

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

## Batley Carr Dental Centre

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Tel: 01924458983

Date of Inspection: 13 December 2013

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2014

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

<b>Consent to care and treatment</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>Supporting workers</b>	✓	Met this standard
<b>Complaints</b>	✓	Met this standard

## Details about this location

Registered Provider	Dr. Ahmed Vania
Overview of the service	Batley Carr dental practice is a single story building in Batley West Yorkshire. They offer dental treatment to both National Health Service (NHS) and private patients. There are two dentists and one dental hygienists based at the practice. The premises has disabled access throughout.
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'.*

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## Summary of this inspection

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### Why we carried out this inspection

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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.

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### How we carried out this inspection

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We looked at the personal care or treatment records of people who use the service, carried out a visit on 13 December 2013, observed how people were being cared for and talked with people who use the service. We talked with staff, reviewed information sent to us by local groups of people in the community or voluntary sector and used information from local Healthwatch to inform our inspection.

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### What people told us and what we found

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We asked people what their experience was like when visiting the dental practice. Comments from people included, "I have always had all my treatment explained." And, "I have no problems at all with the dentist; they do a good job."

We looked at treatment records and we confirmed treatment was appropriately planned and recorded.

We also looked at the infection control procedures in place. We saw there were robust procedures in place and that staff had suitable guidance to ensure that equipment was cleaned, decontaminated and sterilised. We also saw that suitable arrangements were in place to provide emergency first aid and resuscitation if required.

We saw that staff had many opportunities to keep up to date with their training and personal development. Staff told us that they met regularly to talk about their practice and that they felt well supported in their work.

Information about how to make a complaint was displayed in the reception area and available in the practice information leaflets. We also saw that a 'suggestions box', was available and that patients were asked to complete a 'satisfaction' survey after their treatment. This meant that people were aware of their rights and able to raise any concerns about their treatment if they needed.

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

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## More information about the provider

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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

### Consent to care and treatment

✓ Met this standard

Before people are given any examination, care, treatment or support, they should be asked if they agree to it

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### Our judgement

The provider was meeting this standard.

Before people received any care or treatment they were asked for their consent and the provider acted in accordance with their wishes.

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### Reasons for our judgement

People we spoke with said they had been provided with an information leaflet when they first approached the practice. This provided general information about the service such as fees, the care that could be provided, the complaints process and contact information. We saw that this was available in several different languages. We noted that staff at the practice were multi lingual and were able to communicate with the range of language needs of patients using the practice. This was important to make sure people had enough information and were fully aware of their rights when using the service.

People told us their care and treatment choices were explained to them by the dentist and that they were made aware of any likely costs. They confirmed that they understood the treatment they were offered and confirmed they had agreed to their treatment plans.

We looked at patient's treatment records and confirmed individuals had given their expressed consent. We noted that people were given appropriate information and support regarding their care or treatment. This meant that individuals had consented to their treatment and been involved in any decision made.

Staff told us that they had discussed the Mental Capacity Act and were aware of a patient's right to refuse treatment. They explained that staff were to attend Mental Capacity Act training as part of their development and to improve support of people who were unable to consent to treatment.

We saw that the treatment times were well planned and that enough time was left between appointments. People said that they had no concerns regarding waiting times and did not feel under pressure or 'rushed' during their visits. The staff explained that if there was a delay for any reason they kept patients fully informed. This ensured that people were treated with respect and supported to receive the correct treatment in a timely way.

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

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**Our judgement**

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The provider was meeting this standard.

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

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**Reasons for our judgement**

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We spoke to patients awaiting treatment during our visit. They confirmed the dentist had consulted them with them at all stages of their treatment. They also said that they were happy with the staff and the care they received. They said "I am made to feel welcome here." And "I have always had all my treatment explained." And also, "I have no problems at all with the dentist; they all do a good job."

To gain more feedback from the patients we looked at the 'customer satisfaction surveys' that the dentist had received. We confirmed that feedback was overall positive and that individuals were happy with the service they received.

We looked at four sets of paper and computerised dental records for individuals registered at the dentist. We saw that allergies or other medical alerts were clearly recorded. The records were complete and these included medical histories, consents and agreement to treatment plans. We observed that the practice held individual records confidentially. Staff showed a good understanding about how to ensure people's privacy and confidential information was protected.

We also looked at the dental practice website and saw that the information guided people in what to do if they needed an emergency appointment. We were told by staff that appropriate arrangements were in place to ensure that people could access appointments in the event of an emergency 24 hours a day. This helped to protect people's health and wellbeing.

