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J.G. Glen (Practice)

Inspection Report

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Overall summary

We carried out this inspection to follow up concerns we originally identified during a comprehensive inspection at the practice on 28 November 2017 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions.

At a comprehensive inspection we always ask the following five questions to get to the heart of patients' experiences of care and treatment:

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

When one or more of the five questions is 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.

At the previous comprehensive inspection, we found the registered provider was providing safe, effective, caring and responsive care in accordance with relevant regulations. We judged the practice was not providing well-led care in accordance with 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 J G Glen Practice on our website www.cqc.org.uk.

During this inspection, we spoke with the practice manager and principal dentist. We checked the premises and reviewed a range of documentation in relation to the management of the practice.

Our findings were:

- The provider had made satisfactory improvement to put right most of the shortfalls we found at our previous inspection. The provider must ensure that all newly implemented improvements are embedded and sustained in the long- term in the practice.

There were areas where the provider could make improvements and should:

- Ensure that the name and address of the practice are displayed on all private prescriptions issued to patients.
- Infection control audits should be undertaken every six months in line with current guidance

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 in accordance with the relevant regulation.

The improvements we noted since our previous inspection indicated that governance within the practice had improved, and systems were in place to ensure standards were met. This included implementing a system for recording and learning from incidents, receiving national patient safety alerts, providing medical emergency equipment and strengthening recruitment practices.

No action



Are services well-led?

Our findings

At our previous inspection on 28 November 2017, we judged the practice was not providing well-led care in accordance with the relevant regulations. We issued a requirement notice as a result.

During this inspection we noted the following improvements:

- A specific untoward event diary had been implemented, and we reviewed the records of recent incidents that had been recorded. This included the front door breaking and the practice's phone lines not working. The practice manager told us the principal dentist would audit all incidents regularly to identify any patterns or themes.
- The principal dentist had signed up to receive safety alerts from the Medicines and Healthcare Products regulatory Authority, and was aware of recent alerts affecting dental practice.
- Latex dams were in date for safe use in both rubber dam kits that we checked.
- The practice had implemented a business continuity plan describing how it would deal with any disruptions to its service.
- All staff had received training in dealing with medical emergencies on 15 December 2017.
- Missing emergency medical equipment had been purchased and we saw a defibrillator, oxygen cylinder, portable suction and buccal midazolam in the practice's emergency kit bag.
- We reviewed recruitment paperwork for a recently employed trainee dental nurse and noted all appropriate pre-employment checks had been undertaken to ensure she was suitable to work at the practice.
- Hazardous cleaning materials were now kept in a locked cupboard in the waiting room.
- An infection control audit had been completed on 1 July 2017 that supported that the practice met essential requirements. The provider should note however, that these audits should be undertaken every six months.
- The practice's washer disinfectant had been decommissioned to ensure staff did not use it accidentally.
- A thermometer had been bought for the fridge and the practice manager told us she checked the temperature every day to ensure it worked effectively. However, these checks were not recorded, although the practice manager told us she would undertake this immediately.
- Dental care records' audits were now being undertaken for the associate dentist and hygienist to ensure they met national standards.
- Information about out of hours provision had been put on display outside the building to inform patients should they arrive when the practice was closed.
- The practice's policies had been reviewed and updated, evidence of which we noted.
- Staff now received an appraisal of their performance and we reviewed appraisal records for the practice manager and hygienist.