

Review of compliance

Dr. Pieter Claassen
Hanover House Dental Clinic

Region:	South East
Location address:	Hanover House 203 High Street Tonbridge Kent TN9 1BW
Type of service:	Dental service
Date of Publication:	May 2012
Overview of the service:	<p>Hanover House Dental Clinic provides dental care to adults in the local community. The practice does not undertake any NHS dentistry, and treats only private patients.</p> <p>Clinical staff included three dentists, three dental nurses, and two part time dental hygienists. They are supported by a full time receptionist and a cleaner.</p>

	<p>The practice is open Monday to Friday, from 8.30am – 5pm. Car parking is available nearby.</p>
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Hanover House Dental Clinic was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.

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 March 2012, checked the provider's records, 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

People told us they were very satisfied with the clinic. They said they never had to wait long for appointments, and in an emergency they had always been seen on the same day. People said their treatment plans were always explained and discussed with them, including choices about treatment and costs. People said that the clinic was always clean, and all the staff were friendly, welcoming and respectful.

What we found about the standards we reviewed and how well Hanover House Dental Clinic 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 are involved in making decisions about their care and treatment. People are treated with respect and their privacy and dignity is upheld.

Overall, we found that Hanover House Dental Clinic was meeting this essential standard.

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

People experienced effective, safe and appropriate care, treatment and support that met their needs.

Overall, we found that Hanover House Dental Clinic was meeting this essential standard.

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

Not all staff have a Criminal records Bureau check, and not all staff had received training in safeguarding people from abuse. This may mean some patients are not protected from the risk of abuse.

Overall, we found that Hanover House Dental Clinic was meeting this essential standard but to maintain this we have suggested that some improvements are made.

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

People were protected by infection control practices.

Overall, we found that Hanover House Dental Clinic was meeting this essential standard.

Actions we have asked the service to take

We have asked the provider to send us a report within 14 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

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

People said they were involved in making decisions about their care and treatment. They told us that all aspects of their care was discussed with them in private, and that this included treatment options, their medical history, and costs. People told us they were always treated with respect and dignity by all staff, and found the clinic staff professional and friendly.

Other evidence

We looked at patient records to see how people and their representatives were involved in making decisions about their treatment. We saw that patient records contained a treatment plan, and that the plans had been signed by the patient. The plan showed the proposed dental work, the number of visits required, and the total cost of the treatment.

The practice manager confirmed that the patients were given their own copy of the treatment plan.

The practice manager informed us that as well as having a written treatment plan, all treatments were discussed in detail with patients by the dentist treating them, and that this discussion included talking about health issues, and providing information about possible risks to teeth and gums. For example, the effects of smoking and diet.

The practice manager said that for patients who required complex treatment, they were offered a longer discussion about their treatment with a senior dental nurse and the practice manager.

Patient records are on a computer system. Once the patient has signed their treatment plan, this is scanned onto their patient record on the computer. All records are secured and are password protected.

As well as being involved in discussions with the clinical staff about their treatment, people who used the Hanover House Dental Clinic also had access to video information in the waiting room. Videos related to treatments offered at the clinic, and also gave updates on recently passed exams by the dental team. Patients are also offered the choice of viewing videos about treatment at home. The links to these videos were emailed to patients.

We looked at other records to see how the clinic ensured people had their views about the clinic taken into account. We saw that people had access to survey forms in reception, and a sealed box was beside the surveys for people to put the completed forms in. The practice manager told us that surveys were not generally filled in, but the on line survey was more frequently used. Information from these surveys was not formally analysed. The practice manager told us that if a patient raised a concern, they were contacted to discuss it further. Any negative comments arising from surveys were discussed in staff meetings.

We saw that although the clinic does have a complaints procedure, it is not displayed. This means that patients might not know how to raise a concern. The practice manager told us that when they received a complaint, the patient was always sent the clinics' complaint code of practice, along with a letter of acknowledgement and an explanation of what would happen next.

Our judgement

People are involved in making decisions about their care and treatment. People are treated with respect and their privacy and dignity is upheld.

Overall, we found that Hanover House Dental Clinic was meeting this essential standard.

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 said that their medical history was always discussed at every visit.

People said they feel safe and cared for by the dental team, because the clinical staff had made sure they knew their current health needs well, and that this was taken into account when undergoing dental treatment.

People told us that the appointment system was efficient, and there was never a long wait for an appointment. People said that when they had a dental emergency, the Practice had always fitted them in on the same day.

