

Ewan Bramley Dental Care Ltd

Ewan Bramley Dental Care

Inspection Report

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Overall summary

We undertook a follow up desk-based inspection of 20 April 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 undertaken by a CQC inspector as desk-based review.

We undertook a comprehensive inspection of North Road Dental Surgery 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 regulations 17 and 18 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 North Road Dental Surgery 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 breaches we found at our inspection on 20 April 2020.

Background

Ewan Bramley Dental Care is in North Shields and provides private treatment to adults and children.

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

The dental team includes a principal dentist, four associate dentists, two visiting dentists, nine dental nurses (two of whom are trainees), two healthcare assistants, three dental hygienists, a practice manager, a clinic manager and a receptionist. Two of the dental nurses also perform reception duties. The practice has four treatment rooms, with two hygiene bays being in one of the rooms.

The practice is owned by a company 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 Ewan Bramley Dental Care is the principal dentist.

The practice is open:

Monday - Thursday: 8am to 8pm

Friday: 8am to 3pm

Saturday: 9am to 3pm.

Our key findings were:

- Systems had improved to help manage risks. These included risks associated with gas and fire safety and hazardous substances.
- Improvements had been made to the processes and management of staff recruitment ensuring all required checks were in place.
- Improvements had been made to the recording of staff training in safeguarding and overall monitoring of staff development training.
- Systems had been implemented to improve overall management and governance systems.
- Awareness of safety incidents had been increased and learning from events shared at team meetings.
- Audits were now in place for the cone beam computed tomography machine X-rays and safety checks.

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 20 April 2020 we found the practice had made the following improvements to comply with the regulations.

- Systems had been implemented to improve overall management and governance systems throughout the practice.
- Awareness of safety incidents had been increased and learning from events shared at team meetings.
- Systems had improved to help them manage risks. Gas safety had been reviewed and fire safety systems were checked regularly. Fire drills were in place at regular intervals.

- The management of hazardous substances had improved, were monitored, and risk assessed.
- Staff recruitment had been reviewed and all staff had the appropriate checks in place and staff records completed in line with current guidance.
- All staff had safeguarding training in place and improved systems had been introduced to monitor staff development and training needs. These systems monitored and checked staff training and necessary updates. Appraisals were now in place to review staff development and training needs.
- Audits were now in place for the use of the cone beam computed tomography machine X-rays and safety checks had been implemented and recorded.
- A system for the monitoring of the prescribing of antibiotics has been introduced.
- Audits for Infection Prevention and control had been increased to 6 monthly in line with guidance.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulations when we inspected on 20 April 2020