

# Mr Kamran Madjidzadeh Aval

# Elm Park Dental Surgery

## Inspection Report

28 Rosewood Avenue,  
Hornchurch,  
Essex ,  
RM12 5LH  
Tel: 01708 451882  
Website: None

Date of inspection visit: 24 October 2017  
Date of publication: 24/11/2017

### Overall summary

We carried out this announced inspection on 24 October 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. We planned the inspection to check whether the registered provider was meeting the legal requirements in the Health and Social Care Act 2008 and associated regulations. The inspection was led by a Care Quality Commission (CQC) inspector who was supported by a specialist dental adviser.

We told the NHS England area team that we were inspecting the practice. They did not provide any information.

To get to the heart of patients' experiences of care and treatment, we always ask the following five questions:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

These questions form the framework for the areas we look at during the inspection.

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

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

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

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

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

##### **Are services caring?**

We found that this practice was providing caring services in accordance with the relevant regulations.

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

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

##### **Are services well-led?**

We found that this practice was providing well-led care in accordance with the relevant regulations.

##### **Background**

Elm Park Dental Surgery is located in Elm Park, in the London Borough of Havering. The practice provides NHS and private dental treatments to patients of all ages.

The practice is located on the ground and first floor of a purpose adapted residential premises. The practice has four treatment rooms, two of which are located on the ground floor. The practice is conveniently located close to public transport links.

# Summary of findings

The dental team includes two principal dentists and two associate dentists, two dental hygienists, two qualified dental nurses and two trainee dental nurses, two receptionists and a practice manager.

The practice is owned by an individual who is the principal dentist there. They have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

We received feedback from 26 patients via CQC comment cards and speaking with patients. This information gave us a positive view of the practice.

During the inspection we spoke the one principal dentist and one associate dentist, one dental nurse and two trainee dental nurses, one receptionist and the practice manager. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open between 9am and 6pm on Mondays, Wednesdays and Fridays, between 9am and 8pm on Tuesdays and Thursdays and between 9am and 1pm on Saturdays.

The practice is open between 1pm and 2pm for appointment bookings, new patient registrations and enquiries.

## Our key findings were:

- The practice was clean and well maintained.
- The practice had infection control procedures which reflected published guidance. Improvements were needed to ensure that these procedures were audited in line with this guidance.
- Staff knew how to deal with emergencies. Appropriate medicines and life-saving equipment were available.
- The practice had systems to help them assess and manage risk.

- The practice had suitable safeguarding processes and staff knew their responsibilities for safeguarding adults and children.
- The practice had thorough staff recruitment procedures.
- The clinical staff provided patients' care and treatment in line with current guidelines.
- Staff treated patients with dignity and respect and took care to protect their privacy and personal information.
- The appointment system met patients' needs.
- The practice had effective leadership. Staff felt involved and supported and worked well as a team.
- The practice asked staff and patients for feedback about the services they provided.
- The practice dealt with complaints positively and efficiently.

There were areas where the provider could make improvements. They should:

- Review the practice's current audit protocols to ensure audits of key aspects of service delivery such as infection prevention and control and radiography are undertaken at regular intervals and where applicable learning points are documented and shared with all relevant staff.
- Review the practice's protocols for recording in the patients' dental care records or elsewhere the reason for taking the dental radiographs and monitoring the quality of radiographs ensuring compliance with the Ionising Radiation (Medical Exposure) Regulations (IRMER) 2000.
- Review the practice's protocols for completion of dental care records taking into account guidance provided by the Faculty of General Dental Practice regarding clinical examinations and record keeping.

# Summary of findings

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

We always ask the following five questions of services.

### Are services safe?

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

The practice had systems and processes to provide safe care and treatment. They used learning from audits, risk assessments, incidents and complaints where they occurred to help them improve.

Staff knew how to recognise the signs of abuse and how to report concerns. Recent improvements had been made to ensure that staff received appropriate training in safeguarding children and adults.

Staff were qualified for their roles and the practice completed essential recruitment checks.

Premises and equipment were clean and properly maintained. The practice followed national guidance for cleaning, sterilising and storing dental instruments.

The practice had suitable arrangements for dealing with medical and other emergencies.

No action



### Are services effective?

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

The dentists assessed patients' needs and provided care and treatment in line with recognised guidance. Patients described the treatment they received as efficient and excellent. The dentists discussed treatment with patients so they could clearly understand and give informed consent. Patients said that their treatment was explained and that any questions in relation to treatment were answered.

