

Review of compliance

Smilemore Limited t/a Smilemore Dental Care
Smilemore Dental Care

Region:	London
Location address:	63 St Johns Wood High Street London NW8 7NL
Type of service:	Dental service
Date of Publication:	September 2012
Overview of the service:	Smilemore Dental Care is a private dental clinic that treats both children and adults. The clinic offers all forms of general dental treatments as well as orthodontics and cosmetic dentistry. Staff at the clinic include a dentist, a dental nurse and a hygienist.

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

Our current overall judgement

Smilemore Dental Care 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 10 August 2012, talked to staff and talked to people who use services.

What people told us

We spoke with two patients, both of whom said that they were given adequate information about the service including treatment fees. One patient said that staff treated him with respect and described staff as "friendly and professional".

Patients told us that they were satisfied with the care they received and that staff gave them copies of their treatment plans. The clinic was described by patients as always being clean and well maintained.

What we found about the standards we reviewed and how well Smilemore Dental Care 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. Patient's privacy, dignity 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. Patients experienced care and treatment 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. Patients 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.

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

The provider was meeting this standard. Patients were cared for in a clean, hygienic environment and were protected from the risk of infection.

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

The provider was meeting this standard. Patients 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 was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people receive.

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

We spoke with two patients, both of whom said that they were given adequate information about the service including treatment fees. One patient said that staff treated him with respect and described staff as "friendly and professional".

Other evidence

Patients understood the treatment choices available to them because the dentist gave each patient verbal explanations about their treatment. Staff told us that patients were advised on treatment options and enabled them to make informed decisions.

Patients were given appropriate information regarding their treatment. The practice had an up to date website where information on the practice, including treatment fees were available.

Patients' diversity, values and human rights were respected. The dentist treated patients in private and with a dental nurse present. The clinic was not accessible to patients who used wheelchairs, but there were arrangements in place for such patients to be treated at an alternative practice if necessary. Staff were able to communicate with patients who spoke limited or no English because relatives or staff members acted as translators.

Our judgement

The provider was meeting this standard. Patient's privacy, dignity 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

Patients we spoke with said that they were satisfied with the care they received and that staff gave them copies of their treatment plans.

Other evidence

Patients' needs were assessed and care and treatment was planned and delivered in line with their individual treatment plan. Staff told us that patients completed a medical history questionnaire before dental examinations were carried out. Investigations including x-rays were carried out, so that diagnoses were made.

Treatment options were discussed with patients and their consent was sought prior to treatment. Staff told us that patients were given written copies of their treatment plans and electronic records of their treatment were maintained. The dentist told us that where appropriate, the practice followed best practice NICE Guidance e.g. extracting wisdom teeth.

There were arrangements in place to deal with foreseeable emergencies. The practice had medical emergency policies in place and all staff were trained in what to do in such circumstances. There were suitable medicines and equipment to deal with medical emergencies including oxygen and staff knew where these were kept. Emergency equipment was checked and recorded by staff on a monthly basis.

The provider may find it useful to note that whilst we were told that emergency medicines were checked regularly, there was no evidence that this was being recorded.

Our judgement

The provider was meeting this standard. Patients experienced care and treatment 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

We spoke with patients but their feedback did not relate to this standard.

Other evidence

Patients 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. The dentist was the nominated person to lead on child protection and safeguarding vulnerable adults within the practice.

The clinic had policies in place on child protection and safeguarding vulnerable adults and staff had attended the relevant training. Staff we spoke with knew how to recognise the signs of abuse and how they should be reported internally. There was a written procedure on how to escalate concerns about a patient's welfare, which included details on how to contact child protection and safeguarding vulnerable adults teams at the local authority. This information was displayed for easy access by staff members.

Our judgement

The provider was meeting this standard. Patients 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.

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

Patients we spoke with said that the clinic was always clean and well maintained.

Other evidence

There were effective systems in place to reduce the risk and spread of infection. The dentist was the person who led on infection control, which ensured there was a named individual responsible for overseeing standards and practices. There was an infection control policy that included procedures for the decontamination of instruments. The environment was clean and tidy on the day of the inspection.

The decontamination procedure was explained to us by a dental nurse. There was a dedicated decontamination room with separate sinks for hand washing, cleaning and rinsing instruments. The procedure ensured that reprocessed instruments were free from visible contaminants prior to sterilization in an autoclave. There were clearly identified clean and dirty areas that minimised the risk of clean instruments becoming contaminated. Sterilized instruments were packaged and stored appropriately, which ensured that they would not become contaminated before re-use.

We saw evidence that the clinic carried out decontamination audits in accordance with Health Technical Memorandum (HTM 01-05), which details the government standards for decontamination in dental practices. The last audit was carried out in June 2012. There was also evidence that the autoclave was checked regularly to ensure it was working effectively.

There was evidence that a risk assessment for legionella bacteria in the water supply system had been carried out in the past year. The result of the assessment was

satisfactory.

The provider may find it useful to note that only after sterilization, were reprocessed instruments inspected under an illuminated magnifying glass to ensure that satisfactory standards of cleaning were achieved. This meant that instruments were not inspected as part of the cleaning process prior to sterilization, in accordance with HTM 01-05.

Our judgement

The provider was meeting this standard. Patients were cared for in a clean, hygienic environment and were protected from the risk of infection.

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 patients but their feedback did not relate to this standard.

Other evidence

Staff received appropriate professional development. The clinic staff included a dentist, dental nurse and hygienist. Staff told us that all new employees received an induction to the clinic and existing staff attended mandatory training including safeguarding vulnerable adults, resuscitation and infection control.

There was a mechanism in place for the dentist to appraise and give feedback to dental nurses on their performance. However, whilst we were told that appraisals should be completed on an annual basis, they tended to occur less frequently.

Our judgement

The provider was meeting this standard. Patients 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 patients but their feedback did not relate to this standard.

Other evidence

Patients were asked for their views about their care and treatment. Satisfaction questionnaires were given to patients on-site. There was evidence that the provider took action based on patient feedback, for example installing a hand rail to the stairs.

Decisions about care and treatment were made by the appropriate staff at the appropriate level. There was evidence that clinical audits were carried out, for example on waiting times and x-ray reports. Environmental and fire risk assessments were also carried out.

The clinic had policies on handling complaints and serious untoward incidents (SUIs). There were no complaints or SUIs in the past year.

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.

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
Audience	The general public
Further copies from	03000 616161 / www.cqc.org.uk
Copyright	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA