

Review of compliance

Velvet Dental Centre Limited Velvet Dental Centre Limited	
Region:	West Midlands
Location address:	8 Darwin Court Oxon Business Park Shrewsbury Shropshire SY2 5XB
Type of service:	Dental service
Date of Publication:	November 2012
Overview of the service:	Velvet Dental Centre Limited provides a range of dental treatment to around 4,500 people of all ages. People pay privately for their treatment at this service.

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

Our current overall judgement

Velvet Dental Centre Limited 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 1 June 2012, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

We spoke with seven people who used Velvet Dental Centre Limited to gain their experiences of the service they received. People we spoke with included people with a physical disability, people who had received extensive treatment, people who were very nervous about visiting the dentist and people who had attended the practice over a number of years.

People we spoke with said they were happy with the service they received and said they had recommended the practice to many of their family and friends. One person told us "I have total trust in them". People told us they were always made very welcome and the staff knew them well. We observed this during our visit when people arrived at the practice. One person told us, "I'm very happy and confident going there, it's such a relief to find such understanding and caring staff to help keep me calm".

Everybody said they felt respected by the staff and said their privacy was upheld. People told us they felt fully involved in their treatment and were provided with sufficient information to make an informed decision about their treatment. They said their check ups were thorough and they were always provided with a copy of their treatment plan and an estimation of costs. One person told us that one of the things that the service did well was "to speak and talk with you and not at you".

People with restricted mobility or physical disability told us the practice accommodated them and ensured their routine check ups and treatment were carried out effectively. They said staff were attentive to their individual needs. One person said, "they always make sure I am comfortable before they start and they keep checking me throughout my treatment and offer me a rest to relax and compose myself if needs be".

Everybody confirmed they had completed a health questionnaire and at each appointment staff asked about their health and medication. One person said, "My dentist is fully aware of the medication I need for my health. They always check to make sure there have been no changes in my medical conditions at the start of every visit".

People said they felt safe attending the practice and had no concerns about their care and welfare. Staff confirmed they had received some training in child protection. The service acknowledged they needed to further develop staff training for safeguarding adults to better equip them to deal with concerns regarding a person's wellbeing or if they observed abuse. We saw this matter was in hand.

People told us the practice was always clean and tidy and confirmed clinical staff always wore personal protective clothing such as a short sleeved uniform, gloves and eye protection. One person said, "the staff are very well turned out. I have no issues whatsoever about the cleanliness of the practice." Staff told us they had received training in infection control and prevention to help minimise the risk of cross infection.

Quality assurance systems were in place to monitor and review the quality of the service provided. Health and safety systems were in place to make sure that people who used and worked at the practice were safe.

What we found about the standards we reviewed and how well Velvet Dental Centre Limited 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's privacy, dignity and independence were respected.

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

People experienced care, treatment and support that met their needs and protected their rights.

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

People who use the service 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

People were cared for in a clean, hygienic environment.

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 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 observed confidentiality being maintained at the reception desk and staff we spoke with shared sound examples of how they promoted privacy when providing treatment. We observed discussions with people using the service being treated respectfully and saw staff ensured the door to the surgery was closed when providing treatment. People we spoke with also confirmed that this had been their experience when they visited the practice. People told us they were treated with respect and staff maintained their privacy when receiving treatment. They said they felt fully involved in their treatment and were given lots of information to inform their decision before agreeing to any treatment. Dentists said they always explained procedures in a way people understood. For example if a person had a learning disability or dementia they would use models and pictures to demonstrate procedures so people knew what their treatment involved. The service also employed patient advisors and it was their role to make sure people had all of the information they need to understand their treatment and its costs. We saw the practice also offered people the privacy of their patient advice centre in another part of the building so they can discuss their needs at length face to face with a staff member. Staff told us people were never rushed into making decisions and the company had an open and honest approach when talking about costs. We saw each treatment room had a separate seating area, where people could have their consultations away from the dentist's chair to provide a more relaxing atmosphere to

have a discussion about their needs. One dentist told us they used this area to sit with people using the service and explain possible treatments with them to show them photographs installed on a laptop, especially for this purpose. People with physical disabilities told us the practice was able to accommodate them without a problem as they received their dental treatment due to the dental surgery being located on the ground floor. We were informed that they did not have to be transferred out of their wheelchair to have their treatment carried out, and the rooms were nice and spacious for them to turn their wheelchairs around. They said staff were very helpful and attentive and discreetly provided assistance with the doors.

Other evidence

We saw people had access to a range of information to include leaflets on treatments available, oral hygiene and treatment costs. There was also a variety of information freely available in both patient relaxation areas to welcome people to read further details about services that the practice provided and testimonials from patients of the practice

Our judgement

People'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

We spoke with seven people who had received a range of treatment. They all shared positive experiences and said they were 'very' satisfied with the treatment and service they received. People told us they felt confident in discussing their options with the dentists and were able to ask questions before deciding their treatment. Staff said they always explained the risks and benefits of treatment and this was reflected in discussions held with people who used the service. People told us they could get appointments when they needed them and were always seen on time. The practice have a system where appointment slots are especially kept for people who may need urgent or emergency treatment. People told us their routine check ups were thorough and included checks to their gums and soft tissues. One person said, "They are very thorough and tell me exactly what state my mouth is in and advise me accordingly, they are excellent." People who had received diagnostic tests such as X-rays said they were shown their X-rays and the dentists discussed the results with them. They told us the risks and benefits of any treatment were discussed with them and they were always given time to consider their options. People said they were given opportunities to ask questions and dentists gave them advice where necessary such as how to improve their oral health. We saw any advice given had been clearly documented on their records. People who had received extensive treatment said they were given a copy of their treatment plan and estimation of charges. People told us they were asked at each appointment if there had been any changes to their health and well being. One person said their dentist was fully aware of a health condition they had and their dentist always took this into consideration when planning treatment. One staff member said, "It's an essential part of our job to check medical histories." We saw written medical

questionnaires had been obtained and evidence that health information was regularly updated on the records of three people we reviewed. This ensured people received treatment safely and in accordance with their specific health needs. Records were stored electronically and in paper format. We reviewed the electronic treatment records held for four people with a range of needs. These were detailed and included contact details, GP, medical history, treatment plans, costs and X-rays where required. One of the dentists confirmed they always produced a estimate of treatment that people were asked to sign. Records we saw had evidence that people were involved in their treatment in a variety of ways. For example when people were shown electronic pictures of treatment on a lap top used by their dentist this was recorded. We asked staff about how they gained consent for treatment. Staff described a form they use and work through it with the patient to make sure they understood what they agreed to. Staff told us people with a learning disability or dementia related illness were supported by a relative or carer and they would help explain procedures with them. Staff shared examples of when they had declined treatment if they considered it was not in a person's best interest and they told us how they supported people who were anxious about their treatment. We saw the provider had suitable arrangements in place for dealing with medical emergencies, including emergency equipment. A knowledgeable staff member who showed us this equipment explained the procedures set up to deal with such an event. Other staff we spoke with reflected the same emergency procedures and where the emergency equipment was kept. We saw the practice had a written policy and procedure in place for these matters.

Other evidence

We looked at the treatment plans of some of the people we spoke with before our inspection visit. We saw some were in the process of receiving extensive reconstructive work. The dentist had used photographs and diagrams to clearly describe actions to be taken and step by step costing in the treatment plan made sure people knew why they needed the work and what they were paying for. A staff member also showed us the treatment plans of people who were having more 'straightforward' dental treatment. Both types of information offered clear guidance to help people understand what had been planned.

Our judgement

People experienced care, treatment and support 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

People told us the staff were competent and they felt in 'safe hands' when receiving their treatment. They said they had no concerns about their health and welfare when visiting the practice. One person said the "open welcoming and highly professional attitude of the staff" made them feel confident about their treatment every time they visited the practice. Staff told us they knew what was expected of them if they had concerns people were unhappy or at risk. They said if they had concerns about the welfare of a child or vulnerable adult they would report it to their manager. Examination of staff records confirmed they had recently received some training about child protection issues. Our conversations with the registered manager established that although they had experienced some difficulty in booking adult protection training for the team, this matter had been resolved and plans were in the pipeline for this to be held in the near future.

Other evidence

We saw that the provider had policies and procedures in place to protect vulnerable people and raise staff awareness about vulnerable adults and child protection issues. We saw this included information on definitions of abuse, understanding the different forms of abuse and staff responsibilities. It also contained telephone contact details of the Shropshire local authority safeguarding teams for adults and children. During our inspection visit the registered manager took steps to obtain the relevant information necessary to make referrals to the local authority safeguarding team should the need arise. We saw Criminal Records Bureau (CRB) checks had been obtained for all staff

that had immediate contact with people who used the service. These checks ensured that persons unsuitable to work with children or vulnerable adults were not employed in the dental practice.

