

Danny the Dentist Limited

# Danny The Dentist

## Inspection Report

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### Overall summary

We undertook a focused inspection of Danny the Dentist on 29 January 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 CQC inspector who was supported by a specialist dental adviser.

We undertook a comprehensive inspection of Danny the Dentist on 3 July 2018 and on the 24 July 2018 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 Danny the Dentist dental practice on our website [www.cqc.org.uk](http://www.cqc.org.uk).

As part of this inspection we asked:

- Is it well-led?

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

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

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

#### **Are services effective?**

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

#### **Are services caring?**

We found this practice was providing caring services in accordance with the relevant regulations.

#### **Are services responsive?**

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

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

#### **Background**

Danny the Dentist is in Weybridge and provides private treatment for adults and children.

There is level no access for people who use wheelchairs and those with pushchairs. Car parking spaces, including for blue badge holders, are available near the practice.

The dental team includes 1 dentist, 2 trainee dental nurses/receptionists and 1 hygiene therapist. The practice has 1 treatment room.

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.

# Summary of findings

The registered manager at Danny the Dentists is the principal dentist. A registered manager is legally responsible for the delivery of services for which the practice is registered.

During the inspection we spoke with 1 dentist and 2 trainee dental nurses/ receptionists. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday 09.00 to 18.00

Tuesday 09.00 to 19.00

Wednesday to Friday 09.00 to 17.00

Some Saturdays 09.00 to 14.00

# Summary of findings

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

We always ask the following five questions of services.

### **Are services safe?**

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

**No action** ✓

### **Are services effective?**

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

**No action** ✓

### **Are services caring?**

We found that this practice was providing caring services and was complying with the relevant regulations.

**No action** ✓

### **Are services responsive to people's needs?**

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

**No action** ✓

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

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

**No action** ✓

The provider had made improvements to the management of the service. This included providing additional staff time available for management and administration, establishing clear roles and responsibilities for all the practice team. The improvements provided a sound footing for the ongoing development of effective governance arrangements at the practice.

# Are services safe?

## Our findings

We found that this practice was providing caring services in

accordance with the relevant regulations.

# Are services effective?

(for example, treatment is effective)

## Our findings

We found that this practice was providing caring services in

accordance with the relevant regulations.

# Are services caring?

## Our findings

We found that this practice was providing caring services in

accordance with the relevant regulations.

# Are services responsive to people's needs? (for example, to feedback?)

## Our findings

We found that this practice was providing caring services in

accordance with the relevant regulations.



# Are services well-led?

## Our findings

At our previous inspection on 3 July 2018 and on the 24 July 2018, we judged the provider 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 the inspection on 29 January 2019 we found the practice had made the following improvements to comply with the regulation(s): The registered manager/registered person supplied the CQC with a written action plan and confirmation of actions taken post inspection on the 24 July 2018. The registered person confirmed they no longer offer sedation.

- The registered person has established an effective systems and processes to ensure good governance in accordance with the fundamental standards of care. The registered person confirmed that there is now a clear system to ensure that all parts of the governance process are now in place. This includes ensuring that all policies, protocols and procedures are accessible to all members of staff. At this inspection the dental practice is compliant with the regulations including the Resuscitation Council (UK) and the General Dental Council in providing an automated external defibrillator, (AED), in the practice to manage medical emergencies. There is now a system in place to unsure patients with suspected cancer were referred to the correct department and a monitoring system is in place to ensure they were seen within the NICE guidelines. There is now a system to ensure that risk assessment is being undertaken for infection control, within the correct time frame. Training in safeguarding and immediate first aid are now being undertaken at the required intervals and there is now a sharps policy and risk assessment undertaken annually. All requirements regarding X ray and laser procedures and protocols are being undertaken as required by the HSC are now being undertaken. The registered person confirmed there is a local Laser Protection Advisor now in place.
- The registered person now is ensuring sufficient numbers of suitably qualified, competent, skilled and experienced persons are deployed to meet the

fundamental standards of care and treatment. The registered person has now confirmed with the GDC the requirements for minimum staff chair side support for dental treatment.

- The registered person now has in place a recruitment procedure and is establishing a system to ensure only fit and proper persons are employed. On the day of the focused inspection one DBS was missing. This was addressed with 24 hours.

The practice had also made further improvements:

- The registered person confirmed the practice's risk management systems for monitoring and mitigating the various risks arising from the undertaking of the regulated activities is now in place.
- The registered person has now confirmed that the management system has been reviewed and alarms set up to ensure risk assessment and mandatory training are reviewed ensuring good governance and leadership are sustained in the longer term.
- The registered person has reviewed the practice's protocols for the use of rubber dam for root canal treatment taking into account guidelines issued by the British Endodontic Society.
- The registered person has reviewed staff training to ensure that all the staff have received training, to an appropriate level, in the safeguarding of children and vulnerable adults. Also the fire safety risk assessment has been reviewed to ensure that any actions required are complete and ongoing fire safety management is effective. They have also reviewed staff training to manage medical emergencies taking into account the guidelines issued by the Resuscitation Council (UK) and the General Dental Council.
- The registered person also reviewed the practice's responsibilities to take into account the needs of patients with disabilities and to comply with the requirements of the Equality Act 2010.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation(s): when we inspected on 29 January 2019.