

Leeds Road Dental Practice Limited

Leeds Road Dental Practice

Inspection report

649 Leeds Road
Bradford
BD3 8EL
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Date of inspection visit: 4 October 2021
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Overall summary

We undertook a desk-based inspection of 4 October 2021. 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.

This desk based inspection was carried out to review in detail the evidence submitted and actions taken by the registered provider to improve the quality of care and to confirm that the practice was now meeting legal requirements.

As part of this inspection we asked:

- Is it well-led?

Our findings were:

Are services well-led?

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

The provider sent information to us to confirm they had made improvements in relation to the regulatory breaches we found at our inspection 20 September 2021.

Background

Leeds Road Dental Practice is near Bradford city centre and provides private dental treatment for adults and NHS dental treatment for children.

Disabled access is available to the building via a ramp and treatment rooms are based on the ground floor and first floor. Car parking is available near the practice and local transport links are nearby.

Summary of findings

The dental team includes three dentists, six dental nurses, three receptionists and a practice manager. The practice has four treatment rooms.

The practice is owned by a company and as a condition of registration must have a person registered with the CQC as the registered manager. Registered managers 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 registered manager at Leeds Road Dental Practice is the principal dentist.

The practice is open:

Monday 9.30am - 5.30pm

Tuesday 8am - 3pm

Wednesday 8am - 4pm

Thursday 8.30am - 5.30pm

Friday 8am - 1pm

Our key findings were:

- Improvements had been made to the system for managing emergency medicines and equipment.
- Improvements had been made to the system for managing the risks associated with Legionella.

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 20 September 2021 we judged the practice 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 desk based follow up inspection on 4 October 2021 we reviewed the evidence sent to us to confirm the practice had made the following improvements to comply.
- Since the previous inspection the provider had taken action to replace the out of date medical oxygen cylinder to ensure there was a sufficient medical oxygen supply in an emergency.
- Improvements to the medical emergency kit had been made and now included all required oropharyngeal airways and the emergency medicine midazolam was now in place.
- Improvements had been made to the management of the risks associated with Legionella. At the previous inspection we noted logs of water temperatures were not sufficient. A new log was now in place and included the monthly temperatures taken.

These improvements showed the provider had taken action to comply with the regulation when we inspected on 4 October 2021.