Our judgement

People who use the service 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

All seven people we spoke with who used the service said they said they had no issues about the cleanliness of the practice. Comments included, "It's always absolutely spotless." "I have no concerns whatsoever". People confirmed clinical staff wore personal protective equipment such as short sleeved uniforms and disposable gloves to help safeguard them from the risk of cross infection. They told us they were offered eye protection to help protect their eyes during procedures. Staff confirmed they had access to sufficient supplies of equipment and instruments and we saw this during our tour of the premises. We saw the practice had an infection control policy in place and records evidenced that staff had read and signed this. Staff confirmed they had received training in infection prevention and control. They were confident when describing the systems in place to ensure they and the people who used the service were not placed at risk of cross infection. Arrangements were in place for the safe disposal of clinical waste and sharps (used needles). We saw immunisation records were maintained for clinical staff. Staff confirmed their immunisation status had been checked to provide protection and prevent the spread of infection. We saw the practice had a separate decontamination room for the sterilising of instruments. Records evidenced staff responsible for sterilising equipment had received training and were aware of the in depth policies the practice have in place to manage these systems. We saw all three surgeries and waiting areas appeared clean tidy and fit for purpose. We observed the decontamination room to be generally clean and tidy although the area where the one sink was located was in need of improvement. We saw it was cluttered with equipment, and the container for hand washing soap was broken. We saw an unlabelled container that staff told us contained a cleaning solution. Staff told us the sink was used for a variety of tasks including cleaning instruments and hand washing. In addition, damaged paintwork seen adjacent to the sink area posed a potential hazard as it would be

difficult to clean. We discussed these matters with the registered manager and immediate action was taken to improve this area. A member of staff described to us how they cleaned and sterilised all the equipment used in surgery. They demonstrated a clear understanding of the procedures to ensure equipment was effectively cleaned to minimise the risk of cross infection. They showed us the records they maintained for the autoclaves (sterilisers) to demonstrate the instruments were cleaned as required and that equipment was maintained and safe for use. Although staff were clear about their roles and responsibilities for keeping the surgeries clean we saw there were no permanent records available to evidence specific areas cleaned and by whom. The registered manager confirmed that staff currently do not complete records although visual checks were carried out daily. They agreed to implement a record system so that any action taken resulting from the checks were documented.

Other evidence

We saw the practice have their own regular in house auditing systems to make sure their infection control standards are maintained to meet professional guidance for this matter. We noted this was last carried out at the beginning of the year and the service were seen to have attained high standards although they identified similar issues to our findings in the decontamination room. We were able to see some improvements had been carried out as a result of these audits. We saw some remedial action had been taken and were shown building plans to improve the layout of this area. In the mean time the registered manager described additional short term measures which would be put into place to improve cleaning systems in this area until improvement work had been carried out. We noted regular instrument audits had also identified areas for improvement when they were carried out in January and May 2012. Staff we spoke with were aware of the issues and improvement actions taken to achieve top scores for these checks in the future. The registered manager told us that the audits would be carried out on a monthly basis to ensure high standards were consistent.

Our judgement

People were cared for in a clean, hygienic environment.

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 saw people were given opportunities to feedback their views on the service they had received through patient satisfaction questionnaires. Surveys reviewed evidenced that people would recommend the service. One person we spoke with told us they already had recommended the dental practice to their family and friends. We saw systems in place to monitor this process. The majority of comments received were positive. People wrote, "very helpful staff" "minimal waiting times" "I have a very effective and competent dentist". We also noted recordkeeping seen clearly accounted for any remedial actions taken when there had been a need. When one person made a comment about the music played in the patient relaxation area this was noted and acted upon. We also saw the practice provided a comments box with paper and pens to invite people to make suggestions as part of their visit. A staff member told us this was checked regularly and comments were dealt with as part of the practice monthly quality audits. One staff member we spoke with told us of their responsibilities to make sure people who used the practice were involved in sharing their opinions about their experience with Velvet Dental Centre Limited. We were informed any new people who used the practice were always given a questionnaire after their first treatment, and that around half of the people responded with their comments. Our discussions with staff confirmed they attend regular meetings and use them as a forum to make suggestions to improve the service. Staff told us they enjoy the meetings to share good practice and problem solve any issues within the practice. One such discussion included training opportunities and improving day to day routines following internal audits. One staff member told us the system the practice have in place to rotate the duties of the team had been effective in making sure that staff were performing to the same standards in

line with the company procedures. We saw the performance of the dentists had also been recently audited by external dental professionals. We saw reports which reflected that maximum scores had been attained for the majority of all areas reviewed which reflected the practice were committed to maintaining and improving standards.

Other evidence

We saw the practice have a range of audit and monitoring systems to make sure the service is being run in the best interests of people who use it and to confirm they are meeting necessary legislation. The responsibilities for the various audits and checks are delegated to different staff members which gives them ownership and to involve them in continually improving the practice. One staff member explained their responsibilities to make sure the emergency equipment for the service is well maintained. We saw the accident book and were informed any associated paperwork is kept in the file of the person concerned. The provider may find it useful to develop this system so they could make sure they knew accident history of the surgery without having to access all of the individual records of the people concerned. The service has a complaints management system in place. We saw both electronic and paper records for this process. When we looked to see how the practice had managed a recent complaint we were told in depth how the issue had been dealt with. There was no permanent record to show how the matter had been acted upon, and if the person concerned had been informed how the practice had managed their comments and was happy with the outcome. The registered manager agreed this was an area they would be improving as a matter of priority.

Our judgement

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

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