

# Wandsworth Town Dental Practice Limited

# Wandsworth Town Dental Practice

## Inspection Report

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### Overall summary

We undertook a follow up focused inspection of Wandsworth Town Dental Practice on 25 February 2019. This inspection was carried out to review in detail the actions taken by the registered provider to improve the quality of care and to confirm that the practice was now meeting legal requirements.

The inspection was led by a Care Quality Commission (CQC) inspector who was supported by a specialist dental adviser.

At the previous comprehensive inspection that took place on the 30 July 2018 and 8 August 2018 we found the registered provider was providing effective, caring and responsive care in accordance with relevant regulations. We judged the practice was not providing safe and well-led care in accordance with the relevant regulations of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. You can read our report of that inspection by selecting the 'all reports' link for Wandsworth Town Dental Practice on our website [www.cqc.org.uk](http://www.cqc.org.uk).

As part of this inspection we asked:

- Is it safe?
- Is it well-led?

#### **Our findings were:**

#### **Are services safe?**

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

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 30 July 2018 and 8 August 2018.

#### **Are services well-led?**

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

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 30 July 2018 and 8 August 2018.

#### **Background**

Wandsworth Town Dental Practice is in the London Borough of Wandsworth and provides NHS and private treatment.

There is level access for people who use wheelchairs and those with pushchairs.

The dental team includes seven dentists, seven dental nurses and two trainee dental nurses. The dental nurses also provided reception duties. The practice has four treatment rooms.

# 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 Wandsworth Town Dental Practice was the principal dentist.

The practice is open:

Monday-Friday 9am – 5.30pm

Saturday 9am–4pm

Sunday 11am–3pm

Our key findings were:

- The practice had undertaken essential recruitment checks for staff. This included Hepatitis B vaccination and Disclosure and Barring services checks.
- The practice had safeguarding policies and staff had received safeguarding training.
- The practice had systems and processes to ensure good governance in accordance with the fundamental standards of care, including risk assessments and quality assurance processes.
- The provider had ensured equipment for use in medical emergencies was available in sufficient quantities.
- Staff had awareness of their responsibilities under the Duty of candour to ensure compliance with The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At the previous inspection we had found that this practice was providing effective care in accordance with the relevant regulations but told them there were things they should do. We found that the provider needed some further improvements to address the issues we said they should look at.

We had told them that they should review staff's knowledge of the Mental Capacity Act. They told us during this follow up inspection on the 25 February 2019 that they would arrange for the issue to be discussed at an up and coming team meeting.

At the previous inspection we had found that this practice was providing responsive care in accordance with the relevant regulations but told them there were things they should do. We found that the provider needed some further improvements to address the issues we said they should look at. We had told them that they should undertake a Disabilities Access Audit. They told us during this follow up inspection on the 25 February 2019 that they would arrange for one to be carried out.

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

Review its responsibilities to respond to the needs of patients with disability and the requirements of the Equality Act 2010 and ensure a Disability Discrimination Act audit is undertaken for the premises.

- Review staff awareness of the requirements of the Mental Capacity Act (MCA) 2005 and ensure all staff are aware of their responsibilities under the Act as it relates to their role.

# Summary of findings

## The five questions we ask about services and what we found

We asked the following question(s).

### **Are services safe?**

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

The provider had made improvements to their recruitment process.

The provider had made improvements to their medical emergencies kit.

**No action**



### **Are services well-led?**

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

The provider had made improvements to address shortfalls and the regulatory breach we identified during the previous inspections. They had made improvements relating to, risk assessments and quality assurance audits.

**No action**



# Are services safe?

## Our findings

### **Safety systems and processes (including staff recruitment, Equipment & premises and Radiography (X-rays))**

At the previous inspection on 30 July 2018 and 8 August 2018 we found the practice was not providing safe care.

During this follow-up inspection on 25 February 2019 we found they were providing safe care. We found that the provider had addressed some of the shortfalls including:

- They had obtained criminal background checks for staff. This included Hepatitis B, Disclosure and Barring services checks in five of the seven staff records we checked. There was confirmation that the provider applied for checks for the other two staff.
- Staff had received safeguarding training.
- The practice was following national guidance for cleaning, sterilising and storing dental instruments and the disposal of clinical waste.
- The practice had made arrangements for dealing with medical and other emergencies and had purchased additional medicines that were missing at the last inspection. For example, the kit now contained buccal Midazolam that was missing from the kit at the last inspection. There were some missing equipment from the kit but the practice manager had ordered that equipment before the follow up inspection had ended.

# Are services well-led?

## Our findings

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