The practice had clear arrangements when patients needed to be referred to other dental or health care professionals. There were arrangements to follow up on urgent and non-urgent referrals.

The practice supported staff to complete training relevant to their roles and had systems to help them monitor this.

No action



### Are services caring?

We found that this practice was providing caring services in accordance with the relevant regulations.

We received feedback about the practice from 26 patients. Patients were positive about all aspects of the service the practice provided. They told us staff were helpful, supportive and caring. They said that they were given detailed explanations about dental treatment and that questions in relation to their dental care and treatment were answered and they did not feel rushed to make decisions.

Patients commented that all staff made them feel relaxed, especially when they were anxious about visiting the dentist.

No action



# Summary of findings

We saw that staff protected patients' privacy and were aware of the importance of confidentiality. Patients said staff treated them with dignity and respect.

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

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

The practice's appointment system was efficient and met patients' needs. Patients could get an appointment quickly if in pain.

Staff considered patients' different needs and had made reasonable adjustments to the premises to support patients.

The practice took patients views seriously. They valued compliments from patients and responded to concerns and complaints quickly and constructively.

**No action**



## **Are services well-led?**

We found that this practice was providing well-led care in accordance with the relevant regulations.

The practice had arrangements to ensure the smooth running of the service. These included systems for the practice team to discuss the quality and safety of the care and treatment provided. There was a clearly defined management structure and staff felt supported and appreciated.

The practice team kept patient dental care records which were, clearly written and stored securely.

The practice was reviewing and strengthening its systems for monitoring clinical and non-clinical areas of their work to help them improve and learn. The practice asked for and listened to the views of patients and staff.

**No action**



# Are services safe?

## Our findings

### Reporting, learning and improvement from incidents

The practice had policies and procedures to report, investigate, respond and learn from accidents, incidents and significant events. Staff knew about these and understood their role in the process.

The practice responded to and discussed all incidents, accidents and complaints to reduce risk and support learning.

The practice received national patient safety and medicines alerts from the Medicines and Healthcare Products Regulatory Authority (MHRA). The practice received national patient safety and medicines alerts from the Medicines and Healthcare Products Regulatory Authority (MHRA). Relevant alerts were shared with staff, acted on and stored for future reference. The practice had a system to alert national agencies of patient safety incidents involving medical devices, medicines and materials used in the dental practice.

### Reliable safety systems and processes (including safeguarding)

Staff knew their responsibilities if they had concerns about the safety of children, young people and adults who were vulnerable due to their circumstances. The practice had safeguarding policies and procedures to provide staff with information about identifying, reporting and dealing with suspected abuse. Information including the contact details for the local safeguarding team was accessible to staff. Staff knew about the signs and symptoms of abuse and neglect and how to report concerns. We saw evidence that some staff had received safeguarding training and updated training was planned for all staff. Following our inspection we were provided with evidence to show that all staff had undertaken safeguarding training relevant to their roles and responsibilities.

The practice had a whistleblowing policy. Staff told us they felt confident they could raise concerns without fear of recrimination.

We looked at the practice's arrangements for safe dental care and treatment.

The practice followed relevant safety laws when using needles and other sharp dental items. Staff were aware of

their responsibilities in relation to handling and safe disposal of dental instruments where appropriate. They also knew how to report injuries involving dental instruments and the appropriate actions to take.

Some of the dentists were not routinely using rubber dams in line with guidance from the British Endodontic Society when providing root canal treatment. They were able to describe the measures that they undertook to minimise risks to patients. Following our inspection we were provided with evidence that there were now arrangements in place to ensure that all dentists were following this guidance.

The practice had a business continuity plan describing how the practice would deal with events which could disrupt the normal running of the practice.

### Medical emergencies

Staff knew what to do in a medical emergency and completed training in emergency resuscitation and basic life support every year.

Emergency medicines and equipment were available as described in recognised guidance. Staff kept records of their checks to make sure these were available, within their expiry date, and in working order. We noted that medicines and equipment were within their expiry date and accessible on the day of the inspection.

### Staff recruitment

The practice had a staff recruitment policy and procedure to help them employ suitable staff. This reflected the relevant legislation. We looked at the records for five members of staff. These showed the practice followed their recruitment procedure and maintained accurate and up to date records. All required checks including evidence of identity, skills and qualifications and employment references, where appropriate; and interviews were carried out.

