

Mr. Rajesh Patel

The Orthodontic Practice

Inspection report

5 St James Court
Friar Gate
Derby
DE1 1BT
Tel: 01332295727

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Overall summary

We carried out this announced comprehensive inspection on 27 September 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 practice 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.

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:

- The orthodontic clinic was visibly clean and well-maintained.
- The orthodontic clinic had infection control procedures which reflected published guidance.
- Staff knew how to deal with medical emergencies. Appropriate medicines and life-saving equipment were available although these needed to be reviewed.
- The orthodontic clinic had systems to help them manage risk to patients and staff.
- Safeguarding processes were in place and staff knew their responsibilities for safeguarding vulnerable adults and children.

Summary of findings

- The orthodontic clinic had staff recruitment procedures which reflected current legislation.
- The clinical staff provided patients' care and treatment in line with current guidelines.
- Patients were treated with dignity and respect and staff took care to protect their privacy and personal information.
- Staff provided preventive care and supported patients to ensure better oral health.
- 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.
- Staff and patients were asked for feedback about the services provided.
- Complaints were dealt with positively and efficiently.
- The orthodontic clinic had information governance arrangements.

Background

The Orthodontic Practice is in Derby and provides mainly NHS orthodontic care and treatment for adults and children.

There is level access to the orthodontic clinic for people who use wheelchairs and those with pushchairs. Car parking spaces, including dedicated parking for disabled people, are available near the orthodontic clinic. Adjustments to support patients with additional needs included having an accessible toilet and wide doors within the orthodontic clinic.

The dental team includes 1 orthodontist, 1 orthodontic therapist, 3 dental nurses (one of whom is also the practice manager), 1 receptionist and an off-site administrator. The practice has 1 treatment room which contains 3 dental chairs.

During the inspection we spoke with the orthodontist, 1 dental nurse and the practice manager. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday to Thursday from 8:30am to 5pm.

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

- Take action to ensure the availability of equipment in the orthodontic clinic to manage medical emergencies taking into account the guidelines issued by the Resuscitation Council (UK) and the General Dental Council.
- Improve the orthodontic clinic's protocols and procedures for the use of X-ray equipment in compliance with The Ionising Radiations Regulations 2017 and Ionising Radiation (Medical Exposure) Regulations 2017 and taking into account the guidance for Dental Practitioners on the Safe Use of X-ray Equipment.

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?	No action ✓
Are services effective?	No action ✓
Are services caring?	No action ✓
Are services responsive to people's needs?	No action ✓
Are services well-led?	No action ✓

Are services safe?

Our findings

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

Safety systems and processes, including staff recruitment, equipment and premises and radiography (X-rays)

The orthodontic clinic had safeguarding processes and staff knew their responsibilities for safeguarding vulnerable adults and children.

The orthodontic clinic had infection control procedures which reflected published guidance. The orthodontic clinic had introduced additional procedures in relation to COVID-19 in accordance with published guidance. We noted that protein tests on the washer disinfectors were being completed monthly, rather than weekly as identified in guidance.

The orthodontic clinic had procedures to reduce the risk of Legionella or other bacteria developing in water systems, in line with a risk assessment.

The orthodontic clinic had policies and procedures in place to ensure clinical waste was segregated and stored appropriately in line with guidance.

We saw the orthodontic clinic was visibly clean and there was an effective cleaning schedule to ensure the practice was kept clean.

The orthodontic clinic had a recruitment policy and procedure to help them employ suitable staff and had checks in place for agency and locum staff. These reflected the relevant legislation.

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

The orthodontic clinic ensured equipment was safe to use and maintained and serviced according to manufacturers' instructions. The practice ensured the facilities were maintained in accordance with regulations.

A fire risk assessment was carried out in line with the legal requirements and the management of fire safety was effective.

The orthodontic clinic had arrangements to ensure the safety of the X-ray equipment and we saw the required radiation protection information was available. We noted that X-rays were not justified in the dental care records we looked at. We discussed this with the provider who assured us this would be completed moving forward.

Risks to patients

The orthodontic clinic had implemented systems to assess, monitor and manage risks to patient and staff safety. This included sharps safety and sepsis awareness.

Emergency equipment and medicines were available and checked in accordance with national guidance. We saw that the Adrenalin in the emergency medicines had the correct syringe but incorrect needle size. Within the emergency equipment we noted the Oropharyngeal airways need replacing as they were passed their use by date, there was no paediatric self-inflating bag, the adult self-inflating bag needed different sizes of mask (sizes 0 to 4) and there was no oxygen mask with a re-breathable bag. We discussed this with the provider who made arrangements to order replacements during the inspection.

