

Mr Mark White

Ashfield House (High Bentham)

Inspection report

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Overall summary

We undertook a follow up desk-based inspection of Ashfield House (High Bentham) Dental Practice on the 29 June 2020. 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 undertaken by a CQC inspector who had remote access to a specialist dental adviser.

We undertook a comprehensive inspection of on 5 March 2020 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 12 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 Ashfield House (High Bentham) Dental Practice on our website .

As part of this inspection we asked:

- Is it safe?
- 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.

This desk-based inspection was undertaken during the Covid 19 pandemic. Due to the demands and constraints in place because of Covid 19 we reviewed the action plan and asked the provider to confirm compliance after a reasonable interval, focusing on the area where improvement was required.

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 05 March 2020.

Are services well-led?

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

Summary of findings

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 05 March 2020.

Background

Ashfield House (High Bentham) Dental Practice is in High Bentham on the Lancashire and North Yorkshire border and provides private dental care and treatment for adults and children.

There is level access at the rear of the practice for people who use wheelchairs and those with pushchairs. Car parking spaces are available near the practice.

The dental team includes one dentist, one dental nurse and one receptionist. The practice has one treatment room.

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 to Wednesday: 9.00 – 5pm

Thursday: 2.00 – 9pm

Friday: Closed

Our key findings were :

- The provider had implemented infection control procedures which fully reflected published guidance in particular: the reprocessing of un-bagged dental instruments.
- The provider had safeguarding processes and staff knew their responsibilities for safeguarding vulnerable adults and children. Safeguarding training for staff could be demonstrated.
- The provider had improved staff recruitment procedures reflected current legislation for example; there were records of staff's immunisation status.
- The provider had established an effective leadership and a culture of continuous improvement.
- Clinical leadership and oversight of arrangements for managing risk were now effective, for example; the health and safety and the general risk assessments had been reviewed.
- Improved the practice's protocols and procedures for the use of X-ray equipment in compliance with The Ionising Radiations Regulations 2017 and Ionising Radiation (Medical Exposure) Regulations 2017 and taking into account the guidance for Dental Practitioners on the Safe Use of X-ray Equipment, in particular the collimator had been fitted to the X-ray machine.

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 our previous inspection on 05 March 2020 we judged the practice was not providing safe 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 29 June 2020 we found the practice had made the following improvements to comply with the regulation:

- The radiation protection requirements have been updated. A collimator had been fitted to the X-ray machine and the radiation protection file updated.
- The health and safety and the general risk assessments had been reviewed.
- The practice's infection control procedures and protocols took into account the guidelines issued by the Department of Health in the Health Technical

Memorandum 01-05: Decontamination in primary care dental practices and having regard to The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance'. In particular; the storage and reprocessing of un-bagged instruments had been reviewed and changes implemented.

- Safeguarding processes for the practice had been improved. Staff knew their responsibilities for safeguarding vulnerable adults and children. Safeguarding training for staff could be demonstrated.
- Risk assessment has been put into place for the employment of the temporary staff member. The recruitment procedure has been updated. When a new member of staff is recruited the correct procedure and all required documentation will be actioned.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the Regulation when we reviewed the information sent to us by the provider on 29 June 2020.

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 05 March 2020 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 this review on 29 June 2020 we found the practice had made the following improvements to comply with the regulation:

- Clear responsibilities, roles and systems of accountability to support good governance and management had been introduced.
- There was evidence of clinical audits taking place. Audits had been completed for infection prevention and control and the completion of dental care records.

- The provider had implemented systems or processes that ensured persons employed in the carrying on of the regulated activity or activities were protected from blood borne diseases.
- The provider had introduced a system that ensured ongoing recommended training for staff was in place and monitored.

The practice had also made further improvements:

- The provider has implemented changes to the filing and storage of all documentation in the practice. A new filing system had been introduced which allowed the provider easy access to documentation that demonstrated compliance to the regulations.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the Regulation when we reviewed the information sent to us by the provider on 29 June 2020.