

# Dr Debaprasad Ray

# Bridge Dental

## Inspection report

91 Borough High Street  
London  
SE1 1NL  
Tel: 02074072174  
www.bridgedental.com

Date of inspection visit: 9 October 2020  
Date of publication: 06/11/2020

## Overall summary

We undertook a follow up desk-based review of Bridge Dental on 9 October 2020. This review was carried out to assess 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 advisor.

We undertook a comprehensive inspection of Bridge Dental on 7 February 2019 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 and was in breach of regulation 17 Good Governance 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 Bridge Dental on our website .

As part of this review we asked:

- Is it well-led?

When one or more of the five questions are not met we require the service to make improvements and send us an action plan (requirement notice only). We then inspect again after a reasonable interval, focusing on the area(s) where improvement was required.

### **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 breaches we found at our inspection on 7 February 2019.

### **Background**

Bridge Dental is located in London Bridge, London. The practice provides private treatment to adults and children.

The dental team includes a practice manager who also undertakes receptionist duties, four dentists, a qualified dental nurse, a trainee dental nurse, a dental hygienist, a receptionist and a financial coordinator.

The practice has three treatment rooms.

The practice is owned by an individual who is the principal dentist there. They have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

The practice is open:

Monday: 9.00am – 6.00pm

Tuesday: 8.00am – 6.00pm

Wednesday: 8.00am – 8.00pm

Thursday and Friday : 8.30am – 5.00pm

# Summary of findings

Saturday: By Appointment Only

## **Our key findings were:**

- There were effective systems for assessing and monitoring the practice premises and equipment and the practice took steps to ensure these were well maintained.
- The provider had improved the practice infection control procedures so that they reflected published guidance.
- Arrangements were now in place to monitor information in relation to suitable recruitment checks.
- There were effective systems to ensure that audits and risk assessments were carried out, reviewed and acted upon to monitor and improve the safety and quality of the service.

# Summary of findings

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

We asked the following question(s).

**Are services well-led?**

**No action**



# Are services well-led?

## Our findings

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

At our previous inspection on 7 February 2019 we judged the provider was not providing well led care and was not complying with the relevant regulations. We told the provider to take action as described in our requirement notice. At the review on 9 October 2020 we found the practice had made the following improvements to comply with the regulation:

- The provider supplied evidence of the Disability Access Audit and that improvements had been made taking into account the requirements of the Equality Act 2010.
- The provider had supplied photographic evidence of the actions carried out in the Health & Safety risk assessment.
- The provider had reviewed the Infection control audit and had made the required improvements. The provider provided us with evidence of a builder's quote that refurbishment of the decontamination room would be undertaken. However, no further evidence was shared as regards the commencement of the planned works.

- The provider supplied evidence to confirm that they had reviewed the practice's fire risk assessment of 2019, reflecting the improvements on the fire risk assessment of 3 August 2020. It had photographs of the improvements that were carried out for example, the fire alarms and emergency lighting had been installed, that appropriate signage had been placed for fire exit and escape routes. Arrangements were now in place for regular checking and annual testing for fire safety equipment including fire extinguishers, emergency lighting and the fire alarm system.
- The provider had supplied us with the evidence that all relevant checks were being carried out when recruiting staff.

The practice had also made further improvements:

- Patients' dental care records were now audited in line with guidance provided by the Faculty of General Dental Practice.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with Regulation 17 when we undertook a desk-based review on 9 October 2020.