

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

King's Greenford Dental Practice

28 Ruislip Road, Greenford, UB6 9QN

Tel: 02085781471

Date of Inspection: 04 February 2013

Date of Publication: February 2013

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

Staffing ✓ Met this standard

Complaints ✓ Met this standard

Details about this location

Registered Provider	Dr. James J King
Overview of the service	Kings Greenford Dental Practice provides general dental services to NHS and private patients.
Type of service	Dental service
Regulated activities	Diagnostic and screening procedures Surgical procedures Treatment of disease, disorder or injury

Contents

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'.

	Page
Summary of this inspection:	
Why we carried out this inspection	4
How we carried out this inspection	4
What people told us and what we found	4
More information about the provider	4
Our judgements for each standard inspected:	
Respecting and involving people who use services	5
Care and welfare of people who use services	6
Safeguarding people who use services from abuse	7
Cleanliness and infection control	8
Staffing	9
Complaints	10
About CQC Inspections	11
How we define our judgements	12
Glossary of terms we use in this report	14
Contact us	16

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 looked at the personal care or treatment records of people who use the service, carried out a visit on 4 February 2013, talked with people who use the service and talked with staff.

What people told us and what we found

We spoke with 6 patients and 6 staff working in the surgery. Patients told us they were happy with the practice and the services provided. They told us treatment options, the cost of treatment and any risks were always explained to them. Their comments included "he's a very good dentist. The best thing is he explains everything" and "the dentist was very good. He was very calm, took his time and that really helped."

People also told us they were treated with dignity and respect by staff. They said the practice was kept clean and tidy and staff always respected their privacy.

We saw that there were enough qualified staff who treated people in a helpful, friendly and professional way. There were effective systems in place for infection control and responding to complaints.

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 privacy, dignity and independence were respected.

Reasons for our judgement

People using the service understood the care and treatment choices available to them. When we visited we saw that patients were treated with respect by all of the staff working in the practice.

Patients told us they were happy with their treatment. They said they were given clear information and advice about the available treatment options, possible risks and treatment costs. Their comments included "the dentist is excellent, he always takes the time to explain what he's going to do" and "he's a very good dentist. The best thing is he explains everything." This meant that patients had the information they needed to make informed decisions about their treatment. Patients also told us they were given a copy of their treatment plan for information.

We saw that information about the range of treatments provided and costs was available in leaflets given to patients. We saw the practice also had a number of leaflets and booklets in the waiting rooms to provide information about common dental conditions and specialist treatments.

Patients' privacy and dignity were respected. The practice had three treatment rooms, two of which were in use during the inspection. We saw that treatment room doors were closed at all times during consultations so patients could discuss their treatment, and receive this in private. Patients told us they felt treated with respect and staff were always welcoming. One patient said "the reception staff are very good, friendly and efficient." We saw that reception staff were polite and friendly with people when they arrived for their appointment.

Patients said the surgery was comfortable, with a relaxed and friendly atmosphere. One person said "the dentist was very good. He was very calm, took his time and that really helped."

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

People's needs were assessed treatment was planned and delivered in line with their individual care plan. Patients told us they had enough time and information to make informed decisions about their treatment. The treatment plans we saw included information about the diagnosis and proposed treatment and people signed to say they agreed to this. Where people needed complex or specialist treatment, plans were more detailed and included referrals to appropriate specialists.

Patients said they never had problems making appointments and they received a reminder before each appointment. One person said "it's never a problem getting appointments, you might have to wait to see a particular dentist but that's not a problem. They will always see you if you're in pain."

The principal dentist and other staff described the patient experience from the first point of contact. They told us treatment options and any possible risks were discussed with the patient as part of their initial consultation, using x-rays, and the treatment plan. This meant patients were able to understand the care and treatment they received.

Patients told us they completed a medical history form prior to consultation or treatment and they said this was updated at each visit. We saw samples of updated medical histories and written consent by patients in the records we viewed.

Care and treatment was planned and delivered in a way that ensured people's safety and welfare. The principal dentist told us the practice had service and maintenance contracts with the manufacturers of dental chairs and equipment, cleaning and decontamination equipment, and the oxygen and emergency equipment. This meant that all equipment used in the practice was appropriately maintained.

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

Our judgement

The provider was meeting this standard.

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

Reasons for our judgement

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. We spoke with 6 patients and they all told us they felt safe using the service.

We saw the practice had policies and procedures for safeguarding adults and children. Contact details for the local authority's teams for safeguarding adults and children were available. We spoke with staff who were able to describe how they would respond if they had any concerns.

The principal dentist confirmed that all staff working in the practice had completed safeguarding training and there had been no safeguarding concerns involving patients.

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.

Reasons for our judgement

There were effective systems in place to reduce the risk and spread of infection.

Patients told us they were satisfied with the cleanliness and tidiness of the clinic. One person said "every time I've been here it's always so clean."

We saw all areas of the practice, including treatment and decontamination areas were clean and well maintained. Separate sinks were used for hand washing and used instruments. Clothing and equipment such as aprons, gloves and goggles were available to staff and dental chairs were kept clean and well maintained.

One of the practice nurses demonstrated the procedures for decontaminating instruments following each patient's treatment. They explained how re-usable instruments were checked under magnification for debris and residual matter after washing and before sterilisation. We saw that the decontamination room separated into dirty and clean areas. A range of equipment was available to reflect the size of the practice for the washing and sterilisation of dental instruments, including sterilisers and autoclaves.

There was a clear process followed to make sure clean instruments were not contaminated by dirty ones to minimise cross infection risks. Dental equipment used in the practice was serviced and checked by engineers regularly. Clinical waste was stored securely away from treatment areas and was collected regularly by a licensed contractor.

Staffing

✓ Met this standard

There should be enough members of staff to keep people safe and meet their health and welfare needs

Our judgement

The provider was meeting this standard.

There were enough qualified, skilled and experienced staff to meet people's needs.

Reasons for our judgement

There were enough qualified, skilled and experienced staff to meet patients' needs. Patients we spoke with said there were always enough staff to meet their needs. One person said "there's never a problem getting an appointment, even in an emergency." All 6 patients told us they would recommend the practice to relatives and friends.

We saw that there were enough staff working in the surgery to meet patients' needs. The practice had a full-time principal dentist, 2 part-time associate dentists, 1 full-time dental nurse, 2 part-time dental nurses, a trainee nurse, a part-time hygienist and a full-time receptionist. Arrangements were in place to provide cover for staff taking planned or short notice leave.

We saw that staff were appropriately qualified, were engaged in continuous professional development and had appropriate professional registrations. We saw that all staff working in the practice had a criminal records check. This meant that all staff working in the service were appropriately qualified and suitable to work with patients.

Complaints

✓ Met this standard

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

Reasons for our judgement

Patients' complaints were fully investigated and resolved, where possible, to their satisfaction. Patients told us they knew how to make a complaint and all said they felt any complaints would be dealt with by the manager. One patient told us "I've never complained but I'm sure they'd sort out any problems." Another patient said "no complaints ever, but I'm sure they'd deal with it if there was a need."

We saw that the practice had a policy and procedures for responding to complaints and information was displayed for patients in the waiting room.

We saw that complaints were well recorded and included details of actions taken by the practice in response. Complainants received a written response from the principal dentist within the timescales included in the procedure.

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.

Contact us

Phone: 03000 616161

Email: enquiries@ccq.org.uk

Write to us
at: Care Quality Commission
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

Website: www.cqc.org.uk

Copyright Copyright © (2011) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.