Other evidence

Patient records showed that a thorough medical history was taken. These were updated at all subsequent visits. Staff told us, and people using the service confirmed, that people's medical history was discussed with patients prior to any treatment.

As well as being given an individual treatment plan in which treatment and costs are recorded, people's notes also stated that discussion had taken place with the patient about their treatment.

For adults who may lack capacity to make decisions or choices about their treatment, the practice encouraged a representative to accompany them. Treatment plans were discussed with the patient, and if necessary the patient's representative would be involved in the discussion.

All staff at the Practice were trained in basic life support. This was updated annually. We saw that the provider had ensured that reception staff had protocols in place to summon the emergency services if required.

Our judgement

People experienced effective, safe and appropriate care, treatment and support that met their needs.

Overall, we found that Hanover House Dental Clinic was meeting this essential standard.

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

There are minor concerns with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

People told us they trusted the dentists and staff and they felt safe and well cared for by the team at the clinic.

Other evidence

Discussion with the practice manager and clinical staff showed they had some understanding of who to inform if they had a concern that a patient was at risk of abuse or was suffering abuse.

However, training records showed that the staff had not had training in safeguarding people from abuse.

One member of clinical staff spoken to had recently attended a talk about the Mental Capacity Act. They were able to tell us about how they would ensure a patient who did not have capacity to make decisions could be supported by the team at Hanover House Dental Clinic. They gave examples of ensuring a carer or a family member was present, and told us about holding a 'best interest meeting'.

Records showed that the clinic has adult protection policies in place, along with phone numbers and contact details should a referral need to be made.

Records showed that only the dentists at the clinic had a Criminal Bureau Records check (CRB). We asked if the provider had put a risk assessment in place to address the issue of staff working with vulnerable adults without having CRB clearance or

checks. We were told that a risk assessment was not in place.

Records of staff meetings minutes did not record any discussions about safeguarding vulnerable adults.

The practice did not have a policy on dealing with physical and verbal abuse from patients.

However, when spoken to, staff were aware of the procedures for dealing with this behaviour.

Our judgement

Not all staff have a Criminal records Bureau check, and not all staff had received training in safeguarding people from abuse. This may mean some patients are not protected from the risk of abuse.

Overall, we found that Hanover House Dental Clinic was meeting this essential standard but to maintain this we have suggested that some improvements are made.

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 always found the clinic was clean and had no concerns over cleanliness or infection control.

Other evidence

Records showed the practice had policies and procedures in place to manage cleanliness and infection control. All clinical staff had annual training in infection control.

Formal cleaning schedules were in place for the practice, including decontamination cleaning schedules. These were supported by daily audits regarding the cleaning of dental instruments.

The clinic does not have a designated decontamination room. Decontamination of instruments was carried out in the surgeries. We saw that clinic staff followed correct protocols; the room was divided into two sides; one side for the used instruments, and the other side for the decontaminated instruments.

The clinic had suitable equipment in place for the decontamination of instruments.

All clinical staff wear uniforms. The uniforms were cleaned daily at 60 degrees. Uniforms were not worn outside the practice.

Our judgement

People were protected by infection control practices.

Overall, we found that Hanover House Dental Clinic was meeting this essential

standard.

Action we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Diagnostic and screening procedures	Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 07: Safeguarding people who use services from abuse
	<p>Why we have concerns: Not all staff have a Criminal records Bureau check, and not all staff had received training in safeguarding people from abuse. This may mean some patients are not protected from the risk of abuse.</p> <p>Overall, we found that Hanover House Dental Clinic was meeting this essential standard but to maintain this we have suggested that some improvements are made.</p>	
Surgical procedures	Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 07: Safeguarding people who use services from abuse
	<p>Why we have concerns: Not all staff have a Criminal records Bureau check, and not all staff had received training in safeguarding people from abuse. This may mean some patients are not protected from the risk of abuse.</p> <p>Overall, we found that Hanover House Dental Clinic was meeting this essential standard but to maintain this we have suggested that some improvements are made.</p>	
Treatment of disease, disorder or injury	Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 07: Safeguarding people who use services from abuse

	<p>Why we have concerns:</p> <p>Not all staff have a Criminal records Bureau check, and not all staff had received training in safeguarding people from abuse. This may mean some patients are not protected from the risk of abuse.</p> <p>Overall, we found that Hanover House Dental Clinic was meeting this essential standard but to maintain this we have suggested that some improvements are made.</p>
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The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us within 14 days of the date that the final review of compliance report is sent to them.

CQC should be informed in writing when these improvement actions are complete.

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

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