

Review of compliance

<p>Mr. Bryan Bennett Bamford Dental Practice</p>	
<p>Region:</p>	<p>North West</p>
<p>Location address:</p>	<p>Norden Road Bamford Rochdale Greater Manchester OL11 5PT</p>
<p>Type of service:</p>	<p>Dental service</p>
<p>Date of Publication:</p>	<p>March 2012</p>
<p>Overview of the service:</p>	<p>Bamford Dental Practice provides private and NHS dental treatment in a two storey building located on a small shopping precinct in Bamford, Rochdale. Seven dentists, a practice manager, several dental nurses, two dental hygienists, one decontamination nurse and one receptionist work at the practice. Dental treatments are provided to people of all ages in the seven</p>

	<p>treatment rooms. These include orthodontics and implants. A portable ramp is available for people who require wheelchair access.</p>
--	---

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

Our current overall judgement

Bamford Dental Practice was meeting all the essential standards of quality and safety.

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 21 February 2012, checked the provider's records, talked to staff and talked to people who use services.

What people told us

We asked patients for their views on the dental service they received. Patient's comments included "Excellent" and "Very good". Patients told us that they thought staff were "Very polite, helpful and respectful" and "Very friendly and professional".

One patient told us that they thought the receptionist and dental staff were helpful and gave their time to explain and answer questions without rushing. Patients told us that the dentist explained the dental procedures to them. They said they were told how much treatment would cost and signed their agreement to treatment on a consent form.

Patients said the dental practice and treatment rooms were clean and tidy and they were asked to wear protective eye glasses.

We saw that the dental practice had requested patient feedback through a 'satisfaction survey' in September 2011. Responses included "Helpful staff at all levels. Availability of appointments and a good dentist" and "Locality and foremost quality of service provided". A separate satisfaction survey for patients attending the orthodontist clinics was undertaken in July 2011 and the responses received were all positive.

The NHS Choices website has two positive comments about this dental practice.

What we found about the standards we reviewed and how well Bamford Dental Practice 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

People who use the service were treated with respect and involved in discussions about their dental treatment.

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

People received effective, safe and appropriate treatment.

Outcome 07: People should be protected from abuse and staff should respect their human rights

Staff were trained to respond to suspected child abuse and knew what action to take if they suspected an adult patient was being abused.

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

Systems were in place to ensure the dental practice was clean and people were protected from risks of infection.

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.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

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

Patients told us that care and treatment was either "Excellent" or "Very good". They said staff were "Helpful", "Respectful" and "Attentive". Patients said that dental treatments were explained to them and they signed consents forms agreeing to the prescribed treatment plans. One patient said they were "Always told what was being done". Patients told us they thought the dental surgeries were clean and that staff wore protective clothing and equipment. Patients told us that staff were "Very polite, helpful and respectful" and "Very friendly and professional".

Other evidence

The dental practice had treatment rooms located on the ground and first floor. Each floor had its own waiting room area, both of which had notice boards displaying a variety of leaflets, which included information on the NHS dental banding charges for treatment, Denplan (a monthly payment plan for private dental treatment) and how to make a complaint. The reception area, on the ground floor also had a range of dental care products for sale.

We saw that the dental practice asked patients for their feedback in a satisfaction survey. We looked at the returned patient questionnaires and saw that responses were positive. We saw that the returned questionnaires were reviewed and the results

discussed with the staff at a team meeting.

The practice manager told us that the dental practice had received one complaint in March 2011. The records showed that this had been responded to appropriately. The practice manager told us that they preferred to address any concerns immediately as they were raised. She told us that any patient feedback was discussed during team meetings. We saw minutes of staff meetings to evidence this.

We saw both computerised and paper records that showed people were consulted about their prescribed dental treatment. We saw that patients receiving either NHS or private dental treatment signed the appropriate consent forms agreeing to the treatment.

The dental practice used computerised recording of patient dental treatment records including medical history. The computer programme was used to explain to the patient how and why treatment was required. For example, the computer programme could run a simulation of the prescribed treatment so patients could see exactly what would happen during their dental treatment. Staff and patients confirmed that all consultations were conducted in the privacy of a treatment room.

Our judgement

People who use the service were treated with respect and involved in discussions about their dental treatment.

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 told us that they were satisfied with the care and treatment they received. They told us that the dentist gave them information verbally and in leaflet form about the treatment, they needed. They said that their dental treatment plan was explained to them and they were given enough time to make a decision about whether to go ahead with treatment.

Satisfaction surveys showed that people were satisfied with dental health care they received. One response from the orthodontic satisfaction survey stated, "The overall treatment and time spent with the patient was outstanding throughout the course of treatment".

Other evidence

The practice had attained the British Dental Association (BDA) Good Practice Scheme Award. The BDA Good Practice Scheme is a quality assurance framework for dental practices. By becoming members of the scheme, practices demonstrate a visible commitment to providing quality dental care to nationally recognised best practice standards.

