

# Pro-Dent Dental Surgery Partnership

# Pro-Dent Dental Surgery

## Inspection Report

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### Overall summary

We undertook a follow up inspection of Pro-Dent Dental Surgery on 23 May 2019. 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 Pro-Dent Dental Surgery on 23 January 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 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 Pro-Dent Dental Surgery dental practice on our website [www.cqc.org.uk](http://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.

#### **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 inspection on 23 January 2019.

#### **Background**

Pro-Dent Dental Surgery is in Southampton and provides NHS and private treatment to adults and children.

There is level access for people who use wheelchairs and those with pushchairs. Car parking spaces, including those for blue badge holders, are available near the practice.

The dental team includes three dentists, four trainee dental nurses, one practice manager and two receptionists. The practice has three 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 Pro-Dent Dental Surgery is the practice manager. A registered manager is legally responsible for the delivery of services for which the practice is registered.

# Summary of findings

During the inspection we spoke with two dentists, two dental nurses, one receptionists, The company chief executive, one area manager, one operations manager, one compliance manager and the practice manager. We looked at practice policies and procedures and other records about how the service is managed.

The practice is open:

Monday to Friday 8am to 6pm

Saturday 9am to 8pm

## **Our key findings were:**

- The provider had fire and legionella risk assessments in place and was implementing any recommendations.
- The Control of Substances Hazardous to Health (COSHH) Regulations 2002 file had been brought up to date
- The provider had carried out an extensive refurbishment on the practice, including treatment and decontamination rooms.
- The practice was clean, including air vents.
- Medical supplies were now stored within the practice.
- The provider had installed a dedicated medical fridge for temperature sensitive medical supplies.
- Staff knowledge and understanding of antibiotic stewardship, decontamination processes, safer sharps, duty of candour, and sepsis had been addressed.
- We saw that the X ray file had been reviewed and X - ray plates has been replaced.
- We saw that the practice has introduced access to a dedicated oral health educator for children. This was to be commended.

# Summary of findings

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

We asked the following question(s).

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

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

We were shown building wide risk assessments for fire and legionella, both dated 2019, with recommendations having either been implemented, or in the process of being carried out.

We were shown an updated Control of Substances Hazardous to Health (COSHH) Regulations 2002 file which contained up to date material safety data sheets which had been assessed.

We saw that the practice had been refurbished throughout, with worn out items, damaged floors, cabinets and chairs having been replaced. A new X ray unit had been installed to replace the damaged X-Ray we found on the previous inspection. The practice manager told us that the remaining temporary electrical extensions boards would shortly be replaced.

We saw that the decontamination room had been refurbished. Damaged cabinets had been replaced. There was no exposed electrical wiring exposed. The broken tap had been replaced. The floor had been replaced. A new fan and air vent had been installed to improve air flow.

We saw that all air vents in the practice were clean. Were shown a dedicated cleaning file for the practice.

We saw that the dedicated storage for medical supplies was contained within the practice. Precious issues concerning temperature control for supplies was no longer an issue.

We saw that there was a dedicated medical fridge for temperature sensitive medical supplies which was monitored

We spoke with staff and about their knowledge and understanding of antibiotic stewardship, decontamination processes, safer sharps, duty of candour, and sepsis. This confirmed that knowledge levels had increased significantly. The practice manager told us that an antibiotic steward ship audit would shortly be completed.

We saw that X ray plates had been replaced. The X ray equipment information was now contained in a dedicated and well order file.

We saw that the practice has introduced access to a dedicated oral health educator for children. This was to be commended.

**No action**



# Are services well-led?

## Our findings

At our previous inspection on 23 January 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 23 May 2019 we found the practice had made the following improvements to comply with the regulation(s):

We were shown building wide risk assessments for fire and legionella, both dated 2019, with recommendations having either been implemented, or in the process of being carried out.

We were shown an updated Control of Substances Hazardous to Health (COSHH) Regulations 2002 file which contained up to date material safety data sheets which had been assessed.

We saw that the practice had been refurbished throughout, with worn out items, damaged floors, cabinets and chairs having been replaced. A new X ray unit had been installed to replace the damaged X-Ray we found on the previous inspection. The practice manager told us that the remaining temporary electrical extensions boards would shortly be replaced.

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We saw that X ray plates had been replaced. The X ray equipment information was now contained in a dedicated and well order file.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulation(s): when we inspected on 23 January 2019.

We saw that the practice has introduced access to a dedicated oral health educator for children. This was to be commended.