Clinical staff were qualified and registered with the General Dental Council (GDC) and had professional indemnity cover.

### Monitoring health & safety and responding to risks

The practice had health and safety policies and risk assessments in place. These covered general workplace and specific dental topics. There were procedures for

# Are services safe?

dealing with an outbreak of fire and the safe evacuation of people from the building. Fire safety equipment was checked regularly and serviced in line with current guidance and legislation.

There were arrangements to protect patients and staff from exposure to substances which may be hazardous to health such as cleaning and other materials. There was a risk assessment in place and staff had access to information in relation to chemical substances used at the practice. We noted that cleaning materials and other substances were stored securely and accessible to relevant staff.

The practice health and safety policies and procedures had been recently reviewed and staff were aware of their responsibilities. A detailed health and safety risk assessment had been completed in 2016 and areas where improvements were identified had been addressed.

The practice had current employer's liability insurance and checked each year that the clinicians' professional indemnity insurance was up to date.

A dental nurse worked with the dentists and dental hygienists when they treated patients.

## Infection control

The practice had an infection prevention and control policy and procedures to keep patients safe. They followed guidance in The Health Technical Memorandum 01-05: Decontamination in primary care dental practices (HTM01-05) published by the Department of Health. Staff completed infection prevention and control training every year.

The practice had arrangements for cleaning, checking, sterilising and storing instruments in line with HTM01-05. The dental nurses were able to demonstrate that they understood some of these arrangements. However we found a number of unpackaged dental instruments in each of the treatment rooms which were not stored or re-sterilised in line with current guidelines. Following discussions with the practice staff these arrangements were reviewed and shared with staff so that they understood and followed current guidance.

The practice records showed equipment staff used for cleaning and sterilising instruments were maintained in line with the manufacturers' guidance.

The practice had carried out an infection prevention and control audit in April 2017. The previous audit was dated 2015. Improvements were needed to ensure that infection control audits were carried out in line with current guidance and that any areas for improvement identified were acted on.

The practice had procedures to reduce the possibility of Legionella or other bacteria developing in the water systems. A Legionella risk assessment was in place and this was reviewed regularly. There were procedures for flushing and disinfecting dental waterlines and monitoring hot and cold water temperatures to minimise these risks.

The practice was clean when we inspected and patients who we spoke and those who completed comment cards confirmed this was usual.

We saw that there were systems in place for the storage and disposal of waste including clinical waste in line with current waste regulations.

## Equipment and medicines

The practice had suitable systems for handling and storing medicines.

Records showed that staff carried out daily checks in line with the manufacturers' recommendations for sterilising and other equipment. We saw records for checks, maintenance and servicing for electrical equipment and installations.

The practice had suitable systems for prescribing and storing medicines.

The practice stored prescriptions securely and monitored their use as described in current guidance.

## Radiography (X-rays)

The practice had suitable arrangements to ensure the safety of the X-ray equipment. They met current radiation regulations and had the required information in their radiation protection file.

Clinical staff completed continuous professional development in respect of dental radiography.

We saw evidence that the some but not all the dentists justified, graded and reported on the radiographs they took and this information was recorded in patient's dental records. Improvements were required to ensure

## Are services safe?

radiography audits were carried out in line with current guidance and legislation to monitor the quality of dental radiographs. Records showed that the most recent audit had been carried out in 2013.

# Are services effective?

(for example, treatment is effective)

## Our findings

### Monitoring and improving outcomes for patients

The dental team were aware of and using the National Institute for Health and Clinical Excellence (NICE) guidance in relation to dental care and treatment.

Patients were provided with detailed information about their treatment and the dentists carried out regular reviews to monitor treatment for effectiveness and outcomes for patients.

The dentist described their assessment and treatment of patients in line with recognised guidance. These assessments included oral examinations of soft and hard tissues, cancer screening checks and checks for gum disease.

Some dental care records, which we viewed, did not include full details the patient's oral assessment and treatments options offered. We saw that the practice had introduced audits of patients' dental care records to check that the dentists recorded the necessary information and to make improvements as needed.

### Health promotion & prevention

The practice was providing preventative care and supporting patients to ensure better oral health in line with the Delivering Better Oral Health toolkit.

