

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

Hesketh Lane Dental Practice

133 Hesketh Lane, Tarleton, Preston, PR4 6AS

Tel: 01772813881

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We inspected the following standards as part of a routine inspection. This is what we found:

Respecting and involving people who use services	✓ Met this standard
Care and welfare of people who use services	✓ Met this standard
Safeguarding people who use services from abuse	✓ Met this standard
Cleanliness and infection control	✓ Met this standard
Supporting workers	✓ Met this standard
Assessing and monitoring the quality of service provision	✓ Met this standard

Details about this location

Registered Provider	Mr Peter Equizi
Overview of the service	<p>Hesketh Lane Dental Practice is a large practice providing general dental services to both private and NHS patients.</p> <p>A number of dentists are employed along with several dental nurses, (some with senior responsibilities), a dental hygienist, several receptionists and a practice manager.</p> <p>The practice is accessible with ground floor facilities available for people who have limited mobility. Patients can arrange to see any dentist in a ground floor surgery should they require this.</p>
Type of service	Dental service
Regulated activities	Diagnostic and screening procedures Surgical procedures Treatment of disease, disorder or injury

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When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

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Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an announced inspection.

How we carried out this inspection

We reviewed all the information we have gathered about Hesketh Lane Dental Practice, looked at the personal care or treatment records of people who use the service, carried out a visit on 12 November 2012 and checked how people were cared for at each stage of their treatment and care. We talked with people who use the service and talked with staff.

What people told us and what we found

During our visit we spoke with two patients who both had several years experience of using the service. Both patients were extremely complimentary about the service provided and expressed satisfaction with the care they received there. People spoke highly of the dentists and staff, describing them as very helpful, caring and professional.

One patient explained that some of her needs had changed over the years and she felt that the dentist had ensured that her treatment and care reflected this. She told us, "I feel very confident in his care, I wouldn't even consider going anywhere else."

During this inspection we looked at a number of areas including how the provider promoted the care and welfare of people using the service and safeguarded their health and wellbeing. We found evidence that the service was compliant in all the areas we assessed.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Respecting and involving people who use services ✓ Met this standard

People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

Our judgement

The provider was meeting this standard.

People's views and experiences were taken into account in the way the service was provided.

Reasons for our judgement

Information about the service provided and fees payable, as well as other useful guidance, was provided by way of written leaflets. In discussion, we were able to confirm that the information could be produced in a variety of formats, including large print, to help ensure that more people had access to it.

The manager was able to provide evidence that efforts were made to gather patients' views about the service provided.

We saw that there had been a recent survey carried out during which patients had been asked about their opinions of the treatment they had received and the way it had been provided. We also noted that their comments had been carefully analysed to assist in the development of the service.

There had been a good response rate to the survey with over 94 people providing their feedback. Responses demonstrated that there was high rate of satisfaction, and the majority of people said they were pleased with the treatment they had received and the information provided.

The manager was able to give us some examples of changes that had been made as a result of patient feedback. These included improvements to facilities within patients' toilets.

The practice had an Equality and Diversity policy in place to help ensure that patients' rights were promoted. Staff that we spoke with demonstrated a good understanding of the policy and were able to give us a number of examples of how they ensured patients with additional needs were accommodated. One staff member commented, "We will do anything within our power to meet people's needs, wherever possible."

We noted that the practice was accessible with ground floor facilities available for all patients who needed them. We also noted that work had been carried out to widen doorways so that people who used wheelchairs could access the practice.

People should get safe and appropriate care that meets their needs and supports their rights

Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

Reasons for our judgement

We were able to confirm that an extensive medical history was gathered for all new patients so that the dentist was aware of any relevant conditions or additional risks relating to their care. We also noted that the practice had procedures in place to ensure that any changes to a patient's medical condition or prescribed medication, were identified.

Records viewed showed that patients' care and treatment was planned in line with their individual needs. We saw an example of one patient who had been provided with additional dietary and oral hygiene advice to help assist her in maintain her dental health independently.

Staff that we spoke with demonstrated a good understand of individual patient's needs. One staff member explained that the practice had a system in place so that patients' additional needs would flag up on their computer system as a prompt.

Records viewed demonstrated that patients had been given a good level of information about their treatment options as well as opportunity to discuss them. One dental nurse commented, "We always take time to ensure people understand their options so they can make an informed decision. We also make sure they can change their minds at any time, right up until they have their treatment."

