

Leong & Motlagh Dental Practice

Inspection Report

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Addiscombe
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Overall summary

We carried out this announced inspection on 18 January 2018 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 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

Dental Practice is in Addiscombe, Croydon and provides NHS and private treatment to patients of all ages.

There is level access via a portable ramp, for people who use wheelchairs and those with pushchairs. Car parking spaces are available for patients in surrounding roads.

The dental team includes four dentists, three dental nurses, one trainee dental nurse, and one dental hygienist. One of the nurses also covers reception duties. The practice is set out over two levels. The ground floor

Summary of findings

has one treatment room, and there are three treatment rooms on the first floor as well as the patient waiting room. The practice also has a dedicated decontamination room and an X-ray room.

The practice is owned by a partnership 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 the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run. The registered manager at Dental Practice was one of the principal dentists.

On the day of inspection we collected five CQC comment cards filled in by patients. This information gave us a positive view of the practice.

During the inspection we spoke with two dentists, two dental nurses (this included one nurse who was covering reception duties). We looked at practice policies and procedures and other records about how the service is managed.

The practice is open: 8.30am to 5.30pm Monday to Fridays. The practice closes from 1.00pm to 2.00pm for lunch. They also offer extended hours on a Thursday and close at 6.30pm.

Our key findings were:

- The practice was clean and well maintained.
- The practice had infection control procedures which reflected published guidance.
- Staff knew how to deal with emergencies. Appropriate medicines and life-saving equipment were available.
- The practice had systems to help them 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 protocols for referral of patients and ensure urgent referrals are monitored suitably.

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 had systems to learn from incidents and complaints to help them improve.

Staff received training in safeguarding and knew how to recognise the signs of abuse and how to report concerns.

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 good, professional and informative. The dentists discussed treatment with patients so they could give informed consent and recorded this in their records.

The practice had clear arrangements when patients needed to be referred to other dental or health care professionals.

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 five people. Patients were positive about all aspects of the service the practice provided. They told us staff were friendly and kind. They said that they were given helpful and informative explanations about dental treatment, and said their dentist listened to them.

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

No action



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.

No action



Summary of findings

Staff considered patients' different needs. This included providing facilities for disabled patients and families with children. The practice had access to telephone and face to face interpreter services and had arrangements to help patients with sight or hearing loss.

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

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.

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

The practice had some processes in place for monitoring clinical and non-clinical areas of their work to help them improve and learn, although improvements could be made.

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 recorded, responded to and discussed all incidents to reduce risk and support future learning.

One of the principal dentists received national patient safety and medicines alerts such as those from the Medicines and Healthcare Products Regulatory Authority (MHRA). They told us that relevant alerts were discussed with staff, acted on and stored for future reference.

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. One of the associate dentists was the safeguarding lead. We saw evidence that staff received appropriate safeguarding training. Staff knew about the signs and symptoms of abuse and neglect and how to report concerns. 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. Staff told us that nurses sometimes were involved in the re-sheathing of needles. We discussed this with the principal dentists and they both confirmed that they would review their system and only dentists would be involved in any handling of sharps. The dentists used rubber dams in line with guidance from the British Endodontic Society when providing root canal treatment.

The practice had a business continuity plan describing how the practice would deal with events which could disrupt the normal running of the practice. The plan was out of date and needed updating. We discussed this with the principal dentist and they advised us that this would be done immediately.

Medical emergencies

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

Emergency equipment and medicines 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. The practice had an Automated External Defibrillator (AED) and medical oxygen available.

Staff recruitment

The practice had a staff recruitment policy and procedure to help them employ suitable staff. This reflected the relevant legislation. Most staff had been working in the practice for a number of years (before the practice was registered with the CQC). We looked at six staff recruitment records. These showed the practice followed their recruitment procedure that was relevant at their initial time of employment.

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's health and safety policies and risk assessments were up to date and reviewed to help manage potential risk. These covered general workplace and specific dental topics. A practice risk assessment was carried out routinely. The last risk assessment was completed in August 2017.

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

An external fire risk assessment had been carried out in 2013. We saw that the practice had processes in place to continually monitor risks to fire and hazards.

A dental nurse worked with the dentists 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:

Are services safe?

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 suitable arrangements for transporting, cleaning, checking, sterilising and storing instruments in line with HTM01-05. The records showed equipment staff used for cleaning and sterilising instruments was maintained and used in line with the manufacturers' guidance.

The practice was not carrying out infection prevention and control audits twice a year, although they had completed one in the past six months. We discussed this with the principal dentists and they assured us that they would start completing audits twice a year. The latest audit showed the practice was meeting the required standards.

Sharps bins were available and assembled correct however they were not fully accessible in all surgeries as in some instances they were kept in the cupboard. We discussed this with the practice and they moved them to make them more accessible.

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

We saw cleaning schedules for the premises. The practice was clean when we inspected and patients confirmed this was usual.

Equipment and medicines

We saw servicing documentation for the equipment used. Staff carried out checks in line with the manufacturers' recommendations.

The practice stored and kept records of NHS prescriptions as described in current guidance.

Radiography (X-rays)

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

We saw evidence that the dentists justified, graded and reported on the radiography they took. The practice carried out radiography audits every year following current guidance and legislation.

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

Are services effective?

(for example, treatment is effective)

Our findings

Monitoring and improving outcomes for patients

The practice kept detailed dental care records containing information about the patients' current dental needs, past treatment and medical histories. The dentists assessed patients' treatment needs in line with recognised guidance.

