

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

Broadwalk Dental Centre

5 East Walk, Harlow, CM20 1JH

Tel: 08443756262

Date of Inspection: 12 September 2013

Date of Publication: October 2013

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

Care and welfare of people who use services	✓ Met this standard
Cleanliness and infection control	✓ Met this standard
Safety and suitability of premises	✓ Met this standard
Supporting workers	✓ Met this standard
Assessing and monitoring the quality of service provision	✓ Met this standard

Details about this location

Registered Provider	Mr. Manish Vyas
Overview of the service	Broadwalk Dental Centre provides dental treatment to NHS and private 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'.

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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 announced 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 12 September 2013, talked with people who use the service and talked with staff.

What people told us and what we found

The provider delivered care that met people's individual needs. One person we spoke with explained, "[The dentist] noticed that I've lost a bit of weight. He is very knowledgeable. He's going to send me some things about things that will reduce blood pressure. He cares about people."

We saw that people were treated in a clean and tidy environment. All of the people that we spoke with told us that they found the surgery clean. There were adequate procedures in place to prevent the spread of infection.

There were suitable control measures in place to reduce the risk of injury to people in the building. Steps were taken by the provider to ensure that people were protected against the risks of unsafe or unsuitable premises.

Staff that we spoke with said that they felt supported by the service. One member of staff told us that they wanted to complete a first aid course and that this was in the process of being booked. This demonstrated that staff were enabled to undertake additional training to support their role.

People who visited the service were asked to complete a feedback questionnaire. We saw that the feedback was collated and follow up actions that were undertaken. The provider had regard to the complaints and comments made by people who used the service.

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

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.

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare.

Reasons for our judgement

We spoke with three people who visited Broadwalk Dental Centre. One person explained, "[The dentist] noticed that I've lost a bit of weight. [The dentist] is very knowledgeable. [The dentist is] going to send me some things about things that will reduce blood pressure. [The dentist] cares about people." This demonstrated that the provider delivered care that met people's individual needs.

We looked at the treatment records of three people who used the surgery. We saw that people's medical histories were updated each time they visited and that X-ray images were taken and stored appropriately. A person that we spoke with explained that they were a particularly nervous patient and we saw that the computerised records brought this to the attention of the dentist as when they accessed the record. This meant that staff had all the information they needed about the person to ensure their safety and wellbeing.

We found that there were procedures in place to deal with foreseeable emergencies. We saw that there were emergency medicines and emergency equipment such as oxygen and a defibrillator securely stored at the practice. There was a person on site who was trained to use the emergency equipment. There was a completed record of the expiry date of medications stored. There were measures in place which were intended to ensure people's safety.

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 cared for in a clean, hygienic environment.

Reasons for our judgement

We saw that people were treated in a clean and tidy environment. All of the people that we spoke with told us that they found the surgery clean.

We saw that dirty instruments were kept moist in a sealed box until they were decontaminated. These were then taken to be cleaned in a separate decontamination room. Instruments were washed in a washer-disinfector before they were sterilized. Records showed that equipment was regularly checked and serviced to ensure it was working effectively and safely. There was a designated hand-washing sink with hand wash and paper towels. A member of nursing staff explained that they washed their hands after touching contaminated instruments. We saw that there was an area for dirty instruments and an area for clean instruments to ensure that there was a zoned work-flow from dirty to clean. Protective equipment was used by the nursing staff when this was required.

A member of nursing staff that we spoke with was clear about the decontamination process. We saw documentation confirming that all clinical staff had immunisation with the hepatitis B vaccine. We saw that instruments were date stamped to ensure that these were sterile at the point of use. There were adequate procedures in place to prevent the spread of infection.

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

Our judgement

The provider was meeting this standard.

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

Reasons for our judgement

The practice information leaflet stated that the surgery had been designed to accommodate people who had a disability. The leaflet prompted people to mention this when they booked their appointment so that their needs could be accommodated.

The surgery was situated on the first floor of the building. We were informed by the dentist that if people were unable to use the stairs, they were offered an appointment with an alternative dentist on the ground floor when they booked their appointment.

We saw a detailed risk assessment of the premises which addressed potential accidents, the use of equipment around the premises, fire risks and waste disposal. A Disability Discrimination Act risk assessment had been completed but the provider may find it useful to note that although actions were identified, we could not see if these had been followed up from the documentation provided.

There were suitable control measures in place to reduce the risk of injury to people in the building. A legionella risk assessment had been completed by an external provider. These risk assessments evidenced that there were measures taken by the provider to ensure that people were protected against the risks of unsafe or unsuitable premises.

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

Our judgement

The provider was meeting this standard.

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

Reasons for our judgement

Dental staff showed us certificates which confirmed that they had completed the required amount of continuous professional development [CPD] for their own professional registration. This showed that they had undertaken the training necessary to perform their role. We saw evidence that the dentists and clinical staff were registered with the General Dental Council.

We looked at the records documenting the appraisals that had taken place for the member of nursing staff at the practice. These appraisals addressed achievements, objectives and training requirements. We spoke with three staff who all said that they felt supported by the service. One member of staff told us that they wanted to complete a first aid course and that this was in the process of being booked. This demonstrated that staff were enabled to undertake additional training to support their role.

A new member of staff that we spoke with confirmed that they had received an induction where they were shown around the premises and shadowed a member of experienced staff. The provider may find it useful to note that we could not find documentary evidence to support this.

Assessing and monitoring the quality of service provision

✓ Met this standard

The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

Our judgement

The provider was meeting this standard.

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

Reasons for our judgement

People who visited the service were asked to complete a feedback questionnaire. We saw that the provider analysed the feedback and addressed any issues that were identified. For example, there was a suggestion that the provider should have longer opening hours. In response to this, early morning and evening appointments were introduced. We saw a sign in the waiting room advising people to ask the dentist if they required an early appointment. The provider had regard to the complaints and comments made by people who used the service.

We saw that the provider regularly carried out audits to assess and monitor the quality of the service being provided. The dentist carried out an audit of the X-ray images produced. The provider may find it useful to note that although the results were analysed, we could not see what follow up action was taken to remedy issues found. Further audits were carried out in relation to documents management and patient records and action was taken to address any findings of concern.

A cleaning audit was carried out earlier in the year which identified concerns with the provider of the cleaning services. We saw that this audit was followed up and an alternative cleaner was employed. There were effective procedures in place to regularly assess and monitor the quality of the services being provided.

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 other services less often. 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.

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. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). 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.

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