

**We are the regulator:** Our job is to check whether hospitals, care homes and care services are meeting essential standards.

## The Hampton Wick Dental Centre

8 Upper Teddington Road, Hampton Wick,  
Kingston-upon-Thames, KT1 4DY

Tel: 02089774595

Date of Inspection: 19 April 2013

Date of Publication: May  
2013

We inspected the following standards as part of a routine inspection. This is what we found:

<b>Respecting and involving people who use services</b>	✓	Met this standard
<b>Care and welfare of people who use services</b>	✓	Met this standard
<b>Cleanliness and infection control</b>	✓	Met this standard
<b>Staffing</b>	✓	Met this standard
<b>Complaints</b>	✓	Met this standard

## Details about this location

Registered Provider	Dr. Lama Brown
Overview of the service	The Hampton Wick Dental Centre provides dental treatment for private patients. It is located in the Hampton Wick area of south west London.
Type of service	Dental service
Regulated activities	Diagnostic and screening procedures Surgical procedures Treatment of disease, disorder or injury

## Contents

*When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.*

	Page
<b>Summary of this inspection:</b>	
Why we carried out this inspection	4
How we carried out this inspection	4
What people told us and what we found	4
More information about the provider	4
<b>Our judgements for each standard inspected:</b>	
Respecting and involving people who use services	6
Care and welfare of people who use services	8
Cleanliness and infection control	9
Staffing	10
Complaints	11
<b>About CQC Inspections</b>	12
<b>How we define our judgements</b>	13
<b>Glossary of terms we use in this report</b>	15
<b>Contact us</b>	17

## Summary of this inspection

---

### Why we carried out this inspection

---

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an announced inspection.

---

### How we carried out this inspection

---

We looked at the personal care or treatment records of people who use the service, carried out a visit on 19 April 2013, observed how people were being cared for and talked with people who use the service. We talked with staff.

---

### What people told us and what we found

---

People who use the service told us that they were satisfied with the treatment they had received and way it was provided. "Very welcoming, a good family run business". "Everyone is very attentive and friendly".

The procedure for consultation and treatment was fully explained including the fees charged. People were also told about any risks that might arise from treatments chosen. They felt treated with dignity, respect and had received consultations and treatment in a way that maintained their privacy.

People using the service said they were aware of the complaints procedure but had not had cause to use it. They did not comment on the centre's infection control systems or staffing numbers. They did tell us they thought the centre was kept clean, tidy and felt safe using the service. They also said that the staff were "Welcoming, polite and informative".

We saw that people received enough information to make informed decisions about their treatment in a number of ways including verbal and visual description. There was a robust complaints process that was followed and infection prevention procedures were in place with people receiving treatment in a clean environment. There were also enough qualified and competent staff to meet people's needs.

You can see our judgements on the front page of this report.

---

### More information about the provider

---

Please see our website [www.cqc.org.uk](http://www.cqc.org.uk) for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

## Our judgements for each standard inspected

**Respecting and involving people who use services** ✓ Met this standard

People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

---

### Our judgement

---

The provider was meeting this standard.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

---

### Reasons for our judgement

---

People who use the service understood the care and treatment choices available to them.

They told us they felt the treatment and consultation rooms used maintained their privacy and dignity and they felt respected by each member of the staff team. They were encouraged to ask questions and felt the dentist and staff took the time to answer them clearly and in a way that was easy to understand. "I get a print out of the treatment and its cost up front". "I was recommended by a member of my family".

They told us that they were provided with good information about the treatments available and their cost. The treatment information also included any risks attached to them.

People said staff were helpful, friendly and they were given realistic expectations of the treatments available. They received appropriate information and support regarding their care and treatment.

During our visit staff were courteous, friendly and treated people who use the service with dignity and respect. We saw the receptionist explaining the charges for treatment in a clear way.

The verbal information given during consultation and treatment was supported by written information and visual images particular to the individual and generally. These were on screens in the treatment room for the individual and on a screen in the reception area for general information. Information about the centre, available treatments and costs was further explained on the website.

The consultation information included a treatment plan that people could take away with them to help decide if they wanted to go ahead with treatment. This was based on medical history taken and assessment during consultation. All consultations took place in a private. Treatment costs were available in the reception area.

The clinic had a policy and procedure regarding treating people with dignity and respect that we saw staff followed.

**People should get safe and appropriate care that meets their needs and supports their rights**

---

**Our judgement**

---

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

---

**Reasons for our judgement**

---

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare.

People told us they had enough time, information and support to make a decision about their treatment. The dentist and other staff listened to them and talked through all the different treatment options. "It was okay before they took over but has come on a lot since".

