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Cambridge Orthodontic Practice

Inspection report

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Overall summary

We carried out this announced focused inspection on 24 January 2023 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 5 key questions:

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

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

Our findings were:

- The dental clinic was visibly clean and well-maintained.
- The practice had some systems to help them manage risk to patients and staff. We found minor shortfalls in appropriately assessing and mitigating risks in relation to medical emergency equipment, incident reporting and fire safety management
- Safeguarding processes were in place and staff knew their responsibilities for safeguarding vulnerable adults and children.
- The practice had staff recruitment procedures which reflected current legislation.
- The clinical staff provided patients' care and treatment in line with current guidelines.

Summary of findings

- Staff received good support with their professional development and meaningful appraisal.
- There was effective leadership and a culture of continuous improvement.
- Staff felt involved and supported and worked as a team.
- Complaints were dealt with positively and efficiently.
- Patients were asked for feedback about the services provided

Background

Cambridge Orthodontic provides both NHS and private orthodontic care and treatment for adults and children.

The practice has made reasonable adjustments to support patients with additional needs. There is level access to the premises for people who use wheelchairs, downstairs treatment areas and a fully accessible toilet. Limited patient car parking is available directly outside the premises.

The dental team includes 2 orthodontists, 4 orthodontic therapists, 6 dental nurses, a practice manager, and 2 reception staff. The practice has 4 dental chairs.

During the inspection we spoke with the practice manager, one of the principal orthodontists, an orthodontist therapist and two dental nurses. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open on Mondays from 8.30am to 7pm; on Tuesdays, Wednesdays and Fridays from 8.30am to 5pm, and on Wednesdays from 8.30am to 5.30pm.

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

- Take action to ensure the availability of equipment in the practice to manage medical emergencies taking into account the guidelines issued by the Resuscitation Council (UK) and the General Dental Council.
- Undertake a comprehensive fire risk assessment to ensure ongoing fire safety management is effective.
- Implement an effective system for reviewing incidents or significant events with a view to preventing further occurrences and ensuring that improvements are made as a result.

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 practice 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 practice had safeguarding processes and staff knew their responsibilities for safeguarding vulnerable adults and children. Staff had completed appropriate training and we noted information about protection agencies displayed around the practice making it easily accessible. Staff gave us specific examples where they had reported concerns, demonstrating they took the protection of patients seriously.

The practice had infection control procedures which reflected published guidance. However, staff were not aware of the maximum water temperature that dirty instruments had to be scrubbed in, and information from the autoclave's data logger was not downloaded frequently enough to check it was operating effectively.

The practice had procedures to reduce the risk of Legionella or other bacteria developing in water systems, in line with a risk assessment. We noted that the recommendations from the risk assessment had been completed.

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

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

The practice had a recruitment policy and procedure to help them employ suitable staff. These reflected the relevant legislation. Staff records we reviewed demonstrated that appropriate pre-employment information had been obtained.

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

The practice ensured equipment was safe to use and maintained and serviced according to manufacturers' instructions.

There were regular fire evacuation simulations and we noted all fire safety equipment had been tested regularly. However, the practice's fire risk assessment was very basic and had not been completed by a person with knowledge or training in fire safety.

The practice had arrangements to ensure the safety of the X-ray equipment and we saw the required radiation protection information was available.

Risks to patients

The practice had implemented systems to assess, monitor and manage risks to patient and staff safety. We looked at a range of policies and risk assessments which described how the practice aimed to provide safe care for patients and staff.

Emergency equipment and medicines were available and checked in accordance with national guidance, apart from a size zero oropharyngeal airway and eye wash solution.

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

The practice had risk assessments to minimise the risk that could be caused from substances that were hazardous to health.

We noted that there was good signage throughout the premises clearly indicating fire exits, closed circuit television usage, and X-ray warning signs to ensure that patients and staff were protected.

Are services safe?

Safe and appropriate use of medicines

The practice had systems for appropriate and safe handling of medicines and prescriptions.

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.

Track record on safety, and lessons learned and improvements

The practice had implemented effective systems for reviewing and investigating incidents and accidents. We viewed the practice's accident book and noted that the recording of incidents was good, however there was little evidence to show how learning from these had been shared and used to prevent their recurrence.

There was a system for receiving and acting on national patient safety alerts.

Are services effective?

(for example, treatment is effective)

Our findings

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

Effective needs assessment, care and treatment

The practice had systems to keep dental professionals up to date with current evidence-based practice. A range of clinical audits was completed to ensure patients received effective and safe care.

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

Helping patients to live healthier lives

The practice provided preventive care and supported patients to ensure better oral health in line with the Delivering Better Oral Health toolkit.