The dentist told us they prescribed high concentration fluoride toothpaste if a patient's risk of tooth decay indicated this would help them. They used fluoride varnish for children based on an assessment of the risk of tooth decay for each child.

They also told us that where appropriate they discussed smoking, alcohol consumption and diet with patients during appointments.

Two dental hygienists were employed at the practice to provide cleaning treatments and advice on oral hygiene and promoting good oral health.

The practice had a selection of dental products for sale and health promotion leaflets were displayed within the patient waiting area, which provided advice and instructions to help patients maintain and improve their oral health.

### Staffing

The practice manager told us that staff new to the practice had a period of induction to assist them in becoming familiar with their job roles and responsibilities and the practice policies and procedures.

We confirmed clinical staff completed the continuous professional development required for their registration with the General Dental Council. There were systems in place to review and monitor staff training to ensure that this was completed and any additional support was provided where needed.

Staff told us they discussed training needs at periodically. We saw evidence of some completed appraisals and personal development plans, which identified training and development goals for staff based on their roles and responsibilities within the practice. The newly appointed practice manager had recently introduced a system for on-going staff appraisals to ensure that staff training and development needs were monitored regularly.

### Working with other services

The dentists confirmed that they referred patients to a range of specialists in primary and secondary care if they needed treatment the practice did not provide. There were clear guidelines and procedures in relation to making referrals. These included referring patients with suspected oral cancer under the national two week wait arrangements. This was initiated by the National Institute for Health and Clinical Excellence (NICE) in 2005 to help make sure patients were seen quickly by a specialist.

The practice had monitoring systems to make sure they were dealt with promptly.

### Consent to care and treatment

The practice team understood the importance of obtaining and recording patients' consent to treatment. The dentist told us they gave patients information specific to their treatment. The treatment options, intended benefits and any potential risks were discussed with patients so that they could make informed decisions. Patients confirmed their dentist listened to them and gave them clear information about their treatment.

The practice's consent policy included information about the Mental Capacity Act 2005. The team had access to information and understood their responsibilities under the Act when treating adults who may not be able to make informed decisions. The policy also referred to Gillick



# Are services effective?

(for example, treatment is effective)

competence and the dentists who we spoke with were aware of the need to consider this when treating young

people under 16. Staff described how they involved patients' relatives or carers when appropriate and made sure they had enough time to explain treatment options clearly.

# Are services caring?

## Our findings

### **Respect, dignity, compassion and empathy**

Staff we spoke with were aware of their responsibility to respect people's diversity and human rights. The practice had a range of policies in place to assist staff to understand and fulfil their roles in this area.

Patients commented positively that staff were welcoming, kind and caring. We saw that the receptionists treated patients with respect and were welcoming and helpful towards patients at the reception desk and over the telephone. Patients told us that receptionists and the staff team were helpful and understanding. They said that the whole staff team made patients feel welcome when they visited the practice.

Nervous patients said staff listened and helped put them at ease. A number of patients commented that the dental team were particularly understanding, helping them to feel relaxed when they visited the practice.

Staff were aware of the importance of privacy and confidentiality. The layout of reception and waiting area was open plan in design and the receptionists and staff team were mindful when speaking with patients at the

reception desk and on the telephone. The receptionists told us that should patients wish to discuss personal matters that they would be offered a room to do so in private.

There were information leaflets and a selection of magazines available in the waiting area.

### **Involvement in decisions about care and treatment**

The practice gave patients clear information to help them make informed choices. Patients confirmed that they did not feel rushed during their appointment and that staff listened to them. A number of patients commented that their dentist explained everything in detail and offered advice so that they could understand and be able to make decisions about their treatment.

The dentists described the conversations they had with patients to satisfy themselves they understood their treatment options

Patients told us staff were caring and understanding when they were in pain, distress or discomfort.

The practice provided patients with information about the range of treatments available at the practice. These included general dental treatments, treatments for gum disease.

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

### Responding to and meeting patients' needs

Patients described high levels of satisfaction with the responsive service provided by the practice.

The practice had an efficient appointment system to respond to patients' needs. Staff told us that patients who requested an urgent appointment were seen where possible on the same day. A number of patients commented that they were always able to access appointments for dental emergencies.

Patients told us that the receptionists were accommodating in arranging appointments that met their needs. They also said that they had enough time during their appointment and did not feel rushed. A number of patients commented that appointments always ran on time and that they were rarely kept waiting beyond their appointment time. We noted that appointments ran smoothly on the day of the inspection and patients were not kept waiting.

