time, to obtain further relevant qualifications and skills updates. We saw that the staff training records were organised, and identified the current level of training and professional development with forward dates for future training. We saw records of mandatory training such as for infection control, safeguarding, fire safety, first aid and cardiopulmonary resuscitation (CPR). We saw that there were regular staff meetings with notes of the discussions and agreements made.

Our judgement

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

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

We spoke with three people using the services but their feedback did not relate to this standard.

Other evidence

During our inspection on 5 April 2012 we found that people using the service were not protected from the risks of inappropriate or unsafe care and treatment, due to a lack of effective systems to monitor the quality of the service and identify, assess and manage risks.

The provider wrote to us on 3 June 2012 and told us that they now had a suitable system to manage these risks.

In August 2012 we saw that a programme of audit and monitoring of the service had been implemented. These included asking people who use the service, their representatives for their views about their care and treatment received, clinical audits concerning practice, monitoring arrangements for adverse events and environmental risks.

We saw that equipment and emergency drugs were now checked regularly and that risk assessments had been reviewed and new ones carried out with dates of anticipated review.

We saw that staff meetings were being used to discuss findings of audits and

monitoring so as to learn and make improvements to practice. The provider took account of complaints and comments to improve the service. We saw a complaints poster on display which gave details of how to complain.

Our judgement

The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people using the service and others.

Outcome 21: Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

* Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.

* Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

The provider is compliant with Outcome 21: Records

Our findings

What people who use the service experienced and told us

We spoke with three people using the services but their feedback did not relate to this standard.

Other evidence

During our inspection of 5 April 2012 we found that people's care records were not all held securely as paper records were held on open shelves and there was access by another business to the records storage area. The provider wrote to us and told us on 3 June 2012 that these risks have now been managed. We saw that the paper records have been relocated and now stored in a locked cupboard. We saw that the arrangements for another business to share the dental practice front entrance have been stopped.

Our judgement

People were protected from the risks of unsafe or inappropriate care and treatment.

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
Author	Care Quality Commission
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