

Mr. Frederick Tomas Allahverdin

Ashley Down Dental Care

Inspection report

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Overall summary

We undertook a follow up desk-based review of Ashley Down Dental Care on 18 November 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.

The inspection was led by a CQC inspector who was supported by a specialist dental adviser.

We undertook a comprehensive inspection of Ashley Down Dental Care on 30 June 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 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 Ashley Down Dental Care on our website www.cqc.org.uk.

As part of this inspection 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. We then inspect again after a reasonable interval, focusing on the areas 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 breach we found at our desk top review on 18 November 2021.

Summary of findings

Background

Ashley Down Dental Care is in Horfield, Bristol and provides NHS and private treatment for adults and children.

The treatment rooms are situated on the first and second floor of the practice and only accessible via stairs. The practice is unable to accommodate people who use wheelchairs. There is car parking available near the practice.

The dental team includes four qualified dentists, a foundation dentist, two qualified dental nurses (one is the practice manager), four trainee dental nurses, one dental hygienist, and three receptionists. The practice had previously notified CQC that they were using three dental chairs. They were now using four chairs and the CQC needed to be informed. The provider told us this will be addressed.

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.

During the inspection we spoke with the principal dentist, owner of the practice and the practice manager during this review. We looked at practice policies and procedures and other records that related to the areas of improvement required.

The practice is open:

- Monday 8:30am to 6pm
- Tuesday 8:30am to 6pm
- Wednesday 8:30am to 5:30pm
- Thursday 8:30am to 5:30pm
- Friday 8:30am to 1pm

Our key findings were:

- The provider had an effective system in place for monitoring staff training, relevant to their role.
- The provider had an effective system to ensure appropriate checks were completed prior to new staff commencing employment at the practice, in accordance with their policy and legislative requirements.
- Fire safety had been reviewed to ensure it met with current legislation requirements.
- The provider had taken action to ensure audits of infection prevention control identified all areas of improvement were identified.

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 30 June 2021 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 inspection on 18 November 2021 we found the practice had made the following improvements to comply with the regulation 17 good governance:

- We found the provider now had an effective system in place for monitoring staff training, relevant to their role. We saw evidence of the system in place and examples of training completed for members of staff including radiation, safeguarding and basic life support.
- We found the provider now had an effective system to ensure appropriate checks were completed prior to new staff commencing employment at the practice, in accordance with their policy and legislative requirements. We saw evidence of checks undertaken for recently recruited staff and risk assessments were in place to mitigate risks when new staff employed without a Disclosure and Barring Service certificate.
- We found fire safety had been reviewed to ensure it met with current legislation requirements. An external fire safety risk assessment had been undertaken on 11 October 2021. Recommendations had either been actioned or there was an action plan in place to complete these.
- The provider had taken action to ensure audits of infection prevention control identified all areas of improvement. We saw evidence of completed infection control audits from April and October 2021 with completed summaries and action plans.

The practice had also made further improvements:

- The provider had a system in place to ensure evidence was sourced from members of staff to ensure they had adequate immunity for vaccine preventable infectious diseases.
- The provider had ensured a risk assessment had been carried out to mitigate any risks for the occasions when the hygienist worked on their own.
- The provider had completed an antibiotic prescribing audit on 13 November 2021 which included a review of records from all dentists within the practice. The provider had completed a summary reviewing the audit.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation 17 good governance, when we inspected on 18 November 2021.