

Toothpassion Limited

# Toothpassion Ltd

## Inspection report

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### Overall summary

We undertook a follow up focused inspection of Toothpassion on 11 October 2022. 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 led by a CQC inspector who was supported by a specialist dental adviser.

We undertook a comprehensive inspection of Toothpassion on 30 November 2021 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 or 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 Toothpassion dental practice on our website [www.cqc.org.uk](http://www.cqc.org.uk).

As part of this inspection we asked:

- Is it safe?
- Is it well-led?

#### **Our findings were:**

##### **Are services safe?**

We found this practice was providing safe care in accordance with the relevant regulations.

##### **Are services well-led?**

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

# Summary of findings

## Background

Toothpassion Ltd is in Leeds city centre and provides private dental care and treatment for adults and children.

The practice has 2 treatment rooms which are both located on the first floor. City centre car parking spaces, including dedicated parking for people with disabilities, are available near the practice.

The dental team includes 4 dentists, 1 dental nurse and a receptionist.

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 Toothpassion Ltd is the principal dentist.

During the inspection we spoke with the principal dentist, the dental nurse and the receptionist. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday to Thursday: 9am to 5:30pm

There were areas where the provider could make improvements. They should:

- Improve the practice's processes for the control and storage of substances hazardous to health identified by the Control of Substances Hazardous to Health Regulations 2002, to ensure risk assessments are undertaken and the products are stored securely.

# Summary of findings

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

We asked the following question(s).

|                               |                    |
|-------------------------------|--------------------|
| <b>Are services safe?</b>     | <b>No action</b> ✓ |
| <b>Are services well-led?</b> | <b>No action</b> ✓ |

# Are services safe?

## Our findings

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

### **Safety systems and processes, including staff recruitment, equipment and premises and radiography (X-rays)**

The practice had infection control procedures which reflected published guidance. Following the inspection on 30 November 2021 the practice has been refurbished. This includes the creation of a dedicated decontamination room which was in line with national guidance The Health Technical Memorandum 01-05: Decontamination in primary care dental practices, (HTM 01-05), published by the Department of Health and Social Care. Equipment used in infection prevention and control procedures had been tested and validated. Daily checks to ensure the equipment was working correctly were being carried out and recorded. Manual cleaning procedures were being carried out in line with the guidance within HTM 01-05.

The practice had procedures to reduce the risk of Legionella or other bacteria developing in water systems, in line with a risk assessment. Following the inspection on 30 November 2021 the practice had installed a new hot water boiler as part of the refurbishment. A new Legionella risk assessment had been carried out by an external specialist company. Regular testing of both hot and cold-water systems was being carried out with temperatures recorded.

### **Risks to patients**

Emergency equipment and medicines were available and checked in accordance with national guidance.

Staff knew how to respond to a medical emergency and had completed training in emergency resuscitation and basic life support in the last year.

Staff had also completed sepsis awareness training and information relating to sepsis was available in the practice for both staff and patients.

The practice had carried out some risk assessments in relation to the safe storage and handling of substances hazardous to health. However, further improvements should be made.

### **Safe and appropriate use of medicines**

The practice had systems for appropriate and safe handling of medicines. Antimicrobial prescribing audits were carried out.

# Are services well-led?

## Our findings

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

At the inspection on 11 October 2022 we found the practice had made the following improvements to comply with the regulations:

### **Culture**

The practice had arrangements to ensure staff training was up-to-date and reviewed at the required intervals.

Systems and processes to provide oversight had been improved. Record keeping across all areas of the practice had been improved. Management and monitoring systems had been established to ensure good governance.

### **Continuous improvement and innovation**

The practice had systems and processes for learning, continuous improvement.

The practice had quality assurance processes to encourage learning and continuous improvement. The systems and processes for audits had been reviewed and improvements implemented. We saw that audits of dental care records, radiographs and infection prevention and control had been completed.

Staff kept records of the results of these audits and the resulting action plans and improvements.