We looked at computerised dental records and saw that information about patient dental examinations were recorded. This included information of dental examination, treatment planning and evaluation and assessment of x-rays. We saw that the cost of the prescribed treatments were detailed and paper copies of these were provided to patients.

Two dental hygienists worked at the practice. We heard that they were involved in patient education for example, in the correct techniques to clean teeth and good nutrition. Toothbrushes and other dental hygiene products were available at the reception.

We saw that the practice had two dental nurses trained in taking x-rays. We saw that there was a report for the current year that demonstrated compliance with radiological safety. The practice employed an external accredited company for radiological advice.

We saw that records of incidents were recorded with the actions taken by the dental practice staff to reduce the risks of incidents occurring again. We saw minutes of staff meetings, which showed that information about safety alerts, and incidents were communicated to staff. We looked at a sample of staff files and these contained a wide range of training certificates including health and safety and the different aspects of dentistry. Staff also had annual appraisals. These reviewed individual progress, continuing professional development and understanding of policy, procedures and practices.

The service had a defibrillator, an emergency drugs kit and oxygen available. There were records of the oxygen cylinder being checked to ensure that the flow meter was in working order and that there was a sufficient level of oxygen available in the event of an emergency. Emergency drugs were kept securely and these were checked at regular intervals. The emergency kit was stored in an area accessible to all the dental treatment rooms and there was a first aid kit in the reception. There was a designated first aider and all the staff had received annual training in life support and dealing with medical emergencies.

Our judgement

People received effective, safe and appropriate treatment.

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 did not discuss this outcome with patients who use the service.

Other evidence

We looked at a sample of staff training files during our visit. We saw that staff had certificates of training in safeguarding children in their personal folders. Comprehensive policies and procedures were also available for safeguarding children and this included a range of contact telephone numbers. A general safeguarding policy was also available. Copies of the procedures were also displayed for staff to refer to should they need to.

The practice manager told us that staff had not received training specifically in safeguarding vulnerable adults but that staff would report concerns to a senior person and the concerns would be forwarded on to the local Primary Care Trust (PCT). The practice manager confirmed she would obtain a copy of the local authority's safeguarding procedures and ensure that all staff were made aware of these.

We were told that some staff did not have enhanced level Criminal Records Bureau (CRB) checks in place but that this was to be addressed in the future. Less than one week after our visit, the practice manager confirmed to us, that CRB checks were being carried out for all staff.

Our judgement

Staff were trained to respond to suspected child abuse and knew what action to take if

they suspected an adult patient was being abused.

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 told us that they thought the dental practice was clean and tidy. They told us that staff wore protective clothing and glasses when they were receiving treatment.

Other evidence

Staff told us they wore personal protective clothing such as gloves and glasses when working in the dental surgery. Patients confirmed that staff wore gloves. We were told that staff changed out of their dental uniforms at lunchtime and before leaving the building. This practice is important in reducing the risks of possible cross infection.

We had a walk around the dental practice and saw that all areas were clean and tidy. Areas were well maintained and floor coverings were washable.

There was dedicated hand washing facilities in the dental treatment rooms. Policies and procedures for correct hand washing were available and staff told us they were aware how to wash their hands correctly.

We were told that the dental nurses were responsible for the cleaning of the surgeries. They cleaned equipment in the dental treatment rooms between patient appointments. A cleaning company was employed to clean the communal areas of the dental practice. Cleaning schedules and audits were in place.

All dental practices must comply with government legislation on decontamination of instruments used when providing dental treatment. The document (Health Technical Memorandum 01-05: Decontamination in primary care dental practices (HTM01-05)) explains what the essential quality requirements are that dental practices must follow to meet satisfactory levels of decontamination and so reduce the risks of passing on

infections between patients. In accordance with the above guidance, we saw that there was a separate decontamination room for cleaning used dental instruments. A decontamination nurse was employed specifically to manage the cleaning, decontamination and sterilisation of dental instruments.

The decontamination nurse explained the decontamination pathway from the cleaning of used instruments, through to the sterilisation and bagging of cleaned sterilised instruments. These were dated and stored safely. The practice manager told us that plans to extend the decontamination room and so improve decontamination practices were going to be implemented. The practice manager told us that all dental nurses were trained in the decontamination of dental instruments. This meant if the decontamination nurse was absent then some one else could continue following the decontamination policy and procedures.

We saw there were infection prevention and control policy and procedures available and some of these were displayed on the walls in the treatment rooms. We saw staff training records that showed that dental nursing staff had received training in decontamination as part of their personal development. The staff we spoke with were able to demonstrate knowledge and awareness of their responsibilities for infection prevention and control.

Our judgement

Systems were in place to ensure the dental practice was clean and people were protected from risks of infection.

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.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, 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