

Dencall 2005 Ltd

Office 76

Inspection report

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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

Ratings

Overall rating for this location

Inspected but not rated



Are services safe?

Inspected but not rated



Are services effective?

Inspected but not rated



Are services well-led?

Inspected but not rated



Summary of findings

Overall summary

We carried out this announced focused inspection on 15 February 2022 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 location 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).

To get to the heart of patients' experiences of care and treatment, we usually ask five key questions, however due to the ongoing COVID-19 pandemic and to reduce time spent on site, only the following three questions were asked:

- Is it safe?
- Is it effective?
- Is it well-led?

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

Summary of findings

Our judgements about each of the main services

Service

Rating

Summary of each main service

Urgent and emergency services

Inspected but not rated



Our findings were:

- Office 76 had systems to help them manage risk to patients and staff.
- Staff recruitment procedures were in line with current legislation, with the exception of criminal record checks.
- The appointment system took account of patients' needs.
- There was effective leadership and a culture of continuous improvement.
- Staff felt involved and supported and worked as a team.
- Office 76 had information governance arrangements.

Summary of findings

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Summary of this inspection

Background to Office 76

Background

Office 76 is based in Consett and is the head office for Dencall 2005 Ltd.

Dencall 2005 Ltd provides out of hours urgent and emergency NHS dental care across North East England and Cumbria. It operates as part of the Dental Clinical Assessment Service (DCAS): skilled dental nurses from Dencall 2005 Ltd undertake triage of callers experiencing dental issues and ensure those in need of urgent care receive this within an appropriate timescale.

The Dencall 2005 Ltd team includes two directors, an operational lead, two operational managers, an office administrator, six DCAS dentists, 25 dental surgeons, 40 dental triage nurses and 20 dental nurses.

Dencall 2005 Ltd has four locations; this report is about Office 76.

Activities that take place in Office 76 include day-to-day management and operations, remote working of answering telephone calls for the on-call service, staff liaison and training events. Clinical and staff records are securely stored on-site.

Office 76 operating hours are Monday to Sunday: 24 hours a day.

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

- Implement an effective recruitment procedure to ensure that appropriate criminal record checks are completed prior to new staff commencing employment.

How we carried out this inspection

During the inspection we spoke with one of the directors, the operational lead and both operational managers.




Our findings

Overview of ratings

Our ratings for this location are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Inspected but not rated	Inspected but not rated	Not inspected	Not inspected	Inspected but not rated	Inspected but not rated
Overall	Inspected but not rated	Inspected but not rated	Not inspected	Not inspected	Inspected but not rated	Inspected but not rated

Urgent and emergency services

Safe	Inspected but not rated 
Effective	Inspected but not rated 
Well-led	Inspected but not rated 

Are Urgent and emergency services safe?

Inspected but not rated 

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

Safety systems and processes, including staff recruitment, equipment and premises.

The provider had a recruitment policy and procedure to help them employ suitable staff. These reflected the relevant legislation.

Recruitment taster sessions were held at the office to provide information about the service to prospective employees. The provider arranged role play scenarios to give people a true reflection of the job.

We discussed the provider's recruitment protocols for undertaking criminal record checks. This was not in line with national guidance and we referred the provider to the relevant guidelines. They assured us they would review their procedure.

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

The provider ensured the facilities were maintained in accordance with regulations, through a service level agreement with the landlord.

Risks to patients

The provider had implemented systems to assess, monitor and manage risks to patient and staff safety. This included sepsis awareness and lone working.

Are Urgent and emergency services effective?

Inspected but not rated 

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

Effective needs assessment, care and treatment

Urgent and emergency services

The provider had systems to keep dental professionals up to date with current evidence-based practice. All staff were supported to do this.

Training was provided to employees in assessing dental emergencies, as well as other subjects relevant to their role.

Helping patients to live healthier lives

Staff would direct patients to a dental practice, where relevant, and encourage the need for preventive oral health.

Consent to care and treatment

Staff obtained patients' consent to care and treatment in line with legislation and guidance

Staff understood their responsibilities under the Mental Capacity Act 2005 (MCA).

The consent policy addressed the need to be mindful of a patient's capacity to consent when suffering in pain.

Effective staffing

Staff had the skills, knowledge and experience to carry out their roles.

Staff recruited by Dencall 2005 Ltd underwent a detailed induction and training plan. This took place over an eight-week period to cover subjects relevant to the role. For example, training would be provided for audits, record keeping, safeguarding, pharmaceuticals, A & E referrals, health and safety and communications. Staff were taught how to respond to specific dental problems, such as trauma, bleeding and swelling, as well as drug overdose and complex medical histories. Staff considered for the role would also receive support and training in conflict resolution to manage difficult calls.

Clinical staff completed continuing professional development required for their registration with the General Dental Council.

Co-ordinating care and treatment

Staff worked together and with other health and social care professionals to deliver effective care and treatment. Patients accessing the service were initially triaged to ensure they were seen within a specific time frame i.e. between 2 and 24 hours. If a patient called during working hours – usually 9am to 5pm - they were directed to a dental practice where required. Out of hours, staff would book patients into a clinic or out of hours hub with the relevant on-call dentist. A letter of discharge would be sent to the patients' GP.

Are Urgent and emergency services well-led?

We found this provider was providing well-led care in accordance with the relevant Regulations.

Urgent and emergency services

Leadership capacity and capability

Governance systems were efficient, effective and the management team were continually striving to improve.

The information and evidence presented during the inspection process was clear and well documented.

We saw effective processes to support and develop staff with their roles and responsibilities.

Culture

Staff demonstrated how they ensured high-quality sustainable services and improvements over time.

Staff stated they felt respected, supported and valued. They were proud to work for the provider.

Staff discussed their training needs during annual appraisals and during clinical supervision. They also discussed learning needs, general wellbeing and aims for future professional development.

The provider had arrangements to ensure staff training was up-to-date and reviewed at the required intervals.

Governance and management

Staff had clear responsibilities roles and systems of accountability to support good governance and management.

The office had a system of clinical governance in place which included policies, protocols and procedures that were accessible to all members of staff and were reviewed on a regular basis.

We saw there were clear and effective processes for managing risks, issues and performance.

Appropriate and accurate information

The office had information governance arrangements and staff were aware of the importance of these in protecting patients' personal information. Staff and patient records were securely stored on-site.

Continuous improvement and innovation

The office had systems and processes for learning, continuous improvement and innovation. Audits were completed frequently to better the service. Topics included waiting times, patients who did not attend their appointment, phone calls and 111 disposition code against appointment times.