

Cadis Practice Limited

# Cadis Practice Limited

## Inspection Report

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### Overall summary

We carried out an announced inspection of this practice on 11 February 2016 where breaches of legal requirements were found. After the inspection, the practice wrote to us to say what they would do to meet legal requirements in relation to well led care and treatment.

We undertook this focused inspection to check they had followed their plan and to confirm they now met legal requirements. 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 Cadis Dental Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### **Our findings were:**

#### **Are services well-led?**

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

#### **Background**

The practice offered private dental treatment to patients of all ages. This was a single handed principal dentist supported by a dental nurse in addition to reception staff.

The principal dentist is the registered provider for the practice. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the practice is run.

The practice has one treatment room, reception/waiting area and decontamination room. The practice is open one day per week 9.00am until 5.00pm.

#### **Our key findings were:**

- The practice is now compliant with its legal obligations under Ionising Radiation Regulations (IRR) 99 and Ionising Radiation (Medical Exposure) Regulation (IRMER) 2000 including conducting regular quality audits of the X-rays.
- The practice is now compliant with Decontamination processes in accordance with HTM 01:05 guidelines: Decontamination in primary care dental practices or The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance.
- The registered provider had ensured that infection control, clinical and non-clinical record keeping were now in place.
- Emergency medicines were now in date and easily accessible and an automated external defibrillator (AED) had also been purchased to be easily accessible in an emergency.

# 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 providing well-led care in accordance with the relevant regulations.

Since the last inspection on 11 February 2016 we found that overall governance arrangements had improved. The practice had improved decontamination and emergency processes and introduced auditing systems to monitor and continually improve the quality of the service.

**No action**



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## Detailed findings

### Background to this inspection

We carried out an announced inspection of this practice on 11 February 2016 where breaches of legal requirements were found. After the inspection, the practice wrote to us to say what they would do to meet legal requirements in relation to well led care and treatment.

We undertook this focused inspection to check they had followed their plan and to confirm they now met legal requirements. 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 Cadis Dental Practice on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

# Are services well-led?

## Our findings

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

We found that overall governance arrangements had improved. For example, auditing and monitoring of emergency medicines and equipment. The practice had replaced out of date medication, introduced a monthly medicines checking system and purchased an automatic defibrillator for use in a medical emergency (AED).

There was evidence that patient clinical records had been audited in line with the guidance provided by the Faculty of General Dental Practice. We confirmed that an action plan and learning outcomes were in place to address the issues that arose. We also saw that infection prevention and control audits were now in place. The last audit was undertaken in March 2016 and action following the audit had been taken. For example a legionella risk assessment had been undertaken and water testing was now been undertaken regularly and recorded.

We found The practice is now compliant with Decontamination processes in accordance with HTM 01:05 guidelines: Decontamination in primary care dental practices or The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance. The practice now had clear separation between dirty and clean areas and access to adequate supplies of Personal Protective Equipment (PPE).

### Learning and improvement

The registered provider provided evidence to support they had implemented quality audits of the X-rays taken. We saw the process and information collated from recent 2016 audits were in accordance with the National Radiological Protection Board (NRPB). Action plans were now place to continuously improve the procedure and reduce future risks.