

Mr. John Worsley

# J M Worsley Dental Practice

## Inspection Report

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### Overall summary

We carried out an announced comprehensive inspection at JM Worsley Dental surgery on 20 October 2017 and at this time a breach of a legal requirement was found.

After the comprehensive inspection the practice wrote to us and told us that they would take action to meet the following legal requirements set out under the Health and Social Care Act (HSCA) 2008: Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, Good Governance

On 12 April 2017 we carried out a focused review of this service under section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The review was carried out to check whether the provider had completed the improvements needed and identified during the comprehensive inspection on 20 October 2016. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for JM Worsley Dental Surgery on our website at [cqc.org.uk](http://cqc.org.uk)

#### Our findings were:

We found that this practice was now providing well-led care in accordance with the relevant regulations. The improvements needed had been made.

#### Background

The practice offers private primary care dentistry to both adult patients and children. The practice is open Monday to Friday 9.30am - 5.30pm.

There are three dentists, two hygiene therapists, one hygienist, three qualified dental nurses, two trainee dental nurses and a receptionist.

The principal dentist is the registered provider. A registered provider is registered with the Care Quality Commission to manage the service. Registered providers have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the practice is run.

#### Our key findings were:

- The practice had completed a Legionella Risk Assessment in October 2016.
- The practice had completed audits for disability access, fire safety compliance and health and safety in October 2016.
- An Infection Prevention audit was completed on 25 October 2016 with the practice achieving 98% compliance.
- The electrical safety assessment of the building and a gas safety certificate were completed in December 2016.

# Summary of findings

The practice had also acted upon other recommendations:

- The practice was now registered with the appropriate bodies to receive patient safety and recall alerts
- The x-ray file had been updated to record the names of the Radiation Protection Advisor (RPA) and the Radiation Protection Supervisor (RPS) for the practice.
- The practice manager has developed an audit and equipment service calendar.

# 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 this practice was now providing well-led care in accordance with the relevant regulations. The improvements needed had been made.

**No action**



# J M Worsley Dental Practice

## Detailed findings

### Background to this inspection

We carried out a desk based review of this service under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider had completed the requirements identified during the comprehensive inspection carried out in October 2016. The checks made were to ensure the provider was now meeting the legal requirement and regulations associated with the Health and Social Care Act 2008.

This review was undertaken by a CQC Lead Inspector on 12 April 2014.

The inspection was carried out as a focused desk based review. The practice was contacted and a request was made for them to submit evidence to demonstrate that they had made the necessary improvements and were now meeting the regulation identified as being breached at the last inspection. The practice's action plan and a range of information was submitted by the practice and reviewed by the inspector.

We inspected the practice against one of the five questions we ask about services: Are services well-led. This is because the service was not meeting some legal requirements.



# Are services well-led?

## Our findings

### Governance arrangements

The practice was a member of a 'Good Practice' accreditation scheme. This is a quality assurance scheme that demonstrates a visible commitment to providing quality dental care to nationally recognised standards.

From our inspection on 20 October 2016 we found that the practice had limited governance arrangements in place to ensure risks were identified, understood and managed appropriately.

Health and safety and risk management policies were in place but we saw that risk management process were not robust to ensure the safety of patients and staff members.

During this follow up review we found action had been taken to address the shortfalls from the previous inspection:

- The practice manager had worked alongside the principal dentist to ensure robust governance arrangements to manage risk were introduced.
- The practice had undertaken audits for disability access, fire safety compliance and health and safety in October 2016.
- The electrical safety assessment and a gas safety certificate for the building were completed in December 2016.

- A Radiation Protection Advisor (RPA) and a Radiation Protection Supervisor (RPS) had been identified to ensure that the equipment was operated safely and by qualified staff only.

### Learning and improvement

From our inspection on 20 October 2016 we found that an infection control audit had not been performed as per relevant guidelines.

During this follow up review we found action had been taken to address the shortfalls from the previous inspection:

- An Infection Prevention audit was completed on 25 October 2016 with the practice achieving 98% compliance. The audit calendar supplied to us showed that this audit was to be repeated on a six monthly basis.
- The audit planner supplied to us showed that the practice had introduced audits for the composite filling success rate over a five year period for each dentist, crown fitting without any adjustment, root fillings and patient examinations.
- Results from the audit for composite fillings showed an 85% success rate.