We looked at the emergency and first aid equipment and saw that these were easily accessible to staff. We saw that the equipment was checked and audited regularly. When we spoke with staff they explained what emergency equipment they had and how it would be used. They also told us they had recently received training in first aid and emergency care. We also looked at staff training records and saw that staff had received training in first aid and Cardiopulmonary Resuscitation (CPR). We also saw that the medical emergency drug kit was in order. An audit tool was seen, which ensured that the various drugs in the kit were regularly checked and kept up to date.

We confirmed all staff regularly participate in medical emergency and fire drills. This meant that staff knew how to respond in the event of an emergency.

The practice had good parking facilities, a disabled ramp to the entrance and was wheelchair accessible throughout. This meant all patients were able to access dental care at this practice.

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

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**Our judgement**

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The provider was meeting this standard.

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

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**Reasons for our judgement**

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There were effective systems in place to reduce the risk and spread of infection. We looked at all the areas in the practice including treatment, x-ray and decontamination rooms. We observed that the building was well maintained and cleaned throughout.

We saw that the dental practice customer satisfaction surveys and surveys confirmed patients were satisfied with the cleanliness of the practice.

We talked with the staff who told us that they had access to the right clothing to protect their health. We also observed that the dentist and staff wore uniforms and appropriate protective clothing. The staff showed us the range of protective clothing they had access to. These included glasses, masks, aprons and gloves.

The practice had policies and procedures in place for the prevention and control of infection. We were told that single use items were disposed of as clinical waste after each patient. Each treatment room had designated dirty and clean areas.

We saw completed records of monitoring checks carried out on the specialist cleaning and sterilising equipment. We also observed service contracts for equipment to ensure these were continually well maintained.

We talked to staff about their training and they confirmed that they had completed training in hand washing, infection control and decontamination procedures. All of these processes meant that staff and patients were in an environment where all recommended cross infection measures had been implemented. This helped to ensure that the risk of harm to patients and staff from cross infection was minimised.

**Staff should be properly trained and supervised, and have the chance to develop and improve their skills**

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## **Our judgement**

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The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

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## **Reasons for our judgement**

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We talked with the staff about the training provided. They said that they had attended courses and as part of their Continuing Professional Development (CPD) which is required by their professional body. We saw evidence of their development within their CPD records. The staff felt they were encouraged to develop their understanding and had regular training opportunities. We saw individual staff training portfolios which included updates and refresher training where needed. Training included; protection of children and vulnerable adults, decontamination processes, radiography, oral health, medical emergencies and infection control. This showed that staff were encouraged and well supported in their professional development.

The staff told us that they held regular staff meetings. We saw meeting minutes where practice areas were discussed, such as patient waiting times, improving information and communication to patients and information to development of the practice web site. Staff told us that they were invited and encouraged to make suggestions and come forward with ideas to improve the service. They said that they felt their ideas were listened too and opinions respected. This meant that staff felt included in the decision making and development of the practice.

We saw that staff had regular individual meetings with their manager to discuss their work and future training needs. They had regular supervision and appraisals. This helped ensure that staff were properly trained, supported and competent in their role.

**People should have their complaints listened to and acted on properly**

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**Our judgement**

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The provider was meeting this standard.

There was an effective complaints system available.

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**Reasons for our judgement**

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We asked one patient if they were aware how to raise a concern or a complaint, they told us, "I was originally given a leaflet explaining everything. I would not have a problem complaining about my treatment if I needed too. I would tell the dentist if I wasn't happy with something."

People were made aware of the complaints system. This was provided in a format that met their needs. We saw that patients were regularly offered the opportunity to complete satisfaction surveys and that a complaints procedure was displayed and a suggestions box was available for patients to use. We looked at a report of the findings from the recently completed surveys and confirmed that information from these questionnaires was used to improve the quality of care. The staff explained they discussed the responses and would implement any changes required to improve the experience for the individual.

We viewed the 'complaints handling policy.' This was included in the information leaflet provided by the practice to new patients. We saw that this was available in the waiting area and translated into several different languages. The policy provided detail of timescales for responding to complaints and the various stages of investigation, including relevant signposting if the person was not satisfied with the response from the dentist. We also saw that a complaints record was in place but no complaints had been received.

Staff told us that they and the dentist was always available to speak to people and to try to find solutions to any concerns raised. If they could not resolve this they would be provided with assistance to make a formal complaint.

## 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.

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**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.

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**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.

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**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

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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)

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### **(Registered) Provider**

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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'.

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### **Regulations**

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

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### **Responsive inspection**

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

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### **Routine inspection**

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

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### **Themed inspection**

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

## Contact us

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