

Smile Orthodontics Yorkshire LLP

Smile Orthodontics Yorkshire

Inspection Report

Northway Clinic
Scarborough
North Yorkshire
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Overall summary

We carried out a desk based follow- up inspection of Smile Orthodontics Yorkshire on 1 December 2017.

We had undertaken an announced comprehensive inspection of this service on 24 August 2017 as part of our regulatory functions where a breach of legal requirements was found

After the comprehensive inspection, the practice manager wrote to us to say what they would do to meet the legal requirements in relation to the breach. This report only covers our findings in relation to that requirement.

We reviewed the practice against one of the five questions we ask about services: is the service well led? You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Smile Orthodontics Yorkshire on our website at www.cqc.org.uk.

We revisited 1 December 2017 as part of this review and checked whether they had followed their action plan and to confirm that they now met the legal requirements. We carried out this announced desk based inspection 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 CQC inspector.

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

- Is it well-led?

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

Our findings were:

Are services well-led?

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

Background

Smile Orthodontics Yorkshire is in Scarborough and provides NHS orthodontic treatment to children and minimal private treatment to adults.

There is level access for people who use wheelchairs and pushchairs. Car parking spaces, including space for patients with disabled badges, are available near the practice.

The dental team includes two orthodontists, four dental nurses who also cover reception and a practice manager.

The practice is owned by a company and as a condition of registration must have a person registered with the Care Quality Commission as the registered manager. Registered managers have legal responsibility for meeting

Summary of findings

the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run. The registered manager at Smile Orthodontics Yorkshire was one of the partners.

We spoke with the practice manager and asked for supporting information to be sent to the inspection to show where improvements had been made.

The practice is open:

Monday – Friday 9am – 5pm.

Our key findings were:

- The practice had suitable safeguarding processes. We found all staff knew their responsibilities for safeguarding adults and children.
- 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. We were told staff felt supported and listened to.
- The practice asked staff and patients for feedback about the services they provided. We were told this was now acted upon.

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 well-led?

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

The practice had arrangements in place 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. We found all staff were aware of this.

There was a clearly defined management structure and staff told us they felt supported. We were told if concerns were raised they were listened to and action was taken without fear of recrimination.

Improvements had been made to raise staff awareness with regards dental care record guidelines. Actions from audits were reviewed and discussed to encourage improvements.

All staff training logs were now in place and reviewed by the practice manager to ensure all staff were up to date with the recommended topics.

The appointment system had been reviewed to ensure patients could access the service in a timely manner.

All patient advice was now given in the dental treatment rooms to ensure patient confidentiality.

No action



Are services well-led?

Our findings

Governance arrangements

The registered manager had overall responsibility for the management and clinical leadership of the practice. The practice manager was responsible for the day to day running of the service. Staff knew the management arrangements and their roles and responsibilities.

The practice had policies, procedures and risk assessments to support the management of the service and to protect patients and staff. These included arrangements to monitor the quality of the service and make improvements. We were told all 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 a whistleblowing policy. Staff felt they could report concerns and would be listened to without fear of recrimination.

Staff were aware of the guidelines with regards dental care records and what was required to be recorded. All information was reviewed by the practice manager to ensure a consistent approach with regards to record keeping.

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 had received information about the importance of hand hygiene and how to raise concerns if they felt this was not being adhered to by all staff members.

Learning and improvement

We saw that the practice audited patients' dental care records to check that the orthodontists recorded the necessary information. Action plans were now discussed with the clinician to ensure improvement could be made.

All staff training logs were now in place and reviewed by the practice manager to ensure all staff were up to date with the required amount in recommended topics, including safeguarding adults and children.

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

The appointment system had been reviewed to ensure patients could access the service in a timely manner.