

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

Lane Ends Dental Practice

407 Blackpool Road, Ashton-on-Ribble, Preston,
PR2 2DU

Tel: 01772726932

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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
Cleanliness and infection control	✓ Met this standard
Requirements relating to workers	✓ Met this standard
Assessing and monitoring the quality of service provision	✓ Met this standard

Details about this location

Registered Provider	Mr Pahlbod Tehranian and Mrs Haideh Kaviani
Overview of the service	Lane Ends Dental Practice is a private dental practice located in Preston. It is easily accessible from the city's main road network and by public transport. The practice has two treatment rooms located on the ground floor and another on the first floor. Wide doorways and walkways provide easy access for people who use a wheelchair. A wide range of dental services are provided including cosmetic dentistry and dental implants. The practice does not provide NHS funded treatment for patients.
Type of service	Dental service
Regulated activities	Diagnostic and screening procedures Surgical procedures Treatment of disease, disorder or injury

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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 21 October 2013, observed how people were being cared for and talked with people who use the service. We talked with staff and reviewed information given to us by the provider.

What people told us and what we found

People told us:

"We covered everything...I was given all the information I needed."

"For me, it's important to find somewhere that's good...I looked at lots of places before I chose here...I chose it because they must be good, looking at the awards they've won...It's top notch, I'd definitely recommend it."

"The dentists are good and pleasant...All the staff here are good."

"I'm sure I could raise concerns with anyone and they'd take me seriously."

People were treated with dignity and respect during all their dealings with the practice. We found the layout lent itself to privacy for people when speaking with reception staff. The practice had made information available for people in many ways to help them to make informed choices about their dental treatment.

People received treatment that was safe and based on an holistic assessment of their individual requirements. The practice had appropriate measures in place to deal with foreseeable emergencies.

The practice was clean and orderly. Good decontamination and infection control processes helped to reduce the risk of cross contamination.

Staff employed by the practice underwent a recruitment process which was fair and open and the provider made necessary checks to ensure staff were fit to undertake the role before any offer of employment was made.

The provider had effective systems in place to monitor and assess the quality of service people received from the practice.

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. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

Reasons for our judgement

People who used the service understood the treatment choices available to them. This is because the provider ensured that treatment was thoroughly discussed with people. Treatment plans were based on an holistic assessment of each person's needs and the outcome they desired.

People were given appropriate information about their oral health and treatment options. The associated risks and benefits were clearly explained to people during discussions with the dentist and treatment coordinator. Information on costs was given to people during discussions. This consultation process took place before people underwent any treatment. This ensured people were well informed, able to express their views and were involved in making decisions about their care and treatment. One person told us; "I've just had over an hour with [staff] to discuss treatment...We covered everything...I was given all the information I needed."

The practice had two treatment rooms on the ground floor and one on the first floor. People who had difficulty climbing stairs were able to be seen in one of the ground floor treatment rooms. The reception, waiting area and toilet facilities were all on the ground floor and accessible by people with reduced mobility.

People told us and we saw that staff treated them with dignity and respect. The layout of the reception area and waiting room gave people the chance to have a private conversation with staff out of earshot of people in the waiting room.

People told us that they were asked for their opinion on the treatment they had received at each visit and felt happy to raise any concerns with the dentists. People were confident that they would be listened to and that any issues they had would be resolved. The provider had implemented a policy regarding respecting the privacy and dignity of patients. This helped to ensure staff understood their responsibilities.

The practice had developed a website which contained a wide range of information about the practice and treatment options available. There was also a range of information available in the waiting area at the practice. This helped to give people information on whether the practice could meet their needs and how different treatments might work for them.

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

One person we spoke with told us; "For me, it's important to find somewhere that's good...I looked at lots of places before I chose here...I chose it because they must be good, looking at the awards they've won...It's top notch, I'd definitely recommend it."

We saw from people's records that the practice obtained relevant information prior to any course of treatment commencing. This included full oral health assessments, medical histories, details of any allergies and what the person hoped to achieve from the treatment.

The digital system used at the practice flagged up to the dentists any particular risks relating to individual people when they accessed their record at the start of each appointment. People's information was reviewed appropriately before beginning any new course of treatment. This ensured the dentists assessed treatment options according to people's needs and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare.

People's care and treatment reflected relevant research and guidance. The dentists had undergone extensive training in their specialisms and were active members of professional bodies. Along with guidance from other professional bodies, this helped them to keep up to date with providing a high standard of treatment for people who used the service.

There were arrangements in place to deal with foreseeable emergencies. We saw the provider had put in place a comprehensive business continuity plan. This contained guidance for staff on how to deal with emergency situations. The practice had appointed a lead person for first aid, had emergency drugs and first aid equipment available. These were checked monthly and staff were suitably trained to deal with emergencies.

