

Review of compliance

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Yew Tree Dental Practice

Region:	West Midlands
Location address:	24 Maple Drive Yew Tree Estate Walsall West Midlands WS5 4JJ
Type of service:	Dental service
Date of Publication:	September 2012
Overview of the service:	Yew Tree Dental Practice provides NHS and private dental services to people of all ages.

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

Our current overall judgement

Yew Tree Dental Practice 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 3 July 2012, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

During this inspection we conducted telephone interviews with four people who used the service, spoke with the provider and staff at the practice on the day we visited.

We found that people had the information they needed to help them make informed choices about their treatment. One person told us "I have the information I need and they are very helpful and will answer any questions I ask."

People told us they had no concerns about the care and treatment that they received from the dentists at this practice. One person said "I think they are very good and the best ones I have been to."

We found that people received care and treatment in a clean and hygienic environment. People we spoke with had no concerns about the cleanliness of the environment.

People we spoke with were complimentary about the staff working at the practice. We found that staff were trained and supported to deliver care and treatment safely and to an appropriate standard.

We found that the provider had systems in place to monitor the service to ensure that people receive a quality service. People we spoke with confirmed that the treatment they received was of good quality.

What we found about the standards we reviewed and how well Yew Tree 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

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

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

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

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

The provider was meeting this standard. People were cared for in a clean, hygienic environment.

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. People 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 received.

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

People we spoke with said they had the information they needed. One person said "I have the information I need and they are very helpful and will answer any questions I ask."

We saw that there was information about the service available in the reception area. This included information about oral care and the opening times for the practice. Up to date information was also available on NHS charges. We saw no information about the charges for private treatment and we discussed this with the provider. The emergency contact number was available in the reception area, so people were aware of who to contact if they needed emergency dental care.

The complaints policy as well as other key practice policies were on display in the reception area and treatment room for people to see. The provider had access to translation and interpreting service if needed. We saw that information could be made available in different languages and formats if required. This meant that people had access to the information they needed to help them make decisions about their treatment.

There was a small step leading up to the practice, we were told that a portable ramp

was available for use if necessary. The treatment room and toilet were on the ground floor, so people with restricted mobility could access the service.

We spoke with the dental nurse on duty who confirmed that doors were closed during people's treatment. People we spoke with confirmed that their privacy and dignity was respected during treatment.

Other evidence

Sandwell Primary Care Trust told us that they did not have any concerns with this practice.

Our judgement

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

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

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

People told us that they were very happy with the care and treatment they received from this dental practice. One person said "I think they are very good and the best ones I have been to." Another person said "It's a good dentist, they do what you want them to do."

We looked at the records of four people who recently used the practice these were detailed and showed evidence of examination of the gums and soft tissue and external examination of the face and jaw. We saw that where x rays were necessary these were recorded. The records we saw showed that people's medical history were recorded. People told us that they were asked if there were any changes in medical conditions and medication at each visit. The records we saw gave clear details about the presenting problem, the diagnosis and the treatment plan.

The records we saw showed evidence of risk assessment for each person, which indicated any oral health risks. Recall for dental checks was based on current guidance and people told us they had a six monthly check up at the dentist.

The emergency resuscitation kit was kept in the treatment room and was accessible for use quickly. There was a system in place for checking that medicines and equipment used for emergency resuscitation were in date and ready for use. A sample of the

emergency medicines that we looked at showed that they were in date at the time of our visit. Staff we spoke with were able to tell us what they would do in the event of a medical emergency. Staff confirmed that they received emergency resuscitation training. This meant that staff should be able to respond to people's medical needs in an emergency.

There were three dentists working at the practice, so they were able to provide continuity of treatment. The procedure to be used in an emergency was on display in the reception area. This meant that the provider had systems in place for dealing with emergencies.

Other evidence

Sandwell Primary Care Trust told us that they did not have any concerns with this practice.

Our judgement

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

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

People told us they had no concerns about the cleanliness of the surgery. One person said "The surgery is clean and the dentist always wears gloves."

A dental nurse took us through the process used for decontamination and sterilisation of used instruments. This consisted of the instruments being soaked and scrubbed in disinfectant. The instruments were then checked for debris under light. If they were visually clean they were oiled, placed in the autoclave then bagged when sterilised and marked for use within 21 days. We looked at a sample of the sterilised instruments stored in the treatment room and these were all in date. Currently the decontamination process was being done in the treatment room. The provider told us that they were setting up a separate room for this process and would also include a washer disinfectator as part of the decontamination process.

