

Upper Denby D C Limited

Upper Denby Dental Care

Inspection report

1 Gunthwaite Lane
Upper Denby
Huddersfield
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Date of inspection visit: 11 November 2021
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Overall summary

We undertook an announced focused inspection of Upper Denby Dental Care on 11 November 2021. 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 CQC inspector who was advised by a specialist dental adviser.

We undertook a comprehensive inspection of Upper Denby Dental Care on 18 August 2021 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. We found the registered provider was not providing well led care and was in breach of Regulation 17 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 Upper Denby Dental Care on our website www.cqc.org.uk.

As part of this inspection we asked:

- Is it well-led?

When one or more of the five questions are not met, we require the service to make improvements and send us an action plan. We then inspect again after a reasonable interval, focusing on the areas where improvement was required.

Our findings were:

Are services well-led?

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 18 August 2021.

Background

Summary of findings

Upper Denby Dental Care is on the outskirts of Huddersfield and provides private dental care treatment for adults and children.

There is disabled access at this location with treatment rooms based on the ground floor. Car parking spaces are available at the practice car park.

The dental team includes two dentists, one dental hygienist, a practice manager and dental nurse/receptionists. The practice has two treatment rooms.

The practice is owned by a company and as a condition of registration must have a person registered with the CQC 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 Upper Denby Dental Care is the principal dentist.

During the inspection we spoke with the principal dentists and the practice manager. We looked at some staff records, risk assessments and other records about how the service is managed.

The practice is open:

Monday to Friday 8:30am-5pm.

Our key findings were:

- The provider's recruitment of staff followed the organisations own recruitment procedure and reflected current guidelines.
- Improvement had been made to the oversight of staff training and staff had completed sepsis awareness training.
- Improvements had been made to the electrical safety in the building with a fixed wiring examination and some additional safety measures being put in place.
- A legionella risk assessment was in place and records showed the monitoring of water temperatures. Key staff had booked training in legionella awareness and management.
- Patients dental care records were now regularly audited to ensure all detail required by General Dental Council standards were included.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services well-led?

No action



Are services well-led?

Our findings

We found that this practice was providing well led care and was complying with the relevant regulations.

At our previous inspection on 18 August 2021 we judged the practice was not providing well led care and was not complying with the relevant regulations. We told the provider to take action as described in our requirement notice.

At this follow up visit on 11 November 2021 we reviewed the evidence to confirm the practice had made the following improvements to comply.

- Improvements had been made to the recruitment procedures. We reviewed the recruitment records of two members of staff and saw evidence of all documentation as required under schedule 3 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
- Improvements had been made to the oversight of staff training to ensure that essential training was not missed. All staff have now completed sepsis awareness training.
- Improvements had been made to the electrical safety in the building. A fixed wiring examination had been completed following our inspection identifying remedial work which was underway. This included additional safety measures to ensure electrical safety within the practice.
- Improvements had been made to the management of the risks associated with Legionella. At the previous inspection we noted logs of water temperatures were not accurate. A new legionella risk assessment was now in place and a water temperature logs were completed. Key staff have been booked on to legionella training, with an independent company providing additional oversight of legionella at the practice.

These improvements showed the provider had taken action to comply with the regulations when we inspected on 18 August 2021.