

McCarthy Dental Practice

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Inspection Report

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Overall summary

We carried out an announced follow-up inspection at McCarthy Dental Practice on the 6 April 2018. This followed an announced comprehensive inspection on the 2 August 2017 carried out as part of our regulatory functions where breaches of legal requirements were found.

After the comprehensive inspection, the practice wrote to us to say what actions they would take to meet the legal requirements in relation to the breaches.

We revisited McCarthy Dental Practice and checked whether they had followed their action plan.

The practice had been served a requirement notice for issues relating to the key question of well led. We reviewed the practice against this key question which they were in breach of. We also reviewed the key question of safe as we had made recommendations and the provider had made improvements in this area. This report covers our findings in these two areas.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for McCarthy Dental Practice on our website at www.cqc.org.uk.

Background

This inspection was planned to check whether the practice was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The follow-up inspection was led by a CQC inspector and a specialist dental advisor.

During our inspection visit, we checked that points described in the provider's action plan had been implemented by looking at a range of documents such as risk assessments, audits, medical emergency medicines and equipment and policies.

Our key findings were:

- Appropriate systems were in place to receive safety alerts. The alerts were stored in a central location for future reference.
- Appropriate medicines and life-saving equipment were available. Logs of checks to equipment were being maintained.
- The practice had systems to help them manage risk.
 Governance arrangements were in place for effective and smooth running of the practice.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

The practice had appropriate medical emergency equipment and carried out regular checks to them. Appropriate and up to date safeguarding procedures were in place. Systems had been set up to carry out regular risk assessments including general health and safety and COSHH.

No action



Are services well-led?

At our previous inspection we had found that the governance systems at the practice required review. No one was responsible for providing leadership for governance arrangements; training was not structured and audits were not being completed.

No action



At our follow-up inspection we found that action had been taken to ensure that the practice was well-led. Governance systems were in place to ensure that policies and procedures were kept up to date, there was clear leadership and staff were aware of who the different leads were; staff were completing all necessary training and information was shared effectively with staff.

Are services safe?

Our findings

Reporting, learning and improvement from incidents

The practice had signed up to and were now receiving national patient safety and medicines alerts from the Medicines and Healthcare Products Regulatory Authority (MHRA). Relevant alerts were discussed with staff, acted on and stored for future reference.

Systems were in place for the monitoring of incidents, including RIDDOR. Both dentists demonstrated knowledge of RIDDOR.

Medical emergencies

At the previous inspection we found that medical emergencies training was out of date; items were missing from the resuscitation council recommended list and the oxygen cylinder was out of date.

During this inspection we found that both dentists had completed recent medical emergencies training, a new oxygen cylinder had been purchased and all missing items had been obtained.

Monitoring health & safety and responding to risks

At our previous inspection we found that there were limited processes in place for monitoring health and safety risks. Risk assessments were not being carried out and there was no evidence of a fire risk assessment being completed.

During this inspection we found that the practice had up to date health and safety policies and risk assessments were being completed. An external company had completed a health and safety risk assessment in January 2018. Areas for improvement had been identified, which the practice were working towards implementing. Risk assessments carried out included general premises and a COSHH.

A fire risk assessment had been completed by an external company in September 2017. Areas for improvement had been identified and all had been completed.

Are services well-led?

Our findings

Governance arrangements

At our previous inspection we found that governance arrangements required structure and organisation.

During this inspection we found that the practice had developed policies and procedures and there were systems in place to monitor risks and take appropriate action if needed. For example, the practice had a folder with all their practice policies. This included policies for health and safety, business continuity, clinical governance, medical emergencies and safeguarding. All policies we reviewed were relevant and up to date. Portable appliances had been tested and there was a system in place for them and other equipment to be maintained appropriately.

There were systems in place to monitor the quality of the service through auditing; servicing of equipment was planned and monitored.

The practice had policies, procedures, risk assessments and information governance arrangements to support the management of the service and to protect patients and staff. These included arrangements to monitor the quality of the service and make improvements.

Learning and improvement

During this inspection we found that the practice had put in place quality assurance processes to encourage learning and continuous improvement. These included audits of dental care records, radiographs and infection prevention and control. They had clear records of the results of these audits and the resulting action plans and improvements.