We saw that the practice audited patients' dental care records to check that the dentists recorded the necessary information.

Health promotion & prevention

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

The dentists told us they prescribed high concentration fluoride toothpaste if a patient's risk of tooth decay indicated this would help them.

The dentists told us that where applicable they discussed smoking, alcohol consumption and diet with patients during appointments.

Staffing

Staff new to the practice had a period of induction based on an induction programme. We confirmed clinical staff completed the continuous professional development required for their registration with the General Dental Council.

Staff told us they discussed training needs at appraisals. Staff confirmed they found the appraisal system very useful.

Working with other services

Dentists confirmed they referred patients to a range of specialists in primary and secondary care if they needed treatment the practice did not provide. This included referring patients with suspected oral cancer under the national two week wait arrangements. This was initiated by NICE in 2005 to help make sure patients were seen quickly by a specialist. The practice did not have systems in place to follow up on referrals that were made. We discussed this with the principal dentists and they confirmed that they would implement appropriate systems immediately.

Consent to care and treatment

The practice team understood the importance of obtaining and recording patients' consent to treatment. The dentists told us they gave patients information about treatment options and the risks and benefits of these so they could make informed decisions.

The practice's consent policy included information about the Mental Capacity Act 2005. The team understood their responsibilities under the act when treating adults who may not be able to make informed decisions. Both principals demonstrated knowledge of MCA and the best interest principle. Staff were aware of the need to consider mental capacity 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.

Patients commented positively that staff were kind and pleasant. We saw that staff treated patients respectfully and were friendly towards patients at the reception desk and over the telephone.

Staff were aware of the importance of privacy and confidentiality. Dentists gave example of maintain patients privacy which included keeping door closed during treatment and keeping information confidential.

The layout of reception and waiting areas provided privacy when reception staff were dealing with patients. Staff told

us that if a patient asked for more privacy they would take them into another room. The reception computer screens were not visible to patients and staff did not leave personal information where other patients might see it.

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

Involvement in decisions about care and treatment

The practice gave patients clear information to help them make informed choices. Patients comments indicated that staff listened to them, did not rush them and discussed options for treatment with them.

The practice's leaflet provided patients with information about the range of treatments available at the practice. These included general dentistry and treatments for gum disease.

Dentists told us they used models and diagrams when they discussed treatment options or explained treatment.

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 the same day. Patients told us they had enough time during their appointment and did not feel rushed. Appointments ran smoothly on the day of the inspection and patients were not kept waiting.

Staff told us that they currently had patients for whom they needed to make adjustments to enable them to receive treatment. Staff also were aware of vulnerable patients and they assisted them by calling to remind of appointments or calling to make sure they got home after an appointment and booking longer appointments for nervous patients.

Promoting equality

The practice made reasonable adjustments for patients with disabilities. These included step free access, patient toilet with hand rails. They were also aware of patients who were deaf or had hearing impairments and they arranged for interpreters to attend appointments with them to sign and communicate on their behalf.

Staff said they could provide information in different formats and languages to meet individual patients' needs. They had access to interpreter/translation services which included British Sign Language and braille. Staff in the practice spoke languages which included Cantonese, Mandarin, Malay, Farsi and German.

Access to the service

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

We confirmed the practice kept waiting times and cancellations to a minimum.

The practice was committed to seeing patients experiencing pain on the same day and kept appointments free for same day appointments. The information leaflet 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. One of the principal dentists was responsible for dealing with these. Staff told us they would tell the principal dentist about any formal or informal comments or concerns straight away so patients received a quick response.

The principal dentist told us they aimed to settle complaints in-house and invited patients to speak with them in person to discuss these. The practice had not received any complaints in the past 12 months. The principal dentist explained what they would do and this was in line with their policy. Information was not made available to people about organisations they could contact if not satisfied with the way the practice dealt with their concerns. The practice told us they would ensure this information was updated and available to patients as soon as possible.

Are services well-led?

Our findings

Governance arrangements

The principal dentists had overall responsibility for the management and clinical leadership of the practice and was also 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. Some of the policies required updating but one of the principal dentists told us they would make it a priority to review their policies and procedures.

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. Both principals gave appropriate example of when it would apply.

Staff said the principal dentists encouraged them to raise any issues and felt confident they could do this. They knew who to raise any issues with and told us principal dentists was approachable, would listen to their concerns and act appropriately. The principal dentists discussed concerns at staff meetings and it was clear the practice worked as a team and dealt with issues professionally.

The practice held meetings where staff could raise any concerns and discuss clinical and non-clinical updates. Immediate discussions were arranged to share urgent information. We discussed content and frequency of meetings with staff and they were happy with the current arrangements. They told us the meetings were beneficial and they felt confident in the leadership.

Learning and improvement

The practice had quality assurance processes for learning and continuous improvement. These included audits of dental care records and radiograph. They had clear records of the results of these audits and the resulting action plans and improvements. They had only recently started completing infection control and prevention audits.

The dental nurses received annual appraisals as part of their performance review. They discussed learning needs, general wellbeing and aims for future professional development. Staff confirmed they received appraisals and we saw paperwork confirming this.

Staff told us they completed medical emergencies and basic life support, each year as a team. 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 patient surveys and verbal comments to obtain staff and patients' views about the service. We saw examples of suggestions from patients/staff the practice had acted on. For example patients raised concerns about getting through on the phone. The practice implemented a system to reduce this which one of the principal dentists told us was working.

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