Staff told us that they currently had some patients for whom they needed to make adjustments to enable them to receive treatment. The practice had carried out an assessment to review the needs of patients and this was kept under review to help staff assist patients who may require additional support.

### Promoting equality

The practice carried out regular reviews to ensure that the systems in place were suitable and reflect the needs of patients. The practice was located on the first and ground floor and had disabled access toilet facilities available.

Staff had access to online translation applications should these be required.

Staff said they could provide information in different formats and languages to meet individual patients' needs.

### Access to the service

The practice displayed its opening hours in the premises and in their patient information leaflet.

We confirmed the practice kept waiting times to a minimum. Patients told us that they were seen promptly.

The practice was committed to seeing patients experiencing pain on the same day. The practice patient information leaflet, posters displayed in the waiting area and answerphone provided telephone numbers for patients needing emergency dental treatment during the working day and when the practice was not open. Patients confirmed they could make routine and emergency appointments easily and were rarely kept waiting for their appointment.

### Concerns & complaints

The practice had a complaints policy providing guidance to staff on how to handle a complaint. The practice information leaflet explained how to make a complaint. Information was available about organisations patients could contact if not satisfied with the way the practice dealt with their concerns. This information including contact details of these organisations was included in the patient complaints leaflet.

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

The practice manager told us they aimed to settle complaints in-house and would invite patients to speak with them in person to discuss these to resolve issues where possible. They told us that the outcomes from any complaints received and learning arising from these would be shared with staff to make improvements where needed.

We looked at comments, compliments and complaints the practice received within the previous 12 months. These showed complaints received were responded to appropriately and outcomes were with staff to share learning and improve the service.

# Are services well-led?

## Our findings

### Governance arrangements

The principal dentist had responsibility for the management and clinical leadership of the practice. The practice manager who had been employed within the previous three months was responsible for the day to day running of the service. Staff knew the management arrangements and their roles and responsibilities. The principal dentists and the practice manager had lead role responsibilities and oversight for areas including safeguarding, infection control, radiation protection and complaints handling.

The practice had policies, procedures and risk assessments to support the management of the service and to protect patients and staff. There were arrangements to monitor and maintain the quality of the service and make improvements where needed. These arrangements were under review due to changes to the practice staff team. This included strengthening the systems for carrying out risk assessments, audits and reviews and sharing the outcomes from these for learning and improvement.

The practice had information governance arrangements and staff were aware of the importance of these in protecting patients' personal information.

### Leadership, openness and transparency

Staff were aware of the Duty of Candour requirements to be open, honest and to offer an apology to patients if anything went wrong.

Staff told us there was an open, no blame culture at the practice. They said they were encouraged to raise any issues and felt confident they could do this. They knew who to raise any issues with and told us the practice manager was approachable, would listen to their concerns and act appropriately.

There were meetings where staff could raise any concerns and discuss clinical and non-clinical updates. Immediate discussions were arranged to share urgent information and the practice had a messenger application where staff could share communications and information.

### Learning and improvement

The practice had quality assurance processes to encourage learning and continuous improvement. These had been recently reviewed and strengthened and included audits of various aspects of the service including safety and risk, dental radiography, dental records and infection prevention and control.

The dentists and staff who we spoke with showed a commitment to learning and improvement. Staff told us that they received regular supervision and support.

Staff told us that the practice valued the contributions made to the team by individual members of staff. The practice manager had introduced a system to ensure that the staff team had annual appraisals. We saw evidence of completed appraisals in the staff folders.

Staff told us they completed mandatory training, including medical emergencies and basic life support, each year. The General Dental Council requires clinical staff to complete continuous professional development. Staff told us the practice provided support and encouragement for them to do so.

### Practice seeks and acts on feedback from its patients, the public and staff

The practice used a comments and suggestions box to obtain patients' views about the service. Where provided, comments and suggestions were used to assess patient's satisfaction and to make improvements as needed.

NHS Patients were encouraged to complete the Friends and Family Test (FFT). This is a national programme to allow patients to provide feedback on NHS services they have used.

We reviewed the results of the most recent surveys and these showed that 100% of patients who participated were either 'extremely likely' or 'likely' to recommend the dental practice to their family and friends.