

# Mr. Christopher Bee

# Dental Surgery

## Inspection Report

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### Overall summary

We carried out an announced inspection of this practice on 24 November 2015. Breaches of legal requirements were found. After the inspection, the practice wrote to us to say what they would do to meet legal requirements in relation to well led care and treatment.

We undertook this focused inspection to check they had followed their plan and to confirm they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Dental Surgery on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

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

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

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

#### **Background**

The Dental surgery is situated in the town of Whitby, North Yorkshire. The surgery provides a comprehensive range of dental services and offers National Health Service dental care or private treatment options, the services include preventative advice and routine restorative dental care.

The practice has two surgeries both situated on the ground floor, a decontamination room, a reception area, a waiting room and a staff room. There is one dentist and two dental nurses working at the practice.

The Practice is open:

Monday, Wednesday Thursday and Friday 09:00 – 17:00

Tuesday: 09:00 – 19:00.

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

- The practice had implemented a recruitment policy and procedures that are suitable. The recruitment arrangements are in line with Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 to ensure necessary employment checks are in place for all staff and the required specified information in respect of persons employed by the practice is now held.
- All audits have documented learning points and the resulting improvements can now be demonstrated.
- New policies and protocols had been implemented for the safeguarding of children and adequate training had been completed for the safeguarding lead.
- Staff meeting were now held and minuted.

# 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 well-led?**

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

Since the last inspection on 24 November 2015 the practice had effective systems and processes in place to ensure that all care and treatment was carried out safely. For example, the practice had implemented policies and procedures around the safeguarding of children and recruitment of staff.

The practice had completed various audits to monitor its performance and help improve the services offered. The audits included dental care records and X-rays. The X-ray audit findings were now within the guidelines of the National Radiological Protection Board (NRPB).

# Dental Surgery

## Detailed findings

### Background to this inspection

We undertook a desk based inspection of Dental Surgery 11 May 2016. This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our inspection on 25 November 2015 had

been made. We inspected the practice against one of the five questions we ask about services: is the service well led. This is because the service was not meeting some legal requirements.

The inspection was carried out by a CQC inspector.

During the inspection we spoke with the registered provider and supporting evidence was sent to the inspector to confirm our findings.

# Are services well-led?

## Our findings

### Governance arrangements

The practice had implemented governance arrangements such as policies and procedures for monitoring and improving the services provided for patients. For example there was a safeguarding children policy and a recruitment policy.

There was evidence that patient records had been audited in line with the guidance provided by the Faculty of General Dental Practice. The last audit was undertaken in April 2016 and an action plan and learning outcomes were in place to address the issues that arose.

### Learning and improvement

The registered provider provided evidence to support they had implemented an annual quality audits of the X-rays taken. We saw the process and information collated from the April 2016 audit was in accordance with the National Radiological Protection Board (NRPB). Action plans were now place to continuously improve the procedure and reduce future risks.

The practice had reviewed their policy and processes to deal with complaints. This was now practice specific and we were told it was now accessible to patients in the waiting room. This was in accordance with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.