

The Bank Dental Practice Limited

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Inspection report

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Date of inspection visit: 17 March 2023
Date of publication: 27/03/2023

Overall summary

We undertook a follow up focused inspection of The Bank Dental Practice Limited on 17 March 2023. 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 supported by a specialist dental adviser.

We undertook a comprehensive inspection of The Bank Dental Practice Limited on 8 June 2022 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 The Bank Dental Practice Limited on our website www.cqc.org.uk.

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.

As part of this inspection we asked:

- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

Our findings were:

Summary of findings

Are services caring?

We found this practice was providing caring services in accordance with the relevant regulations.

Are services responsive?

We found this practice was providing responsive care in accordance with the relevant regulations.

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 8 June 2022.

Background

The Bank Dental Practice Limited is in Manchester and provides NHS and private dental care and treatment for adults and children.

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

The dental team includes 7 dentists, 5 dental nurses, 2 dental hygienists, 2 receptionists and a practice manager. The practice has 5 treatment rooms.

During the inspection we spoke with 1 dental nurse 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 and Thursday from 8am to 5pm

Tuesday from 8am to 7pm

Wednesday from 8am to 4:30pm

Friday from 8am to 2:30pm

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services caring?	No action	✓
Are services responsive to people's needs?	No action	✓
Are services well-led?	No action	✓

Are services caring?

Our findings

We found that this practice was providing caring services and was complying with the relevant regulations.

Kindness, respect and compassion

Staff were aware of their responsibility to respect people's diversity and human rights.

We saw staff treated patients respectfully and kindly and were friendly towards patients at the reception desk and over the telephone.

Privacy and dignity

Staff were aware of the importance of privacy and confidentiality.

Staff password protected patients' electronic care records and backed these up to secure storage.

Involving people in decisions about care and treatment

Staff helped patients to be involved in decisions about their care and gave patients clear information to help them make informed choices about their treatment.

The practice's website provided patients with information about the range of treatments available at the practice.

Staff explained the methods they used to help patients understand their treatment options. These included for example photographs, models and X-ray images.

Are services responsive to people's needs?

Our findings

We found that this practice was providing responsive care and was complying with the relevant regulations.

Responding to and meeting people's needs

The practice organised and delivered services to meet patients' needs and preferences.

Staff were clear about the importance of providing emotional support to patients when delivering care.

The practice had made reasonable adjustments, including step free access, an accessible toilet and a hearing loop for patients with access requirements. Staff had carried out a disability access audit and had formulated an action plan to continually improve access for patients.

Timely access to services

The practice displayed its opening hours and provided information on their website.

Patients could access care and treatment from the practice within an acceptable timescale for their needs. The practice had an appointment system to respond to patients' needs. The frequency of appointments was agreed between the dentist and the patient, giving due regard to NICE guidelines. Patients had enough time during their appointment and did not feel rushed.

The practice's website and answerphone provided telephone numbers for patients needing emergency dental treatment during the working day and when the practice was not open.

Patients who needed an urgent appointment were offered one in a timely manner. When the practice was unable to offer an urgent appointment, they worked with partner organisations to support urgent access for patients. Patients with the most urgent needs had their care and treatment prioritised.

Listening and learning from concerns and complaints

The practice had systems to respond to concerns and complaints appropriately. Staff discussed outcomes to share learning and improve the service.

Are services well-led?

Our findings

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

At the inspection on 17 March 2023, we found the practice had made the following improvements to comply with the regulation:

- Improvements had been made to the system for ensuring facilities are maintained in accordance with regulations and guidance. We saw evidence that a fixed wire electrical installation test had been carried out and this stated the wiring was satisfactory.
- Improvements had been made to the system for ensuring emergency medicines and equipment reflect nationally recognised guidance. When we checked the contents of the medical emergency kit, we found these were in line with national guidance.
- Improvements had been made to the system for maintaining staff recruitment records. We checked staff recruitment records and found these reflected the requirements of Schedule 3 of the Health and Social Care Act.
- Improvements had been made to the system for ensuring the risks associated with substances that are hazardous to health are appropriately managed. We saw hazardous substances were locked away and risk assessments had been completed for these substances.
- Improvements had been made to the system for monitoring staff training. Staff described the system which they had introduced. We also checked training records and found these to be up to date.
- Audits of radiography, infection prevention and control and antimicrobial prescribing had been completed.

The provider had also made further improvements:

- The textured wallpaper in one of the surgeries had been replaced with washable paint.
- Checks on the fire alarm system were being recorded.