

Announced Inspection Report: Independent Healthcare

Service: SmilePlus Dental Care, Edinburgh

Service Provider: SmilePlus Dental Care

5 February 2020

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1 A summary of our inspection

The focus of our inspections is to ensure each service is person-centred, safe and well led. Therefore, we only evaluate the service against three key quality indicators which apply across all services. However, depending on the scope and nature of the service, we may look at additional quality indicators.

About our inspection

We carried out an announced inspection to SmilePlus Dental Care on Wednesday 5 February 2020. We spoke with five staff during the inspection. We received feedback from 178 patients through an online survey we had asked the service to issue for us before the inspection. This was our first inspection to this service.

The inspection team was made up of two dental inspectors.

What we found and inspection grades awarded

For SmilePlus Dental Care, the following grades have been applied to three key quality indicators.

Key quality indicators inspected		
Domain 2 – Impact on people experiencing care, carers and families		
Quality indicator	Summary findings	Grade awarded
2.1 - People's experience of care and the involvement of carers and families	The large volume of patient feedback we received about this service was very positive. Feedback was collected by the service regularly, and used to make improvements, if required. However, a patient participation policy should be developed. Patients understood expected outcomes and potential risks of their treatment, and detailed treatment plans were agreed with them. A clear complaints policy was in place.	✓✓ Good
Domain 5 – Delivery of safe, effective, compassionate and person-centred care		
5.1 - Safe delivery of care	Patient care and treatment was delivered in a safe, clean, well maintained and well-equipped environment. All reusable dental	✓✓ Good

	instruments were decontaminated in the service's on-site decontamination room. The service met all criteria from the national dental combined practice checklist.	
Domain 9 – Quality improvement-focused leadership		
9.4 - Leadership of improvement and change	Leadership was visible, open, supportive and communicative. The practice manager and practice owner worked well together to lead and support the team. Staff met together regularly, and the service had established a good reputation in the community. A quality improvement plan should be developed to help demonstrate a culture of continuous improvement.	✓ Satisfactory

The following additional quality indicators were inspected against during this inspection.

Additional quality indicators inspected (ungraded)	
Domain 5 – Delivery of safe, effective, compassionate and person-centred care	
Quality indicator	Summary findings
5.2 - Assessment and management of people experiencing care	Comprehensive patient assessments were carried out. Patient care records provided information about all aspects of consultations, assessments and treatments. Patient feedback showed they were happy with their care experience.
Domain 7 – Workforce management and support	
7.1 - Staff recruitment, training and development	Adequate recruitment, training and development systems were in place. Staff were appropriately registered with the relevant professional registration bodies. An induction process was in place for new employees.

Grades may change after this inspection due to other regulatory activity. For example, if we have to take enforcement action to improve the service or if we investigate and agree with a complaint someone makes about the service.

More information about grading can be found on our website at:

http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/ihc_inspection_guidance/inspection_methodology.aspx

What action we expect SmilePlus Dental Care to take after our inspection

This inspection resulted in two recommendations (see Appendix 1).

An improvement action plan has been developed by the provider and is available on the Healthcare Improvement Scotland website:

www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx

We would like to thank all staff at SmilePlus Dental Care for their assistance during the inspection.

2 What we found during our inspection

Outcomes and impact

This section is where we report on how well the service meets people's needs.

Domain 2 – Impact on people experiencing care, carers and families

High performing healthcare organisations deliver services that meet the needs and expectations of the people who use them.

Our findings

Quality indicator 2.1 - People's experience of care and the involvement of carers and families

The large volume of patient feedback we received about this service was very positive. Feedback was collected by the service regularly, and used to make improvements, if required. However, a patient participation policy should be developed. Patients understood expected outcomes and potential risks of their treatment, and detailed treatment plans were agreed with them. A clear complaints policy was in place.

Staff discussed treatment options and risks with patients before agreeing a treatment plan with them. Written treatment plans were provided to patients. Information on risks and treatment costs were provided to patients before gaining consent and starting treatment.

Feedback from patients was gained verbally and by using an anonymous feedback survey. Survey forms were available in the waiting area for patients to complete at any time during their course of treatment. Completed survey forms we saw were very positive. Patients could also leave feedback on the service's social media pages. Feedback was recorded and regularly analysed by the practice manager, shared with the practice team and discussed at staff meetings.

Patients told us that staff were professional, friendly and efficient, and they felt they were respected and treated with dignity. They felt the service provided good explanations of treatments and options available, and that they had the opportunity to ask questions. Comments included:

- '[...] is the best dentist I've had and... explained everything so empathetically and honest.'

- ‘The finest dental practice we have ever belonged to. Consistency of care and knowledgeable, friendly, professional care outstanding.’
- ‘Have been consistently satisfied with the excellent service I have received from every member of staff within the surgery.’

The service’s complaints policy encouraged early communication if any queries or concerns were raised. A clear, written complaints procedure was available in the waiting area. The practice manager was also the receptionist for the service, so they were easily available and visible for staff and patients at all times. All staff we spoke with knew the process for dealing with a complaint. No complaints had been received by Healthcare Improvement Scotland or the service since it was registered in January 2018.