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 and the requirements of Gillick competency in relation to younger patients.

Monitoring care and treatment

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

We saw evidence the orthodontist justified, graded and reported on the radiographs they took. The practice carried out regular radiography audits 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.

Staff told us they had enough time to treat patients and did not feel rushed in their work.

Co-ordinating care and treatment

Staff worked together and with other health and social care professionals to deliver effective care and treatment. Patient referrals were monitored to ensure their timely management.

Are services caring?

Our findings

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

Kindness, respect and compassion

Staff were clear about the importance of emotional support needed by patients when delivering care and gave us specific examples of where they had gone out of their way to support patients.

We reviewed about 20 patient feedback surveys. In these, staff had been described as friendly, caring, helpful and attentive.

Privacy and dignity

Staff were aware of the importance of patient privacy and confidentiality. Staff password protected patients' electronic care records and backed these up to secure storage. Training files showed that staff had received training in information governance and data protection, so they were aware of how to manage patients' information in line with legal requirements.

The patient waiting area was separate from the reception desk, allowing for patients' privacy.

However, treatment areas on the lower floor were all located within one large room, with each area separated from the rest by a low wall and screen. This could compromise people's privacy and confidentiality as conversations between people and staff could be overheard.

Involving people in decisions about care and treatment

Staff helped patients to be involved in decisions about their care and gave them clear information to help them make informed choices about their treatment. There was information on the practice's website about the different types of orthodontic appliances as well as case studies. Leaflets and information sheets were also available to give to patients.

Are services responsive to people's needs?

Our findings

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

Responding to and meeting people's needs

The practice had made good adjustments for patients with disabilities which included level access to the premises, a fully accessible toilet and downstairs treatment areas. Patients also had access to a portable hearing induction loop if needed.

Staff could access translation services for patients who did not understand or speak English and staff spoke a variety of languages between them.

Timely access to services

The practice offered extended opening hours until 7pm two evenings a week. There was a text appointment reminder service available to patients, and emergency appointment slots were available each day. Staff told us they worked hard to accommodate patient appointment times around school exams and university holidays.

At the time of our inspection, the practice was able to take on new patients, although waiting times for NHS patients was about 2 years.

Listening and learning from concerns and complaints

Information about how to complain was available in the waiting area and on the practice's website. The practice responded to concerns and complaints appropriately and discussed outcomes with staff to share learning, evidence of which we saw in the meeting minutes. We reviewed the management of recent complaints and noted they had been dealt with in a timely and professional way.

Are services well-led?

Our findings

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

Leadership capacity and capability

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

There was strong leadership and emphasis on continually striving to improve. The principal orthodontists had overall responsibility for the service, but they were well supported by a practice manager who oversaw the day to day management.

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

We saw the practice had effective processes to support and develop staff with additional roles and responsibilities. There were staff lead roles for areas such as safeguarding, infection control, and Legionella management. The provider paid for staff to subscribe to an accredited on-line dental training provider, in addition to paying for other courses to develop their careers.

Culture

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

Staff stated they felt respected and valued, citing good communication, teamwork and support with professional development as the reasons.

Staff discussed their training needs during annual development reviews, which they reported as being useful.

Governance and management

The practice 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.

Communication systems in the practice were good with regular staff meetings, and a social media group to ensure key information was shared.

The practice subscribed to an on-line governance tool to support them in the management of the service.

Appropriate and accurate information

The practice had information governance arrangements and staff were aware of the importance of these in protecting patients' personal information. Patients' paper notes were held in locked filing cabinets.

Engagement with patients, the public, staff and external partners

Staff gathered feedback from patients using specific surveys and a suggestion box in the waiting room. We viewed survey results from 20 patients in January 2023 and noted that 97% of respondents rated the practice highly. Patient requests for magazines to be provided in the waiting room had been implemented.

The practice gathered feedback from staff through meetings, surveys, and informal discussions. Staff were encouraged to offer suggestions for improvements to the service and said these were listened to and acted on. Staff suggestions for personal lockers had been provided.

Continuous improvement and innovation

Are services well-led?

The practice had systems and processes for learning, continuous improvement and innovation. The practice manager had good oversight of all staff training and ensured it was kept up to date.

Staff working at the practice were supported to maintain their continuous professional development as required by the General Dental Council. Staff told us the support they received from the provider in relation to their training and career development was excellent. All the orthodontic therapists currently working at the practice, had begun as trainee dental nurses there.

The practice had quality assurance processes to encourage learning and continuous improvement. These included audits of dental care records, radiographs, hand hygiene and infection prevention and control. Many of these audits were undertaken more frequently than required. Staff kept records of the results of these audits and the resulting action plans and improvements.