The practice was well equipped to deal with its core business. Consideration was given to the needs of people using the service and staff were competent in their roles. People we spoke with confirmed they were happy with the treatment they received, understood their planned treatments and knew what to expect from them.

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. People were cared for in a clean, hygienic environment.

Reasons for our judgement

The registered manager explained and staff confirmed that cleanliness and infection control were taken seriously at the practice. One member of staff was responsible for taking the lead on infection control and the decontamination process. They were undergoing in house training in the subject whilst waiting to attend an external course.

The provider had developed a comprehensive decontamination procedure for the practice. Following audits of their policy they had implemented improvements to practices. A dental nurse took responsibility for ensuring cleaning and decontamination were carried out appropriately and the registered manager checked to ensure tasks were completed to the appropriate standard.

On the day we visited, the premises were clean and tidy. The treatment rooms appeared well maintained as did the equipment in use. Work surfaces and flooring were made from materials that were easy to clean and disinfect.

The practice had a separate room for decontamination which was properly laid out and well equipped. Appropriate information for staff was on display. We observed the dental nurse carrying out a decontamination cycle, in line with written procedures.

Records were kept for testing of equipment including the autoclave and we saw that maintenance logs for the same were up to date. Re-useable instruments were stored appropriately and dated for expiry. Logs were kept of expiry dates so that instruments were not stored any longer than appropriate before undergoing decontamination again.

Hand washing facilities and personal protective equipment (PPE) were available in treatment rooms and the decontamination room. We saw staff using appropriate PPE during the decontamination process and people confirmed staff always used PPE during treatment sessions. PPE was disposed of appropriately between patients. This helped reduced the risk of cross contamination.

We saw evidence that the practice had contracts in place for the safe disposal of waste. Waste was segregated and labelled accordingly, before being stored securely at the rear

of the practice to await collection. Staff displayed knowledge in the safe use of equipment to ensure a hazard free environment.

Requirements relating to workers

✓ Met this standard

People should be cared for by staff who are properly qualified and able to do their job

Our judgement

The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

Reasons for our judgement

The registered manager told us and we saw documentation in personnel records which confirmed the practice had an appropriate recruitment policy and process in place. We saw the practice used a standard application form and interview questions. Responses to questions and scoring were kept on record.

We saw that the provider sought references for new employees, to ensure they were of good character. Checks on people's right to work in the UK and with the Disclosure and Barring Service were carried out prior to any offer of employment. These checks aimed to reduce the risk of employing someone who was not suitable for the role. One person told us; "The dentists are good and pleasant...All the staff here are good."

The practice only employed a small number of staff and ensured everyone was clear about their role and responsibilities. Clear job descriptions were given to new staff and held on their personnel file. We saw evidence that staff were registered with the General Dental Council and that professional indemnity was in place for all clinical staff.

The registered manager described the action they would take if someone was no longer suitable for the role, including referring them to the appropriate professional bodies. The practice had a comprehensive disciplinary policy in place.

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 told us that they were satisfied that their views and opinions were taken on board about treatment and the practice in general. People were given the opportunity to speak with their dentist at every appointment. They were happy that they could raise any concerns and confident that any issues would be dealt with. One person said; "I'm sure I could raise concerns with anyone and they'd take me seriously."

The practice sought feedback from people by way of a satisfaction survey that was always available in the waiting area. People also had opportunity to raise any concerns or make suggestions at any time during a visit to the practice. We saw examples of suggestions people had made which the provider had taken on board and implemented, such as different magazines in the waiting area and tea and coffee facilities. This showed that people were taken seriously and listened to by the provider. It also demonstrated that where possible the provider would implement changes for the benefit of people who used the service.

We saw the registered manager had devised a schedule for audits and reviews of risk assessments which spanned the year. This helped to ensure audits and risk assessments were up to date. We reviewed audits which had been undertaken on record keeping, medical histories and decontamination. We found the audits to be thorough and well recorded.

The results of audits were clearly explained in a report and any issues found were explored. We found that where audits highlighted concerns, the registered manager implemented improvements. For example during the decontamination audit, it was found that the gloves being worn by the nurse were not being thoroughly cleaned. The registered manager implemented a new step to the procedure to ensure this was done. This helped to ensure that the performance of the practice was continually monitored and improvements made as appropriate.

The practice held regular staff meetings. We saw staff signed to say they agreed with and understood the minutes of each meeting. The meetings were used to discuss the

performance of the practice and to relay important information to staff. Staff told us they were able to raise any concerns or make suggestions during meetings or at any other time and were confident they would be listened to by the practice manager.

The practice welcomed patient feedback and had an appropriate complaints policy and procedure on display in the waiting area. We reviewed complaints that had been received by the practice. We found complaints were managed effectively, in line with the policy and procedure.

Records were kept of any adverse/unfavorable incidents. These were thoroughly investigated by the practice manager. A report was produced, with recommendations for changes which could be implemented, if appropriate.

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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