

## Impressions Orthodontics Limited

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### Inspection Report

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### Overall summary

We carried out this desk-based review on 14 September and 2 October 2020 under section 60 of the Health and Social Care Act 2008 as part of our regulatory functions.

We carried out the review as a result of concerns raised with us that the provider may not be meeting the fundamental standards of care. We planned the review to check whether the provider was meeting the legal requirements in the Health and Social Care Act 2008 and associated regulations. The review was led by a CQC inspector with remote access to a second CQC inspector.

This question forms the framework for the areas we look at during the review.

This desk-based review was undertaken during the Covid 19 pandemic. Due to the demands and constraints in place because of Covid 19 we spoke with the provider, looked at documents they sent us and reviewed records via a video link to the practice.

To get to the heart of patients' experiences of care and treatment we asked the following questions:

- Is it safe?
- Is it effective?
- Is it responsive?

#### **Our findings were:**

#### **Are services safe?**

We found this practice was providing safe care in accordance with the relevant regulations.

#### **Are services effective?**

We found this practice was providing effective care in accordance with the relevant regulations.

#### **Are services responsive?**

We found this practice was providing responsive care in accordance with the relevant regulations.

#### **Background**

Impression Orthodontics (trading as Making Smiles) is in High Wycombe and provides NHS and private orthodontic treatment to patients of all ages.

The practice is based on the first and second floor. Patients are advised of this when they enquire.

The dental team includes two specialist orthodontists, one dentist with special interest, two orthodontist therapists, four dental nurses of which two also cover reception duties and an administrator.

The practice has two treatment rooms.

The practice is owned by a company and as a condition of registration must have a person registered with the CQC as the registered manager.

# Summary of findings

Registered managers have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run. The registered manager at Impressions Orthodontics is the principal orthodontist.

We looked at practice policies and procedures and other records about how the service is managed.

The practice is open 9am to 6pm Monday to Thursday and 9am to 1pm on Friday.

## **Our key findings were:**

- The provider had procedures in place which took account of published guidance, including guidance about providing dental care services during the Covid-19 pandemic.
- The clinical staff provided patients' care and treatment in line with current guidelines.
- The provider had systems to help them manage risk to patients and staff.
- The provider had systems in place to deal with complaints positively and efficiently.

# Summary of findings

## The five questions we ask about services and what we found

We asked the following question(s).

### **Are services safe?**

We found this practice was providing safe care in accordance with the relevant regulations.

**No action**



### **Are services effective?**

We found this practice was providing effective care in accordance with the relevant regulations.

**No action**



### **Are services responsive to people's needs?**

We found this practice was providing responsive care in accordance with the relevant regulations.

**No action**



# Are services safe?

## Our findings

We found that this practice was providing safe care and was complying with the relevant regulations.

We reviewed the provider's arrangements to ensure safe care and treatment in relation to the Covid-19 pandemic.

We found the provider had taken account of current published Covid-19 guidance relating to dental practices and had introduced new systems and procedures. These included measures to reduce risks to patients and staff from the Coronavirus, such as identifying clear routes around the practice, regular supplies of personal protective equipment, staff training and patient information and screening processes.

# Are services effective?

(for example, treatment is effective)

## Our findings

We found that this practice was providing effective care and was complying with the relevant regulations.

### **Monitoring care and treatment**

The practice kept detailed dental care records containing information about the patient's current dental needs, past treatment and medical histories. We selected some dental care records to review and corroborated findings with the registered manager.

The orthodontist carried out a patient assessment in line with recognised guidance from the British Orthodontic

Society. An Index of Orthodontic Treatment Need was recorded which would be used to determine whether a patient was eligible for NHS orthodontic treatment. There was good evidence that informed consent had been obtained taking into account the wishes of the patient even if they were under 16 years old. The patient's oral hygiene was also assessed and reinforced at follow up appointments with the orthodontics therapist.

The orthodontic therapist was appropriately supervised by the consultant orthodontist or a specialist. Treatment plans were clear for the orthodontic therapist to follow and it was clear from the dental care records which we reviewed what treatment had been carried out.

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

We found that this practice was providing responsive care and was complying with the relevant regulations.

### Complaints

The provider responded to complaints appropriately to improve the quality of care.

The provider had a policy providing guidance to staff on how to handle a complaint. The practice information leaflet explained how to make a complaint.

The provider was responsible for dealing with these. Staff would tell the provider about any formal or informal comments or concerns straight away so patients received a quick response.

The provider aimed to settle complaints in-house and invited patients to speak with them in person to discuss these. Information was available about organisations patients could contact if not satisfied with the way the provider had dealt with their concerns.

We looked at comments, compliments and complaints the practice received. Information for patients showed a complaint would be acknowledged within three working days and a full response would be provided within 10 working days.

These showed the practice responded to concerns appropriately and discussed outcomes with staff to share learning and improve the service.