

Medicare Francais

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Inspection Report

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Overall summary

We carried out this announced inspection on 4 July 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.

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

Medicare Francais is a private clinic providing GP, dental and paramedical diagnostics, treatment, management and treats both adults and children at 198-200 Earls Court road, London. The building is owned and maintained by a private landlord. Services are provided on the first and second floors.

The practice has parking available on side roads and in nearby car parks.

The dental team includes three dentists, an orthodontist, two dental nurses and a practice manager. There were two treatment rooms and a decontamination room.

Summary of findings

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 the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run. The registered manager at Medicare Francais was the practice manager.

We received feedback from 90 people about the service, including comment cards, most of which were very positive about the service and indicated that clients were treated with kindness and respect. Staff were described as helpful, caring, thorough and professional. There were eight that were positive about the service but mentioned access being an issue due to the stairs.

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

Our key findings were:

- The practice appeared 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 staff recruitment procedures. However, improvements were required.
- 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 practice was providing preventive care and supporting patients to ensure better oral health.
- The appointment system met patients' needs.
- The practice had good leadership, but improvements were required in regards to developing a culture of continuous improvement.
- 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.
- The practice had suitable information governance arrangements.

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

- Review practice's recruitment procedures to ensure that appropriate background checks are completed prior to new staff commencing employment at the practice.
- Review the practice's audit protocols to ensure radiography audits are undertaken and where relevant have documented learning points that are shared with staff and resulting improvements can be demonstrated.
- Review the practice's sharps procedures and ensure the practice is in compliance with the Health and Safety (Sharp Instruments in Healthcare) Regulations 2013.
- Only supply unlicensed medicines against valid special clinical needs of an individual patient where there is no suitable licensed medicine available.

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.

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 in most cases.

The premises and equipment were clean and most equipment was adequately maintained. However, some improvements were required in regards to the maintenance of implant equipment. The practice followed national guidance for cleaning, sterilising and storing dental and medical instruments.

No action



Are services effective?

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

The dentist understood the needs and provided care and treatment as best they could in line with recognised guidance. 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. There was evidence of a induction programme for staff.

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 90 people. Patients were generally positive about the service the practice provided.

The said that they were given detailed and clear explanations about dental treatment and said their dentist listened to them. Patients commented that they made them feel at ease.

We saw 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 service was providing responsive care in accordance with the relevant regulations.

The practice took patients views seriously. They valued compliments from patients and responded to concerns and complaints quickly and constructively to improve the quality of care.

No action



Summary of findings

Are services well-led?

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

There was a clearly defined management structure and staff felt supported and appreciated.

Openness, honesty and transparency were demonstrated when responding to incidents and complaints. The provider was aware of and had systems to ensure compliance with the requirements of the Duty of Candour.

The practice had arrangements to ensure the smooth running of the service. These included systems for the dental practice team to discuss the quality and safety of the care and treatment provided.

The practice had some arrangements in place to monitor the quality of work, however, improvements were required to ensure that radiography audits were regularly undertaken.

No action



Are services safe?

Our findings

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Are services effective?

(for example, treatment is effective)

Our findings

Effective needs assessment, care and treatment

The practice had systems to keep dental practitioners up to date with current evidence-based practice. We saw that clinicians assessed needs and delivered care and treatment in line with current legislation, standards and guidance supported by clear clinical pathways and protocols.

Monitoring care and treatment and improving outcomes for patients

The practice kept dental care records containing information about the patients' current dental needs, past treatment and medical histories. The dentist assessed patients' treatment needs. Improvements could be made to ensure understanding and consistency in the completion of dental care records taking into account guidance provided by the Faculty of General Dental Practice regarding clinical examinations and record keeping.

Effective staffing

Evidence reviewed showed staff had the skills and knowledge to deliver effective care and treatment.

The provider kept records to demonstrate that staff had appropriate mandatory training to cover the scope of their work including training for safeguarding, infection control and fire safety.

We confirmed dental clinical staff completed the continuous professional development required for their registration with the General Dental Council, including Ionising Radiation (Medical Exposure) Regulations 2017 (IRMER) Requirements.

Coordinating patient care and information sharing

We found that the service had effective systems in place for coordinating patient care and sharing information as and when required.

The dentists confirmed that they referred patients to a range of specialists in primary and secondary care if they needed treatment the practice did not provide.

The practice had systems and processes to identify, manage, follow up and where required refer patients.

The practice also had systems and processes for 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.

Supporting patients to live healthier lives

The dentist told us that where applicable they would discuss smoking, alcohol consumption and diet with patients during appointments.

Consent to care and treatment

The service obtained consent to care and treatment in line with legislation and guidance.

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

The practice staff had an understanding of Mental Capacity Act 2005. There was a consent policy in place.

Pricing of treatment procedures was clearly communicated to patients verbally and through leaflets and posters.

Are services caring?

Our findings

Kindness, respect and compassion

Staff treated clients with kindness, respect, dignity and professionalism.

Staff we spoke with were aware of their responsibility to respect people's diversity and human rights. We saw that staff treated patients respectfully and kindly and were friendly towards patients at the reception desk and over the telephone.

Staff were aware of the importance of privacy and confidentiality. 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.

Involvement in decisions about care and treatment

Staff helped clients in being involved in decisions about their treatment.

The practice gave patients clear information to help them make informed choices.

Patients reported that staff listened to them, did not rush them and discussed options for treatment.

The practice's website provided patients with information about the range of treatments available at the practice. These included general dentistry and implants.

Privacy and Dignity

The staff respected and promoted patients' privacy and dignity. We observed treatment rooms to be spacious, clean and private. Staff could offer clients a private room to discuss their needs in the reception area.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

Responding to and meeting patients' needs

The clinic organised and delivered services to meet clients' needs and expectations. The facilities and premises were appropriate for the services delivered. The website contained sufficient information regarding the services offered.

Timely access to the service

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.

The practice displayed its opening hours in the premises and on the practice website. We confirmed the practice kept waiting times and cancellations to a minimum.

Listening and learning from concerns and complaints

The service had a clear procedure for managing complaints. They took complaints and concerns seriously and responded to them appropriately to improve the quality of care.

The practice had a complaints policy providing guidance to staff on how to handle a complaint.

The practice manager was responsible for dealing with complaints. Staff told us they would tell the manager about any formal or informal comments or concerns straight away so patients received a quick response. Verbal and written complaints were recorded onto a central log.

We looked at comments, compliments and complaints the practice received. These showed the practice responded to concerns appropriately and discussed outcomes with staff to share learning and improve the service.

Information was available about organisations patients could contact if not satisfied with the way the practice dealt with their concerns. This included the dental complaints service and the General Dental Council.

Are services well-led?

Our findings

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