What needs to improve

We saw a considerable amount of work took place in the service to collect patient feedback. However, a more structured approach to this would help to continually improve how the service was delivered (recommendation a).

- No requirements.

Recommendation a

- The service should develop and implement a participation policy to direct the way it engages with its patients and uses their feedback to drive improvement.

Service delivery

This section is where we report on how safe the service is.

Domain 5 – Delivery of safe, effective, compassionate and person-centred care

High performing healthcare organisations are focused on safety and learning to take forward improvements, and put in place appropriate controls to manage risks. They provide care that is respectful and responsive to people's individual needs, preferences and values delivered through appropriate clinical and operational planning, processes and procedures.

Our findings

Quality indicator 5.1 - Safe delivery of care

Patient care and treatment was delivered in a safe, clean, well maintained and well-equipped environment. All reusable dental instruments were decontaminated in the service's on-site decontamination room. The service met all criteria from the national dental combined practice checklist.

NHS dental services are inspected using the national Combined Practice Inspection document to ensure the safe delivery of care. The checklist has a number of essential and best practice criteria for dental practices including:

- premises, facilities and equipment
- documentation and certification, and
- processes, including decontamination and sterilisation of equipment.

We carried out the same combined practice inspection checklist during this inspection. All essential and best practice criteria on this inspection were met.

The fabric and finish of the clinic was to a good standard. At the time of our inspection, all areas were clean, tidy and well organised. The service's three dental surgeries were of a good size, and were well designed and fully equipped for the procedures offered.

The service's onsite decontamination room was well equipped with a washer disinfectant and autoclaves used to clean and sterilise equipment. Service contracts were in place for this equipment. Nursing staff had been trained to carry out the decontamination (cleaning) and sterilisation of all reusable patient equipment. Instruments could be safely and easily transported from dental surgeries to the decontamination room. Nursing staff had a full understanding

of the service's decontamination process and were able to show us how they safely processed instruments as part of our inspection process.

Infection prevention and control policies and procedures were in line with national best practice. Where appropriate, single-use patient equipment was used to prevent the risk of cross-infection. Contracts were in place to ensure all clinical waste was disposed of safely.

The surgeries used by the dentists had x-ray machines installed. A specific x-ray machine for taking larger dental images was available in a separate room. All machines had regular safety assessments and a radiation protection file was in place, in line with national legislation, standards and best practice guidance. All digital radiographic (x-ray) images were stored securely in the electronic patient care records. The service had audited all X-ray images for quality of image. Arrangements were in place for patients who needed specialist 3D x-ray images to attend a local clinic where images were recorded and reported appropriately.

Staff carried out annual training in the management of medical emergencies. The service had all the necessary emergency drugs and equipment, including a defibrillator and oxygen.

Good systems and processes were in place to ensure the care environment and equipment were safe. We saw maintenance contracts for fire safety and appropriate electrical safety checks were carried out. Health and safety and radiation safety risk assessments had been completed.

Patients commented that the environment was always clean and comfortable and that treatment rooms were modern and fully equipped.

- No requirements.
- No recommendations.

Our findings

Quality indicator 5.2 - Assessment and management of people experiencing care

Comprehensive patient assessments were carried out. Patient care records provided information about all aspects of consultations, assessments and treatments. Patient feedback showed they were happy with their care experience.

We reviewed six electronic patient care records stored on the practice management software system. These were adequate, detailing assessment and

clinical examinations, treatment and aftercare information. Patient care records included a range of digital photographs and x-ray images. We found these to be of good quality.

Written treatment plans along with estimates for treatment costs were provided to patients. The practice management software system included scanned copies of all patient and dentist correspondence. These records included signed written consent documents where appropriate.

Comments from patients included:

- 'Consultation appointments were followed up by written details of treatment plan which was then discussed with dentist. At each stage I was asked if I had any questions and during treatment dentist keeps me informed.'
- 'Clear detailed explanation always given regarding any treatment needed. Any questions always answered fully and clearly.'
- 'All treatment programs are discussed and explained in detail before proceeding, also there is leaflet information on many services provided.'
- 'I am always told the options of treatments available and never feel pushed into something I'm not happy about.'
- 'Always my decision. Options provided with different quotes. Explained to me in detail so I could make an informed decision. Always able to ask questions.'

The service is a member of the Lothian Independent Practitioners Scheme and participates in the out-of-hours emergency dental service. This group of local private dental practices share evening and weekend out-of-hours cover. An out-of-hours telephone number is left on the service's answer phone should patients require emergency dental advice when the service is closed. Patients can then call for dental advice and, if required, they will be seen in another dental practice in the Lothian area.

Confidentiality protocols and data back-up systems were in place to manage patient information securely.

- No requirements.
- No recommendations.

Domain 7 – Workforce management and support

High performing healthcare organisations have a proactive approach to workforce planning and management, and value their people supporting them to deliver safe and high quality care.

Our findings

Quality indicator 7.1 - Staff recruitment, training and development

Adequate recruitment, training and development systems were in place. Staff were appropriately registered with the relevant professional registration bodies. An induction process was in place for new employees.

