

Mrs. Claire Jackman

Bottisham Dental Practice

Inspection Report

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Overall summary

During our announced comprehensive inspection of this practice on 20 June 2016 we found breaches of legal requirements of to the Health and Social Care Act 2008 in relation to regulation 17- Good Governance, and regulation 19- Fit and proper persons employed.

We undertook this focused inspection to check that the provider now met legal requirements. This report only covers our findings in relation to these requirements. You can read the report from our previous comprehensive inspection by selecting the 'all reports' link for Bottisham Dental Practice at www.cqc.org.uk

Are services Well-led?

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

Key findings

- Overall, we found that effective action had been taken to address the shortfalls identified at our previous inspection and the provider was now compliant with the regulations.

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 well-led?

We found that effective action had been taken to address shortfalls we had identified in our previous inspection. Medical emergency equipment and medicines now met national guidelines; dentists used a safer sharps system to protect themselves from injury; significant events were better recorded; staff had a good understanding of the Mental Capacity Act and recruitment procedures were more robust.

No action 

Bottisham Dental Practice

Detailed findings

Background to this inspection

We undertook an announced focused inspection of Bottisham Dental Practice on 9 February 2017. This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 20 June 2016 had been made.

We inspected the practice against one of the five questions we ask about services: is the service well-led?

A CQC inspector led the inspection. During our inspection we spoke with the practice manager and lead nurse. We reviewed a range of documentation and checked the decontamination room.



Are services well-led?

Our findings

Governance arrangements

At our previous inspection in June 2016 we found a number of shortfalls in the practice's governance procedures, which showed that the practice was not well led. During this inspection we noted the following significant improvements had been implemented since then:

- A specific significant event policy and recording form had been implemented at the practice. We reviewed three incidents that had occurred since our previous inspection and saw that they had been recorded in detail, along with any issues the incidents had raised, what had gone well, what could have gone differently and any areas of improvement needed. We also viewed staff meeting minutes of 27 September 2016 where all three incidents had been discussed with those present so that learning from them could be shared across the team. The practice manager reported that keeping a record of the incidents had helped identify improvements.
- The practice now directly received national safety alerts such as those issued by the Medicines and Healthcare Regulatory Authority (MHRA). Staff we spoke were aware of recent alerts affecting dental practice.
- The practice's sharps' policy had been updated and included guidance that staff should seek medical advice following an injury. All dentists now used a safer sharps' system, which allowed them to re-sheath needles without the need to handle them, in line with the Sharps Regulations 2013.
- The both practice manager and dental nurse assured us that all dentists routinely used rubber dam kits, as recommended by the British Endodontic Society. We saw that rubber dam kits were available in each treatment room.
- Missing emergency medical equipment had been purchased including airways of various sizes and additional adrenalin. The date on which glucagon expired had been reduced as it was not kept in the fridge.
- DBS checks had been completed for all staff and the practice now held appropriate employment information for visiting dentists.
- Heavily soiled instruments were immersed in water and we noted that pre-bath and post bath rinse bowls were in use in the decontamination room. Instruments were now kept wet in sealed containers prior to reprocessing to aid the removal of debris from them. We saw that the practice's policy had been updated to reflect this.
- A log had been implemented to better monitor and track the use of prescriptions.
- Antibiotics were clearly labelled with the practice's name and address and we viewed the label template to confirm this.
- 13 staff had completed recent training in the Mental Capacity Act and the dental nurse showed a good knowledge of its main principles.
- Patients' paper records were still not kept in locked filing cabinets but the practice manager assured us that a member of reception staff was present at all times when patients were in the building. She also stated that when the practice moved premises later in the year that the files would be kept in suitable and secure storage.

These improvements demonstrated that the provider had taken action to address the shortfalls we had identified during our previous inspection.