

The White House Dental Practice Limited

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Inspection Report

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Date of inspection visit: 29 August 2017
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Overall summary

We carried out this announced inspection on 29 August 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 CQC inspector who was supported by a specialist dental adviser.

We told the NHS England area team and Healthwatch that we were inspecting the service. 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 service was providing safe care in accordance with the relevant regulations.

Are services effective?

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

Are services caring?

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

Are services responsive?

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

Are services well-led?

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

Background

White House Dental Service provides NHS domiciliary treatment to patients within London Borough of Ealing. This service is provided in either a care home setting or in the patients' own home.

The dental team includes one dentist, one dental nurse and one administrator.

Summary of findings

The service 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 service is run. The registered manager at White House Dental Service was the clinical director.

On the day of inspection we collected 12 CQC comment cards filled in by patients. This information gave us a positive view of the service.

During the inspection, we looked at service policies, procedures, and other records about how the service is managed.

The service is open:

- Wednesday: 9:00am to 6:00pm

Our key findings were:

- Staff knew how to deal with emergencies. Appropriate medicines and life-saving equipment were available.
- The service had systems to help them manage risk.
- The service had suitable safeguarding processes and staff knew their responsibilities for safeguarding adults.

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

We identified areas of notable practice:

The provider proactively engaged with the local community in a variety of ways to improve oral health for various population groups, for example:

- Partnering with various local and national initiatives to raise oral health awareness, for example, the East African Senior Citizens Association, the Mael Gael and Sunrise Radio.

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 service was providing safe care in accordance with the relevant regulations.

The service had systems and processes to provide safe care and treatment. They used learning 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 service completed essential recruitment checks.

There were logs in place to monitor the use of prescription pads.

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

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

No action



Are services effective?

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

The dentist assessed patients' needs and provided domiciliary care. We noted they were aware of the recognised guidance.

Patients described the treatment they received as efficient, effective and good. The dentist discussed treatment with patients so they could give informed consent. The dentists discussed treatment with patients so they could give informed consent and recorded this in their records.

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

The dentist supported dental nurses to complete training relevant to their roles and had systems to help them monitor this.

No action



Are services caring?

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

They had arrangements to ensure the smooth running of the service. These included systems 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 service kept complete patient dental care records that were, clearly written or typed and stored securely.

The service monitored clinical and non-clinical areas of their work to help them improve and learn. This included asking for and listening to the views of patients and staff.

No action



Summary of findings

Are services responsive to people's needs?

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

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

Staff considered patients' different needs. The service provided care in their home or care home setting.

The service 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 service was providing well-led care in accordance with the relevant regulations.

They had arrangements to ensure the smooth running of the service. These included systems 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 service kept complete patient dental care records that were, clearly written or typed and stored securely.

The service monitored clinical and non-clinical areas of their work to help them improve and learn. This included asking for and listening to the views of patients and staff.

No action





Are services safe?

Our findings

Reporting, learning and improvement from incidents

The service did have policies and procedures to report, investigate, respond and learn from accidents, incidents and significant events.

The service did receive national patient safety and medicines alerts from the Medicines and Healthcare Products Regulatory Authority (MHRA).

Reliable safety systems and processes (including safeguarding)

Staff knew their responsibilities if they had concerns about the safety of adults who were vulnerable due to their circumstances. The service had a safeguarding policy for adults and provided staff with information about identifying, reporting and dealing with suspected abuse. We saw evidence that staff had received safeguarding training.

The service had a whistleblowing policy and they were aware of who to refer to externally.

We looked at the service's arrangements for safe dental care and treatment. There were risk assessments for all aspects of the service including safe use of sharps and domiciliary care.

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.

Staff recruitment

The service had a staff recruitment policy and procedure to help them employ suitable staff. This reflected the relevant legislation. We looked at two staff recruitment records. These showed the service followed their recruitment procedure.

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 service'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. The service 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 dentist when they treated patients.

Infection control

The service 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 services (HTM01-05) published by the Department of Health. Staff completed infection prevention and control training every year.

The service 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 service carried out infection prevention and control audits twice a year. The latest audit showed the service was meeting the required standards.

The service had procedures to reduce the possibility of Legionella or other bacteria developing in the water system they used, in line with a risk assessment.

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.



Are services effective?

(for example, treatment is effective)

Our findings

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Are services caring?

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Are services responsive to people's needs?

(for example, to feedback?)

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