The service checked professional registration status before staff started their role. An induction programme was in place for new employees.

The service carried out performance reviews with staff every 3–6 months. Staff personal development plans were in place. The practice funded online continuing training and education for all registered clinical staff. This gave staff access to good training opportunities at a time suitable to them and supported their compliance requirements with the General Dental Council. The service also encouraged further training in line with personal development plans. We were told one dental nurse was currently being funded and supported through the dental nurse radiology course. The practice owner was currently undergoing a Masters in non-surgical facial aesthetics.

From speaking with staff, it was clear they understood, and had been suitably trained for, their individual roles. They were also clear on their responsibilities and those of other team members. They knew who to contact if information was required or if an issue needed resolved.

- No requirements.
- No recommendations.

Vision and leadership

This section is where we report on how well the service is led.

Domain 9 – Quality improvement-focused leadership

High performing healthcare organisations are focused on quality improvement. The leaders and managers in the organisation drive the delivery of high quality, safe, person-centred care by supporting and promoting an open and fair culture of continuous learning and improvement.

Our findings

Quality indicator 9.4 - Leadership of improvement and change

Leadership was visible, open, supportive and communicative. The practice manager and practice owner worked well together to lead and support the team. Staff met together regularly, and the service had established a good reputation in the community. A quality improvement plan should be developed to help demonstrate a culture of continuous improvement.

Staff we spoke with described a positive team culture. They told us the practice owner and practice manager were visible and approachable, and the service was a very good place to work. A whole team approach meant that all staff felt supported and assisted in their roles. Patients also commented about the team working well together:

- 'It was clear that all members of the team communicate well with each other and their clients.'
- 'Team work - from receptionist, hygienist to dentist - they all operate as part of a cohesive team.'
- 'Highly professional team, experienced at what they do but know when to refer to a specialist too.'
- 'The whole team, working well together makes being a patient there very easy.'

The dental nurses met every month and full practice meetings were carried out every 8–10 weeks. Minutes and any action points were documented and discussed.

Feedback provided by patients and other team members was discussed at team meetings and changes made to how services were delivered, if appropriate.

What needs to improve

Although improvements had been made to how the service was delivered, the service acknowledged these were often not done in a structured way to allow it to record service improvement processes and outcomes. A quality improvement plan would enable the service to measure the impact of change and demonstrate a culture of continuous improvement (recommendation b).

- No requirements.

Recommendation b

- The service should develop and implement a quality improvement plan.

Appendix 1 – Requirements and recommendations

The actions that Healthcare Improvement Scotland expects the independent healthcare service to take are called requirements and recommendations.

- **Requirement:** A requirement is a statement which sets out what is required of an independent healthcare provider to comply with the National Health Services (Scotland) Act 1978, regulations or a condition of registration. Where there are breaches of the Act, regulations, or conditions, a requirement must be made. Requirements are enforceable at the discretion of Healthcare Improvement Scotland.
- **Recommendation:** A recommendation is a statement that sets out actions the service should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.

Domain 2 – Impact on people experiencing care, carers and families

Requirements

None

Recommendation

- a** The service should develop and implement a participation policy to direct the way it engages with its patients and uses their feedback to drive improvement (see page 8).

Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.8

Domain 9 – Quality improvement-focused leadership

Requirements

None

Recommendation

- b** The service should develop and implement a quality improvement plan (see page 14).

Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19

Appendix 2 – About our inspections

Our quality of care approach and the quality framework allows us to provide external assurance of the quality of healthcare provided in Scotland.

Our inspectors use this approach to check independent healthcare services regularly to make sure that they are complying with necessary standards and regulations. Inspections may be announced or unannounced.

We follow a number of stages to inspect independent healthcare services.

Before inspections

Independent healthcare services submit an annual return and self-evaluation to us.

We review this information and produce a service risk assessment to determine the risk level of the service. This helps us to decide the focus and frequency of inspection.



Before

During inspections

We use inspection tools to help us assess the service.

Inspections will be a mix of physical inspection and discussions with staff, people experiencing care and, where appropriate, carers and families.

We give feedback to the service at the end of the inspection.



During

After inspections

We publish reports for services and people experiencing care, carers and families based on what we find during inspections. Independent healthcare services use our reports to make improvements and find out what other services are doing well. Our reports are available on our website at: www.healthcareimprovementscotland.org

We require independent healthcare services to develop and then update an improvement action plan to address the requirements and recommendations we make.

We check progress against the improvement action plan.



After

More information about our approach can be found on our website:

www.healthcareimprovementscotland.org/our_work/governance_and_assurance/quality_of_care_approach.aspx

Complaints

If you would like to raise a concern or complaint about an independent healthcare service, you can complain directly to us at any time. However, we do suggest you contact the service directly in the first instance.

Our contact details are:

Healthcare Improvement Scotland

Gyle Square
1 South Gyle Crescent
Edinburgh
EH12 9EB

Telephone: 0131 623 4300

Email: hcis.ihtregulation@nhs.net

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