

### **Shropshire Dental Limited**

# Bellstone Dental Practice

### **Inspection Report**

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### Overall summary

We undertook a focused inspection of Bellstone Dental Practice on 26 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 remotely by a specialist dental adviser.

We undertook a comprehensive inspection of Bellstone Dental Practice on 25 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 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 Bellstone Dental Practice on our website www.cqc.org.uk.

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 had made improvements in relation to the regulatory breach we found at our inspection on 25 June 2019.

#### **Background**

Bellstone Dental Practice is in Shrewsbury, Shropshire and provides NHS and private treatment for adults and children. The practice is one of two within Shropshire registered under the same provider.

Bellstone Dental Practice is in the town centre. There is no dedicated parking due to the location of the practice. The practice is accessible via public transport with a bus stop within 200 metres. This bus stop is also utilised by the local park and ride service. Access into the reception area is up two small steps. There is no access for wheelchair users.

The dental team includes four dentists, a dental hygienist, four dental nurses including three trainee dental nurses and a practice manager. The practice has three treatment rooms and centralised decontamination facilities.

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

## Summary of findings

the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run. The registered manager at Bellstone Dental Practice is the principal dentist.

During the inspection we spoke with the principal dentist 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: from 9am to 5pm.

#### Our key findings were:

• Staff training records had been updated and a system developed to give oversight of staff training and continuous professional development.

- The emergency medicines had been reviewed. The practice now held all of the medicines required, as described in national guidance.
- Staff recruitment records had been audited and the practice had all of the records required by the regulations for each member of staff.
- The system for monitoring complaints has been reviewed and records were being kept. A system to analyse complaints had been introduced.
- Radiography audits had been completed for each dentist, all within the last year.
- The system for untoward incidents/ significant events has been reviewed and this now captured all of the information and provided analysis and shared learning.

# 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 25 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 26 February 2020 we found the practice had made the following improvements to comply with the regulation.

- Following our inspection on 25 June 2019 the practice had reviewed all staff training. Staff files contained relevant training certificates which demonstrated all recommended training had been completed. The practice manager had developed a system to allow oversight of each individual staff member's training and continuous professional development.
- At our previous inspection we identified the practice did not have any buccal midazolam. This is a medicine used if a patient has a seizure. We saw that a supply of this medicine had been obtained and added to the practice's emergency medicines kit.

- The practice had reviewed the information held in staff recruitment records. We reviewed six staff records including those for the two most recently appointed members of staff. We saw these staff files held all documents required by the Health and Social Care Act regulations.
- The system for monitoring and recording complaints has been reviewed. Records showed that complaints were being monitored and had been analysed. When necessary an apology had been given, and any learning points had been shared with staff.
- Records showed radiograph audits had been completed for each dentist, all within the year up to this inspection.
   Analysis forms used during the audit identified the reason for radiographs not achieving the best score of a grade of one (excellent).
- The system for recording untoward incidents/significant events has been updated. All staff had attended a meeting where the process for identifying and recording these had been discussed.

These improvements showed the provider had taken action to comply with the regulation when we inspected on 26 February 2020.