

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

Regent Street Dental Surgery

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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
Safeguarding people who use services from abuse	✓ Met this standard
Cleanliness and infection control	✓ Met this standard
Staffing	✓ Met this standard
Assessing and monitoring the quality of service provision	✓ Met this standard
Complaints	✓ Met this standard

Details about this location

Registered Provider	Mr Babak Ghalekhany
Overview of the service	Regent Street Dental Practice is owned by Mr Babak Ghalekhany and is registered to provide, 'Treatment for disease, disorder and injury', 'Surgical procedures' and 'Diagnostic and screening procedures'. The majority of the dental treatment carried out by the practice is to National Health Service (NHS) dental patients, although they provide a service to a small number of privately paying 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 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 5 June 2013 and talked with staff.

What people told us and what we found

We visited the service on 05 June 2013 between appointments for people's treatments to check the actions and the improvements that the provider had introduced since the last inspection on 28 February 2012.

During this inspection we saw that the provider had updated their safeguarding policy and procedure. New contact details of the safeguarding authorities were added and clearly instructed people and staff on how to report potential abuse. All staff attended safeguarding training and were aware of the protocols for all three local authority safeguarding teams: Cambridgeshire, Peterborough and Huntingdon, where people who used the service were coming from.

We saw that the provider followed the new Department of Health Guidance regarding infection control and had purchased new equipment which improved infection control.

Increased staffing in the service meant that the procedures for treatment, monitoring, infection control and safeguarding were significantly improved and that people received a much better overall service.

The new quality monitoring system introduced since the last inspection enabled the provider to effectively monitor the quality of service and listen to the views of 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

People's needs were assessed and care and treatment was planned and delivered in line with their individual dental care plan.

We saw four people's files that contained records of their medical history collected during their initial registration with the dentist and reviewed when there were relevant changes.

People's planned treatment was detailed in the file and showed that their treatment options were discussed with them. We saw the record for a person where the dentist informed them of the likelihood of the expected outcome of the treatment, allowing them to make a choice between the extraction or treatment of their tooth.

We saw that these records were kept as "active" for two years and then were stored in the dentist's archive. This showed that people's care plans were reviewed and kept up to date which ensured more effective treatment when there was a need for it.

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

During our previous inspection on 28 February 2012 we found that the provider was not meeting this outcome, which meant that people were not ensured that they were protected by the safeguarding procedures in place.

During this inspection, we saw that the practice's safeguarding procedures had been updated and completed. Details of who to contact had been added to the procedure. Staff attended training on how to safeguard children and vulnerable adults and the newest certificates dated December 2012 were added to their files. Information on safeguarding and protection was displayed in the reception area and in the waiting room, clearly informing people about what to do if they had concerns.

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

During our previous inspection on 28 February 2012 we found that the provider was not meeting this outcome, which meant that people were not ensured that they were protected by the appropriate infection control measures and procedures in place.

We saw that the old dental instrument trays had been replaced by new ones. We saw that a new magnifying glass had been bought in order to check the cleanliness of instruments. We saw that records of checking the autoclave were now fully in order and showed when the equipment was checked. The dental nurse showed us the procedure for cleaning the instruments. All instruments were now bagged and stored according to the new Department of Health Guidelines. There were effective systems in place to reduce the risk and spread of infection. This ensured that people's safety was significantly improved by the introduction of effective 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

There were enough qualified, skilled and experienced staff to meet people's needs.

Apart from the dentist, the practice now employed three nurses, an endodontist on a contractual basis, a hygienist and a receptionist. One of the nurses had been made responsible for the administrative aspects of the service. She had introduced a range of monitoring procedures, including checking medication, auditing cleaning records, the complaints folder and records and a system to monitor the quality of the service. This ensured that people's views were now taken into account, analysed and used to improve the service. Improved staffing also meant better contact with people who used the service and overall better service, as seen in the analysis of quality monitoring surveys.

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 use the service were asked for their views about their care and treatment and they were acted on.

We saw the analysis of the last survey carried out as a part of the monitoring process. This new system consisted of consulting with approximately ten randomly chosen patients, meeting with them, collecting their views and analysing the results. The results of the survey showed overall 100% satisfaction with the service.

We checked cleaning audits, autoclave cleaning audits, staff training records and records related to medication including the monthly audits. They showed that the provider monitored quality of the service.

The surgery was awarded a five star rating in the NHS Choices feedback in December 2012, showing that the other regulators also monitored the practice and did not have concerns about the treatment offered to people.

Complaints

✓ Met this standard

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. Comments and complaints people made were responded to appropriately.

Reasons for our judgement

During our previous inspection on 28 February 2012 we found that the provider was not meeting this outcome, which meant that people were not confident how to complain if they were not happy with the first outcome of their complaint.

During our inspection on 05 June 2013, we saw that the complaint procedure had been updated and now included the advice what steps people could take if they were not happy with the service. We saw a newly introduced 'Complaints' folder that would be used to help the provider analyse the complaints and improve the service. A nurse was the designated person to oversee the complaints and carry out an analysis in order to ensure that the service learnt from potential complaints. At the time of the inspection there had been no recorded complaints.

The updated complaints procedure was now displayed in the reception and waiting area, enabling people who used the service to make a complaint if they wished.

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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