We saw that records were kept of the daily decontamination cycle. However the process used for storing the records was not robust. This was because we asked the nurse to show us current samples of the decontamination cycles and the nurse was unable to locate the records. We discussed this with the provider at the time of the inspections.

We were told that the treatment room was cleaned down after each patient. There was a cleaning process in place for the start up and shut down of the surgery, but a record was not kept of this schedule. However on the day we visited the surgery was visibly clean and well organised.

A waste disposal policy was in place for the collection of clinical waste. There were

supplies of hand soap, paper towels and gloves for staff to use. There were hand washing facilities available, so staff were able to wash their hands appropriately after treatment.

We saw evidence to show that everyone involved in clinical treatment had received infection control training. Infection control policies were in place to support and guide staff on how to reduce the risks of cross infections. The provider said they had completed an audit of the infection control system, we did not see sight of this. We discussed with the provider the need for documents to be available for inspections in the future.

Other evidence

Sandwell Primary Care Trust told us that they did not have any concerns with this practice.

Our judgement

The provider was meeting this standard. People were cared for in a clean, hygienic environment.

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

People we spoke with told us that the staff were helpful. One person said "They are very helpful and pleasant I have recommended my daughter to go."

There were three dentists working at the practice, two dental nurses and a practice manager.

Staff received appropriate professional development. We saw that staff kept their own portfolio which demonstrated their continual professional development and a copy was available at the practice for some staff.

We saw certificates to show that staff had attended training in various topics, such as infection control and emergency resuscitation. We spoke with one trainee dental nurse who told us that they received a full induction into her role at the practice. A senior member of staff was also appointed as a mentor, so they received support and supervision every few weeks.

We saw samples of the minutes from practice meetings and we were told that there was a system in place for annual competency appraisal of staff. The nurse we spoke with had not been in post a year so had not yet had an annual appraisal. This meant that staff were supported in their role.

Staff told us that they received child protection training last year, but had not yet received safeguarding vulnerable adult training. There was information and guidance available about safeguarding vulnerable people in the treatment room and reception

area. The member of staff we spoke with knew that they could report concerns to external agencies should they have a need to.

Other evidence

Sandwell Primary Care Trust told us that they did not have any concerns with this practice.

The provider may find it useful to note that staff training in safeguarding vulnerable adults would improve staff's awareness, so they would be better equip to identify concerns in this area.

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.

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

People we spoke with told us they had no complaints about the treatment they received.

We had not received any complaints about the practice. The practice had not received any complaints in the last 12 months. A system was in place for handling complaints and concerns. The complaints procedure was on display in the reception area for people to see.

There was a suggestion box in the reception area for people to make comments should they wish. We looked at a sample of comments that were made. One person commented "I think it's a fantastic and really friendly practice. They are really good with children." Another person commented "Very nice staff, all polite. Need to get a new desk I hope you can consider this." The provider told us they had repainted the reception desk following the comment so that the desk would look more attractive. This indicated that the provider would act on suggestions made by patients.

We were told that patient surveys had been sent out six months ago, but these had not yet been analysed, so we could not tell the outcome of the surveys.

We saw that public liability and indemnity insurance certificates were in date for the dentists. Safety certificates were available for the equipment used for people's care, such as the x-ray machine, autoclaves, and washer vessel. Other electrical equipment had up to date safety checks. A risk assessment of the premises had been completed.

This was seen to cover the areas of risks associated with the practice. This meant that the provider had systems in place to ensure that people receive safe care and treatment.

We saw that prescriptions were kept in a locked cupboard which only the dentist had access to. This meant they were safely stored. We saw that there was a procedure in place for checking that equipment was in safe and full working order each morning. We saw that there were systems in place to monitor the expiry dates of medication. The dentist told us that they received patient safety warnings from the Primary Care Trust.

A process was in place for recording incidents and we were told that no serious incidents had occurred at the practice to date.

We saw that regular audits were completed for various aspects of people's care. This included waiting times, medical records, soft tissue examination, medical history, consent and treatment plans. This meant that the provider had systems in place to monitor people's care.

We saw that all staff had the necessary checks to ensure they were safe to work with people who used the service.

Other evidence

Sandwell Primary Care Trust told us that they did not have any concerns with this practice.

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 received.

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

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