

Dr Bradley Hall

Passage House Dental Care

Inspection Report

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Overall summary

We undertook a focused inspection of Passage House Dental Practice on 11 February 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 led by a CQC inspector who was supported by a specialist dental adviser.

We undertook a comprehensive inspection of Passage House Dental Practice on 19 June 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 19 fit and proper persons employed 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 Passage House 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 area where improvement was required.

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 inspection on 19 June 2019.

Background

Passage House Dental Care is in Henbury, Bristol and provides NHS and private treatment for adults and children.

There is level access for people who use wheelchairs and those with pushchairs. There are two patient car parking spaces, which are available, at the front of the practice. There is also one hour's parking available near the practice.

The dental team includes seven dentists, eight dental nurses, one dental hygienist and four receptionists and a practice manager. The practice has five treatment rooms.

The practice is owned by a partnership and as a condition of registration must have a person registered with the Care Quality Commission 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 Passage House Dental Care is the senior partner.

Summary of findings

During the inspection we spoke with the registered manager and the practice manager. We looked at practice policies and procedures and other records about how the service is managed in relation to the breach of regulation and areas where we told the provider they should improve upon the last inspection.

The practice is open:

- Monday 8:30am – 5:30pm
- Tuesday 8:30am – 6:30pm
- Wednesday 8:30am – 5pm
- Thursday 8am – 5:30pm
- Friday 8am – 4pm

Our key findings were:

- Effective systems were in place to ensure all information specified within schedule 3 of the Health and Social Care Act 2008 (regulated activities) was in place for recruited staff.
- The provider had addressed the outstanding action for the use of X-ray equipment.
- The outstanding risks had been mitigated in regards to fire safety.
- NHS prescriptions were held securely and monitored for their use.
- An audit had been completed for prescribing antibiotic medicines, which took into account the guidance provided by the Faculty of General Dental Practice.
- Patient referrals to other dental or health care professionals were centrally monitored to ensure they were received within a timely manner and not lost.

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 19 June 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 inspection on 11 February 2020 we found the practice had made the following improvements to comply with regulation 19 Fit and proper persons employed:

- At this inspection we found the provider had ensured all information specified within schedule 3 of the Health and Social Care Act 2008 (regulated activities) was available for each person employed. We reviewed three recruitment files, and these showed the necessary information was available. The practice manager had reviewed all previously employed staff files to ensure missing information was assessed and reviewed. We saw the new systems implemented were comprehensive and ensured legislation requirements would be met.

The practice had also made further improvements:

- The provider informed us they no longer provided sedation, so there was no longer need to review their protocols for sedation.

- The provider had reviewed the protocols and procedures for the use of X-ray equipment. They had contacted their Medical Physics Expert and sought clarification on the actions raised from the X-ray performance checks.
- The provider had mitigated the outstanding risks associated with fire safety. We saw an external company had completed a fire risk assessment in July 2019. They had acted on actions raised. There was an action plan for one outstanding action. We saw emergency lighting was being checked on a monthly basis. We saw the provider had completed electrical works and had an electrical installation safety certificate dated August 2019.
- Practice procedures had been reviewed to ensure NHS prescription pads were kept secure and there was a system to monitor their use.
- The provider had completed the antibiotic medicines audit in September 2019 and actions had been identified through an action plan to enable staff learning.
- Practice procedures had been updated to ensure patient referrals to other dental or health professionals were received in a timely way. We saw there was now a system in place to check receipt of the referral and ensure patients had received an appointment.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with regulation 19 Fit and proper persons employed: when we inspected on 11 February 2020.