They said that the centre's environment was comfortable, accommodating and that appointments were made flexible to meet their needs. "I phoned yesterday and got an appointment today". "I'm really happy with the service". People said they received treatment in a way they wanted it, when they wanted and were very satisfied with it.

We were told treatment could be provided on the day although the dentist preferred that people who use the service gave themselves more time to decide unless the treatment was required immediately.

Staff explained how people who use the service were given information verbally and in photographic, X-ray and written form. This was discussed during consultations. Risk assessments were carried out as part of patient medical history updating and the risks, benefits and costs of any treatment were also discussed in relation to these. This made sure people fully understood the care and treatment provided.

We saw people were required to sign medical consent forms and their medical history was updated before and after each consultation or treatment.

**People should be cared for in a clean environment and protected from the risk of infection**

---

**Our judgement**

---

The provider was meeting this standard.

People were protected from the risk of infection because appropriate guidance had been followed.

---

**Reasons for our judgement**

---

There were effective systems in place to reduce the risk and spread of infection.

People using the service did not tell us about the centre infection control procedures. They did tell us that the centre was clean, tidy and well maintained.

During our visit the dentist demonstrated the procedure followed from when the centre opened, before each new patient was seen, after they had received treatment and before the next patient was seen. They explained the cycle followed for cleaning re-usable instruments regarding checking for debris and residual matter after washing and before sterilisation. This included checking for residual matter using magnification. They also told us how sterilisers, autoclaves and other decontamination readings and equipment were checked and recorded. There was a clear process followed to ensure that clean instruments were not contaminated by dirty ones.

Regular infection control audits were also recorded. Equipment used was regularly checked by qualified contractors. Sharps boxes were in evidence and emptied by contractors when three quarters full and clinical waste appropriately stored and disposed of under contract monthly. Medication kept on the premises was securely stored.

The centre followed standard infection control guidance and procedures. We saw during a tour of the practice that all areas including those for treatment and decontamination were clean and well maintained. There were separate sinks used for hand washing and used instruments. The dental chairs and other equipment were clean and well maintained. Clothing and equipment was in provided and used to prevent contamination and to protect patients and staff.

## Staffing

✓ Met this standard

There should be enough members of staff to keep people safe and meet their health and welfare needs

---

### Our judgement

---

The provider was meeting this standard.

There were enough qualified, skilled and experienced staff to meet people's needs.

---

### Reasons for our judgement

---

There were enough qualified, skilled and experienced staff to meet people's needs.

People using the service said there was enough staff to deliver the service. They told us the staff were very good, caring and supportive. "The staff take care to get to know patients".

We saw that there were adequate numbers of staff to meet people's needs. Staff had access to appropriate training and were suitably qualified for the posts they held. They were trained in resuscitation, safeguarding and attended annual mandatory refresher courses.

There was one full time dentist and two part time specialists, one dental nurse, hygienist and a registered practice manager who was also the receptionist. Staff were allocated and aware of their specific areas of responsibility.

The dentists were GDC (General Dental Council) registered. All staff were CRB checked. CRB is the Criminal Records Bureau. Staff said that all of the procedures for care and treatment were carried out in line with up to date published research and good practice guidelines.

## Complaints

✓ Met this standard

People should have their complaints listened to and acted on properly

---

### Our judgement

---

The provider was meeting this standard.

There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

---

### Reasons for our judgement

---

People were made aware of the complaints system. This was provided in a format that met their needs.

People using the service told us they knew how to complain and who to. There was a written complaints policy and procedure that was readily accessible to patients at the centre. There was also information on the website.

There were no current recorded complaints. We saw there was a system for complaints to be logged and investigated.

## About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

## How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

 **Met this standard** This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

 **Action needed** This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

 **Enforcement action taken** If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

## How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

---

**Minor impact** – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

---

**Moderate impact** – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

---

**Major impact** – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

---

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

## Glossary of terms we use in this report

### Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

### Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

## Glossary of terms we use in this report (continued)

---

### **(Registered) Provider**

---

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

---

### **Regulations**

---

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

---

### **Responsive inspection**

---

This is carried out at any time in relation to identified concerns.

---

### **Routine inspection**

---

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

---

### **Themed inspection**

---

This is targeted to look at specific standards, sectors or types of care.

## Contact us

---

Phone: 03000 616161

---

---

Email: [enquiries@ccq.org.uk](mailto:enquiries@ccq.org.uk)

---

---

Write to us  
at: Care Quality Commission  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA

---

---

Website: [www.cqc.org.uk](http://www.cqc.org.uk)

---

---

Copyright Copyright © (2011) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

---