

Review of compliance

<p>Hurlfield Limited Hurlfield Dental Practice</p>	
<p>Region:</p>	<p>Yorkshire & Humberside</p>
<p>Location address:</p>	<p>49 Hurlfield Road Sheffield South Yorkshire S12 2SD</p>
<p>Type of service:</p>	<p>Dental service</p>
<p>Date of Publication:</p>	<p>February 2012</p>
<p>Overview of the service:</p>	<p>Hurlfield Dental Practice provides dental treatment to both NHS and private patients. The practice has a contract with Sheffield PCT to offer NHS care to children and adults. The practice has eight dentists. The surgery is a detached building that has been extended to provide seven surgeries and a reception area and waiting room. One of the surgeries is on the first floor and is accessed via stairs .A patient</p>

	toilet is available and the practice has disabled access to six of the surgeries.
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Hurlfield 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 31 January 2012, talked to staff and talked to people who use services.

What people told us

We spoke privately with four people who were attending the practice for check ups or treatment. All four people told us that they were "Very pleased" with all aspects of the service. They told us that staff were "Very friendly and "Professional." One person said "I've been coming here for years, it's a busy practice but it runs really well." Another said "I get a very good service here, beginning at reception." Everyone commented on the cleanliness of the practice. One person said "The surgery is spotless."

What we found about the standards we reviewed and how well Hurlfield 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 understand the treatment available to them and are provided with enough information to enable them to make an informed choice. People's privacy, dignity and confidentiality are recognised and maintained.

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

The delivery of treatment is effective, appropriate and flexible to meet individual needs. The service uses appropriate and accepted guidance in a consistent way.

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

People who use the service are protected from abuse. Staff are aware of their responsibilities with regard to safeguarding and have had some training on how to identify and react to potential abuse.

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

People who use the service are protected by effective arrangements based on national guidance for the prevention and control of risks from 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

People said they understood the care and treatment they were receiving and said the dentists had given them choices and different options and explained the procedures before and during treatment. One person told us: "The dentist explains what treatment I need, what my choices and options are and they explain this to me in a simple way." All people that we spoke with said that staff always took into consideration their privacy and dignity. One person said "All the staff are excellent the receptionist, nurses and dentists, all of them, they are always professional." One person said "I've never needed to complain but if I was concerned about anything I would go straight to the staff and I feel confident they would sort it out for me."

Other evidence

In the reception and waiting area we saw that there was a variety of useful and relevant information for patients. For example the complaints procedure, costs of treatments, opening hours and emergency contact details. Staff told us that information in other formats, for example, other languages and large print were made available upon request. A poster was displayed which advertised a translation service for people whose first language was not English.

The dentists explained to us how people were encouraged to be involved in their care

and treatment. We observed that people were given appropriate time for their treatment and consultations. Throughout the inspection we saw that all staff spoke to people in a respectful and friendly manner.

We looked at a sample of treatment plans. All the plans were computerised. These showed what treatment people had received and the cost of the treatment. Information about people's medical history was recorded and reviewed each time a new course of treatment began. People were asked to sign the plans to confirm that they understood their treatment and that they had consented to the treatment. Accompanying adults signed the plans for treatments provided to children.

We saw that a 'customer satisfaction survey' had been completed in November 2011. The results of the survey were very positive. People had been very complimentary about the way the service was run and the attitude and professionalism of the staff. The service had also had a suggestions box. This was placed in the waiting room.

Our judgement

People understand the treatment available to them and are provided with enough information to enable them to make an informed choice. People's privacy, dignity and confidentiality are recognised and maintained.

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

We spoke to four people who were at the surgery for check up's or follow on treatment. All four people spoke very highly about the care, support and treatment they were given by the practice. They told us "The dentist is professional but approachable and puts me at ease." Another person said "All the staff at the surgery are caring and helpful." One person said "It's always busy when I come but I never feel like I'm being rushed in and out." Another person said "I bring my children here; they're excellent with children."

Other evidence

Records showed and people confirmed to us that they were involved in the planning of their treatment. We looked at a sample of patient records during the visit. Information seen in records showed that each person was treated as an individual and a variety of treatment options were available to everyone.

Emergency and first aid equipment was seen to be available within the practice. Staff interviewed were aware of where the equipment was and had received training in how and when it should be used. We saw evidence that equipment such as the defibrillator was checked and maintained as required.

The practice had a file which contained the services policies and procedures, staff training information, contracts for maintenance of equipment and other required information. This showed us that the provider kept up to date with published guidance and managed risk.

Staff told us that staff meetings were regularly held. This time was used to complete updated and refresher training in such things as safeguarding and emergency procedures.

Staff said they felt well supported by the managers of Hurlfield Dental Practice. One said "We receive excellent training." Another staff member said if they had any worries or concerns they could go to the managers of the practice and they "Will try to sort things out for you."

We saw that there were a small number of incidents that had occurred at the practice. The incident, what action had been taken and lessons learned to prevent a reoccurrence were recorded. Staff told us that if incidents occurred this was discussed at staff meetings which were held each month.

Our judgement

The delivery of treatment is effective, appropriate and flexible to meet individual needs. The service uses appropriate and accepted guidance in a consistent way.

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 asked four people if they felt safe at the service. Everyone said "Yes" and one person added "When I visit I feel I am in good hands."

Other evidence

The practice had child and adult protection policies in place. Staff were aware of the policies and where the policies were stored at the practice. Staff were aware of their roles and responsibilities with regards to protecting children and people from abuse or the risk of abuse. They were able to provide us with a range of potential signs of abuse and knew how to react to these should the situation arise.

We spoke with a dentist who confirmed that they were the adult safeguarding and child protection lead at the practice. The practice manager said staff within the practice had received safeguarding training. Training records and certificates that we looked at confirmed that some training had taken place.

Criminal Records Bureau (CRB) checks had been completed for staff that worked within the practice. We saw evidence of the completed checks.

The practice had a complaints procedure in place. This was displayed in the patients' waiting room. Staff spoken to were aware of the complaints policy and procedure. There had been no recent complaints made to the service and there were no outstanding complaints that remained unresolved.

Our judgement

People who use the service are protected from abuse. Staff are aware of their responsibilities with regard to safeguarding and have had some training on how to identify and react to potential abuse.

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

The people we spoke with said that the practice was always clean. They confirmed that the dentists and nurses always offered them glasses to protect their eyes, should they wish to use these. People told us that dental practitioners wore gloves, masks and aprons when it was appropriate to do so. They told us they see staff washing their hands before, during and after treatments. They said that they thought the treatment rooms were very clean and hygienic. One person added "The surgery is spotless when I visit."

Other evidence

During our discussions with staff it was clear that they were all very aware of, and were implementing government guidance on decontamination within dental practice. All the staff we spoke with understood the importance of infection prevention and control, including decontamination, and could clearly describe their own roles and responsibilities within this area.

The practice has policies and procedures in place for the prevention and control of infection. Personal protective equipment (PPE) was available for staff when carrying out dental procedures.

Each surgery has designated dirty and clean areas. Dental instruments, once used, were placed in the 'dirty box' which was sealed prior to transporting the instruments to the decontamination room. During our inspection we observed that clinical areas were clean and tidy.

In 2009 the Department of Health published Health Technical Memorandum 01-05:

Decontamination in primary care dental practices 2009. This provides guidance for the decontamination of dental instruments and infection control in general dental practice. The practice had a dedicated decontamination room. The room was found to be laid out in accordance with this guidance. There were guidance documents placed on the walls at each stage of the decontamination process and arrows clearly showed the flow of the cleaning process to be followed.

A dental nurse showed us, and explained to us, the process for managing used instruments within the decontamination room to ensure clear and separate areas for clean and dirty instruments.

This room is utilised to ensure that all the used equipment is cleaned and sterilised between each use. The dental nurses wash and rinse the instruments, use a washer/steriliser, check them for debris and then re clean the instruments if necessary. Autoclaves are used to sterilise the instruments to ensure they reach the approved level of sterilisation.

Cleaning schedules, daily, weekly, monthly and annual checklists were in place within each of the treatment areas.

We saw that the treatment rooms were cleaned, by the dental nurses between each person, using appropriate equipment to agreed standards.

There was a supply of gloves, aprons, wipes, paper towels and hand gel available within the treatment rooms.

Legionella risk assessments were in place and checked on a regular basis; appropriate waste disposal arrangements were also in place. Validation of technical dental equipment such as autoclaves and x-ray machines was in place and recorded.

Our judgement

People who use the service are protected by effective arrangements based on national guidance for the prevention and control of risks from 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

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Author	Care Quality Commission
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