

Mr. Geoffrey Humphries

# Manor Dental Practice

## Inspection report

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### Overall summary

We undertook a follow up focused inspection of Manor Dental Practice on 19 October 2022. 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 had access to a specialist dental adviser.

We undertook a comprehensive inspection of Manor Dental Practice on 5 July 2022 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 safe and well-led care and was in breach of regulations 15 and 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 Manor Dental Practice on our website [www.cqc.org.uk](http://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 areas where improvement was required.

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 5 July 2022.

# Summary of findings

## **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 5 July 2022.

## **Background**

Manor Dental Practice is in Sutton and provides NHS and private dental care and treatment for adults and children.

There is level access to the practice for people who use wheelchairs and those with pushchairs. Car parking spaces are available at the practice and in the surrounding roads, near the practice.

The dental team includes a principal dentist, 2 associate dentists, 6 dental nurses (who also provide reception cover), 1 dental hygienist and a practice manager. The practice has 2 treatment rooms.

During the inspection we spoke with the principal dentist and the practice manager. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday and Tuesday 9am to 6.30pm

Wednesday 9am to 5.30pm

Thursday and Friday 9am to 5pm

# Summary of findings

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

We asked the following question(s).

**Are services safe?**

**No action**



**Are services well-led?**

**No action**



# Are services safe?

## Our findings

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

At the inspection on 19 October 2022 we found the practice had made the following improvements to comply with the regulation:

- Systems were in place for assessing risks related to fire. The practice was carrying out and keeping logs of checks of fire equipment and visual checks of the premises.
- A fire risk assessment had been carried out by an external company in July 2022. The actions in the fire risk assessment had been completed by the practice.
- Appropriate fire signage was displayed throughout the practice. The practice was not cluttered, and all fire exits were clear.
- Gas safety checks had been carried out. A gas safety certificate had been obtained to confirm the safety of the gas installation at the premises.
- Checks had been carried out to the electrical system. An electrical installation condition certification had been obtained and confirmed that the electrical installation was satisfactory.

The provider had also made further improvements:

Systems were in place to monitor fridge temperatures to ensure the Glucagon (an emergency medicine used to treat severe low blood sugar) was stored at the correct temperature.

# Are services well-led?

## Our findings

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

At the inspection on 19 October 2022 we found the practice had made the following improvements to comply with the regulation:

- The service had implemented a system to ensure that all relevant staff had satisfactory disclosure and barring services (DBS) checks in place. We saw copies of DBS checks obtained since our last inspection.