Staff knew how to respond to a medical emergency and had completed training in emergency resuscitation and basic life support every year.

The orthodontic clinic had risk assessments to minimise the risk that could be caused from substances that are hazardous to health.

Are services safe?

Information to deliver safe care and treatment

Dental care records we saw were complete, legible, were kept securely and complied with General Data Protection Regulation requirements.

The orthodontic clinic had systems for referring patients with suspected oral cancer under the national two-week wait arrangements.

Safe and appropriate use of medicines

The orthodontic clinic had systems for appropriate and safe handling of emergency medicines.

Track record on safety, and lessons learned and improvements

The orthodontic clinic had implemented systems for reviewing and investigating incidents and accidents. The orthodontic clinic had a system for receiving and acting on safety alerts.

Are services effective?

(for example, treatment is effective)

Our findings

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

Effective needs assessment, care and treatment

The orthodontic clinic had systems to keep dental professionals up to date with current evidence-based practice.

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

Helping patients to live healthier lives

The orthodontic clinic provided preventive care and supported patients to ensure better 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.

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

Monitoring care and treatment

The orthodontic clinic kept detailed dental care records in line with recognised guidance.

We saw evidence the dentists graded and reported on the radiographs they took. However, as already noted radiographs were not justified. The orthodontic clinic carried out radiography audits six-monthly following current guidance and legislation.

Effective staffing

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

Newly appointed staff had a structured induction and 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.

Are services caring?

Our findings

We found this orthodontic clinic was providing caring services in accordance with the relevant regulations.

Kindness, respect and compassion

Staff were aware of their responsibility to respect people's diversity and human rights.

On the day of inspection, we spoke with two patients. They told us that staff were compassionate, understanding, kind and helpful.

Privacy and dignity

Staff were aware of the importance of privacy and confidentiality.

The orthodontic clinic had installed closed-circuit television, to improve security for patients and staff. Relevant policies and protocols were in place.

Staff password protected patients' electronic care records and backed these up to secure storage. They stored paper records securely.

Involving people in decisions about care and treatment

Staff helped patients to be involved in decisions about their care.

Staff gave patients clear information to help them make informed choices about their treatment.

The orthodontic clinic's information leaflets provided patients with information about the range of treatments available at the orthodontic clinic and provided information relevant to their ongoing care.

The orthodontist described the methods they used to help patients understand treatment options. These included for example, photographs, study models, X-ray images and the use of a digital camera.

Are services responsive to people's needs?

Our findings

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

Responding to and meeting people's needs

The orthodontic clinic organised and delivered services to meet patients' needs. It took account of patient needs and preferences.

Staff were clear about the importance of emotional support needed by patients when delivering care.

Timely access to services

Patients could access care and treatment from the practice within an acceptable timescale for their needs.

The orthodontic clinic had an appointment system to respond to patients' needs.

Listening and learning from concerns and complaints

The orthodontic clinic responded to concerns and complaints appropriately and discussed outcomes with staff to share learning and improve the service.

Are services well-led?

Our findings

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

Leadership capacity and capability

The provider demonstrated a transparent and open culture in relation to people's safety.

There was strong leadership and emphasis on continually striving to improve.

Systems and processes were embedded, and staff worked together in such a way that the inspection did not highlight any major issues or omissions.

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

We saw the orthodontic clinic had effective processes to support and develop staff with additional roles and responsibilities.

Culture

The orthodontic clinic could show how they ensured high-quality sustainable services and demonstrated improvements over time.

Staff stated they felt respected, supported and valued. They were proud to work in the orthodontic clinic.

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

The orthodontic clinic 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 orthodontic clinic 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

Staff acted on appropriate and accurate information.

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

Engagement with patients, the public, staff and external partners

Staff gathered feedback from patients, the public and external partners and a demonstrated commitment to acting on feedback.

The orthodontic clinic gathered feedback from staff through meetings and informal discussions. Staff were encouraged to offer suggestions for improvements to the service and said these were listened to and acted on.

The orthodontic clinic was also a member of a good practice certification scheme.

Continuous improvement and innovation

Are services well-led?

The orthodontic clinic had systems and processes for learning, continuous improvement and innovation.

The orthodontic clinic had quality assurance processes to encourage learning and continuous improvement. These included audits of dental care records, radiographs and infection prevention and control. We noted the radiography audit had failed to identify the lack of justification for X-rays in the dental care records.

Staff kept records of the results of these audits and the resulting action plans and improvements.