

Mr Raj Wadhwani Burleigh Street Dentistry Inspection Report

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Overall summary

During our announced comprehensive inspection of this practice on the 29 June 2016, we found a breach of legal requirements in relation to the Health and Social Care Act 2008. Following this inspection, the practice wrote to us to say what they would do to meet legal requirements in relation to regulation 17- Good Governance.

We undertook this focused inspection to check that the provider had followed their improvement plan and to confirm that they now met legal requirements. This report only covers our findings in relation to this requirement. You can read the report from our previous comprehensive inspection, by selecting the 'all reports' link for Burleigh Street Dentistry 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 adequate action had been taken to address the shortfalls identified at our previous inspection and the provider was now meeting the regulations.

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 adequate action had been taken to address shortfalls in governance that we had identified in our previous inspection. Medical emergency equipment now met national guidelines;

No action

staff had received an appraisal of their performance and staff meetings were held regularly, recruitment procedures were more robust, and infection control had improved.



Burleigh Street Dentistry Detailed findings

Background to this inspection

We undertook an announced focused inspection Newmarket Road Dentistry on 30 September 2016. This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 29 June 2016 had been made. We inspected the practice against one of the five questions we ask about services: is the service well-led?

During our inspection we spoke with the registered manager and reviewed a range of documentation.

Are services well-led?

Our findings

Governance arrangements

At our previous inspection in June 2016, we identified a number of shortfalls across four of the five domains we inspected, which showed that the practice was not well led. During this inspection we noted the following significant improvements had been implemented since then:

- Medical emergency simulations were now undertaken regularly and we viewed the details of simulations that had taken place in June and August 2016 to ensure that staff working at the practice knew what to do in the event of an incident.
- The practice manager had purchased all missing pieces of emergency medical equipment including a self-inflating bag, facemasks, portable suction and airways of various sizes. An automated external defibrillator had also been obtained.
- Although no new staff had been employed since our previous inspection, we viewed the practice's updated recruitment policy that clearly detailed the process to follow including the requirement for interview notes to be taken and for references to be obtained.
- We viewed the infection control policy, which had been updated, since our previous inspection to accurately reflect the decontamination procedures undertaken by staff.
- A door lock had been placed in the room where dangerous chemicals were stored to ensure their security.

- The dirty looking carpet in reception had been cleaned and dust had been removed from the skylights. Cleaning equipment was now stored in line with national guidelines.
- Hot water was now available in the practice, following a repair to a fuse.
- Although we were not able to view the treatment room during our inspection, the dental nurse assured us that all loose anaesthetic cartridges were now kept covered in drawers He also confirmed that appropriate manual scrubbing of instruments occurred.
- The practice manager had introduced an additional audit to assess the quality of dental care records. This included checks that the dentist had recorded the justification and grade of x-rays, and that patients' medical histories had been recorded.
- At our previous inspection we found that staff had not received an appraisal of their performance. During this inspection we viewed completed appraisal forms for the dentist and the dental nurse.
- The practice manager had undertaken a premises equality audit and had purchased a hearing loop and reading glasses to assist patients as a result.
- Regular practice meetings were now held with staff to discuss quality issues, and to share feedback and learning. We viewed the minutes of the most recent meeting held on 21 September 2016 which was attended by all the practice's staff bar the dentist.

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