

The Butts Dental Practice

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Inspection Report

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Overall summary

We undertook a focused inspection of The Butts Dental Practice on 21 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 CQC inspector who was supported by a specialist dental adviser.

We undertook a comprehensive inspection of The Butts Dental Practice on 19 October 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 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 The Butts Dental Practice on our website www.cqc.org.uk.

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 area where improvement was required.

As part of this inspection we asked:

- Is it well-led?

Our findings were:

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 breach we found at our inspection on 19 October 2018.

Background

The Butts Dental Practice is in Brentford in the London Borough of Hounslow and provides NHS and private treatment to adults and children. The Practice is a training practice and currently has one trainee dentist.

The practice is set out over four floors. There is level access for people who use wheelchairs and those with pushchairs via a lift to the lower basement entrance. The treatment rooms in the basement are accessible for people with restricted mobility and those with pushchairs.

The dental team includes seven dentists, seven dental nurses, two dental hygienists, two receptionists and a practice manager. The practice has eight treatment rooms.

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

Summary of findings

the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run. The registered manager at The Butts Dental Practice is one of the principal dentists

During the inspection we spoke with the two principal dentists, one dental nurse, and the practice manager. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Our key findings were:

- Improvements had been made with regards to obtaining and storing training details. More specifically safeguarding certificates were available for all staff records we reviewed.
- Improvements had been made with recruitment processes. All relevant documents were available on the staff record we reviewed (new member of staff who joined since our last inspection).

- Certificates and documentation relating to risk assessments, gas safety and fire safety were filed appropriately and could be obtained in a timely manner.
- The COSHH folder was up to date and accessible to staff
- Improvements had been made in relation to recording of sedation procedures. A sedation policy was in place and procedures were being recorded appropriately in dental care records.
- Audits were being undertaken and they were complete with areas for improvements identified and clear records of results.

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

- Review the practice's protocols for monitoring and recording the fridge temperature to ensure that medicines and dental care products are being stored in line with the manufacturer's guidance.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services well-led?

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

The provider had made improvements to the management of the service. This included fully implementing an electronic system to manage governance arrangements. The system was available to all members of staff and the practice manager could track when staff had actions to complete or update. The system proved effective in the management of staff records, risk assessments, policies and procedures and general governance arrangements.

No action



Are services well-led?

Our findings

At our previous inspection on 19 October 2018 we judged it was not providing well led care and told the provider to take action as described in our requirement notice. At the inspection on 21 February 2019 we found the practice had made the following improvements to comply with the regulation:

- Systems were now in place for maintaining complete sets of staff recruitment documents. The practice had implemented an electronic system where documents could be uploaded and stored electronically.
- Staff training details were maintained in an orderly manner and evidence of staff training was readily available. The practice had implemented an electronic system that tracked and monitored training staff had completed and highlighted when training was near expiry or expired.

- Policies and procedures had been updated. The practice had reviewed and updated their policies and procedures. This included implementing a sedation policy, updating the Child Protection and Mental Capacity policies.
- Procedures were now in place for the effective maintenance of key documents such as gas safety certificate, risk assessment and servicing documents.
- All equipment was being serviced in line with manufacturers recommendation
- Dental care records in relation to sedation procedures had improved. Complete, accurate records were being maintained.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with regulation 17 when we inspected on 21 February 2019.