We were able to confirm that there were robust procedures in place to deal with medical emergencies such as a patient becoming seriously unwell. Records showed that all staff, including reception staff, received annual training in basic life support and all those spoken with were able to respond confidently about the processes they would follow in the event of a medical emergency and the location of the emergency equipment and medication.

People should be protected from abuse and staff should respect their human rights

Our judgement

The provider was meeting this standard.

The manager had taken reasonable steps to prevent the possibility of abuse from happening, which helped protect the safety and wellbeing of people using the service.

Reasons for our judgement

There were safeguarding policies and procedures in place in relation to the protection of children and vulnerable adults. The procedures were posted in a number of areas around the practice and included a step by step guide of the action staff must take in the event that an incident of abuse was alleged or suspected.

Records showed that all staff, including reception staff, received training in the area of safeguarding. All staff spoken with demonstrated a good understanding of their responsibilities in this area as well as the roles of other agencies, such as social services.

Staff were aware of the provider's whistle blowing procedures and told us they felt confident that any reports of poor practice would be dealt with appropriately by the manager and provider.

Staff that we spoke with had a good understanding of issues relating to capacity and were able to give examples of how they would ensure that the rights of a patient who did not have capacity to consent to treatment, would be upheld.

People should be cared for in a clean environment and protected from the risk of infection

Our judgement

The provider was meeting this standard.

People were protected from the risk of infection because appropriate guidance had been followed and treatment was provided in clean and hygienic environment

Reasons for our judgement

During the inspection we found that the provider had excellent procedures in place to ensure that people using the service were protected against the risks of cross infection.

The practice had a detailed infection control policy and procedures in place which provided clear guidance for staff on safe practice. We saw that the service was working in accordance with best practice standards issued by the Department of Health. It was pleasing to note that the provider had been involved in sharing good practice with other dental providers.

Regular training and detailed guidance and protocols resulted in staff having a clear understanding of the procedures to follow when cleaning clinical areas and equipment used during patients' treatment.

We also saw that there were robust audit systems in place for infection control to ensure that all staff followed the processes and that any issues were quickly identified and addressed.

In discussion, staff spoke very positively about the processes for infection control. One dental nurse said "The systems here are by far the best I have come across. It doesn't only protect patients but us as well." Another said, "We've all been involved in developing the systems and it makes us feel really proud. I feel proud showing patients into the surgery."

People were protected from the risk of infection because appropriate guidance had been followed and treatment was provided in clean and hygienic environment.

Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Our judgement

The provider was meeting this standard.

People received their care from well trained, well supported staff.

Reasons for our judgement

We saw that the provider had a detailed induction programme in place to help ensure that all new staff were well supported to be confident in their roles. We spoke with one staff member who was extremely complimentary about the induction she had received. She commented that all the staff and manager had been extremely supportive and that she had been assigned a mentor to provide support and guidance.

Records showed that there was an extensive core training programme in place for all staff which included areas such as safeguarding children and vulnerable adults, infection control, and medical emergencies. We also noted that the training was closely monitored to ensure that any staff requiring refresher or update training were provided with this in a timely fashion.

Staff spoken with expressed satisfaction with the training provided and felt they were supported by the provider and manager to continually develop their skills. One staff member said, "The training here is brilliant, better than any other place I've worked."

We were advised that the arrangements for providing staff with regular appraisals were currently in the process of being updated and improved. All staff that we spoke with told us they found their managers extremely supportive and always available if needed. One person told us about very good personal support she had received from the practice manager in relation to a personal situation.

Other comments from staff included;

"This is a brilliant team and we all support each other."

"I would have no hesitation in raising any concerns. They are very approachable."

Assessing and monitoring the quality of service provision

✓ Met this standard

The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

Our judgement

The provider was meeting this standard.

The provider had an effective system to regularly assess and monitor the quality of the service that people received.

Reasons for our judgement

Responses for a recent satisfaction survey carried out by the practice demonstrated that there was a high rate of patient satisfaction in relation to the standards of care and treatment provided.

We saw that there were a number of processes in place to assist the manager in monitoring quality which included audits in a number of areas such as infection control, equipment and health and safety. In addition, it was apparent that the manager was very keen to ensure that views of people using the service were obtained.

The practice manager had a clear understanding of the Health and Social Care Act and the associated regulations and standards in place for all dental providers. In addition, she was able to demonstrate that the service's policies and procedures were constantly reviewed to ensure that they were in line with changes in national guidance or best practice developments.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of dentists and other services at least once every two years. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. This could be a minor, moderate or major impact.

Minor impact – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

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