

Mr. Michael Dewar

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Inspection Report

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Overall summary

We carried out a follow up inspection on 2 December 2016 of Mr Michael Dewar.

We had undertaken an announced comprehensive inspection of this service on 11 February 2016 as part of our regulatory functions and during this inspection we found breaches of the legal requirements.

After the comprehensive inspection, the practice wrote to us to say what they would do to meet the legal requirements in relation to the breach. This report only covers our findings in relation to those requirements.

We checked whether they had followed their action plan to confirm that they now met the legal requirements.

We reviewed the practice against two of the five questions we ask about services; is the service effective and well led?

A copy of the report from our last comprehensive inspection can be found by selecting the 'all reports' link for Mr Michael Dewar on our website at www.cqc.org.uk.

Our findings were:

Are services effective?

We found that this practice was not providing effective care in accordance with the relevant regulations.

Are services well led?

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

Background

Mr Michael Dewar is situated in the Darnall area of Sheffield, South Yorkshire. It offers mainly NHS treatment to patients of all ages but also offers private dental treatments. The services include preventative advice and treatment and routine restorative dental care.

The practice has one surgery, a decontamination room, a waiting area and a reception area. The reception area, waiting area and the surgery are on the ground floor of the premises.

There was one dentist, one dental nurses and a practice manager (who also worked on the reception desk).

The opening hours are Monday to Friday from 9-00am to 12-30pm and from 1-45pm to 4-30pm.

Our key findings were:

- The dentist had been taking X-rays in line with current guidance from the Faculty of General Dental Practice (FGDP).
- The dentist had been recording Basic Periodontal Examinations (BPEs) in line with guidance from the British Society of Periodontology (BSP).
- We noted some inconsistencies in the use of the BPE

Summary of findings

- An Infection Prevention Society (IPS) audit had been carried out and an action plan had been formulated. The action plan had yet to be actioned.
- An audit of X-rays had yet to be completed. The X-rays which we viewed on the day of inspection were all of good quality.

We identified regulations that were not being met and the provider must:

- Ensure patients' gum health is appropriately monitored in line with the British Society of Periodontology guidance.

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 effective?

We found that this practice was not providing effective care in accordance with the relevant regulations.

Since the last inspection on 11 February 2016 the dentist had started taking X-rays in line with FGDP guidance. The dentist had also recorded a BPE for all patients where appropriate. These had not been repeated at a subsequent examination appointment.

We noted some inconsistencies in the recording of the BPEs. All patients were recorded as grade 0. This was inconsistent on what we saw on some of the X-rays. For example, we saw evidence of bone loss on X-rays which indicates an element of gum disease and calculus which would indicate a BPE score of 0 was not correct. The dentist was unsure about the process for carrying out a BPE.

Requirements notice 

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 the dentist had completed an IPS audit had been carried out. An action plan had been formulated. The action plan had not yet been implemented.

An X-ray audit had not yet been completed. However, the X-rays which we viewed were all of good quality.

No action 

Mr Michael Dewar

Detailed findings

Background to this inspection

We undertook a follow up inspection of Mr Michael Dewar on 2 December 2016. This inspection was carried out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 11 February 2016 had been made. We inspected the practice against two of the five questions we ask about services: is the service effective and safe. This is because the service was not meeting some of the legal requirements in relation to this question.

The inspection was led by a CQC inspector who was supported by a specialist dental adviser.

Before carrying out the follow up inspection, we reviewed information sent to us by the practice that told us how the concerns identified during the comprehensive inspection had been addressed.

Are services effective?

(for example, treatment is effective)

Our findings

Monitoring and improving outcomes for patients

During the inspection we looked at 32 dental care records to check whether the dentist was following current guidance.

We found that the dentist had started taking X-rays in line with FGDP guidance. These X-rays were justified, graded and reported. 31 of the 32 X-rays taken stated nothing abnormal detected. When we reviewed these X-rays we found some had evidence of dental decay and others demonstrated bone loss due to gum disease.

We found the dentist had started to record a BPE for patients. A BPE is simple and rapid screening tool used by dentists to indicate the level of treatment need in relation to a patient's gums. We saw all of the BPE scores were 0. The BSP defines a BPE score of 0 as "No pockets >3.5 mm, no calculus/overhangs and no bleeding after probing". The BPE scores recorded were inconsistent with the evidence which we saw on the X-rays. We also noted the BPE scores had not been repeated at the subsequent examination appointment. The dentist was unsure about the process for carrying out a BPE.

Are services well-led?

Our findings

Learning and improvement

The dentist had carried out an IPS audit. This audit relates to the Department of Health's guidance on decontamination in dental services (HTM01-05). This is designed to assist all registered primary dental care services to meet satisfactory levels of decontamination of equipment. An action plan had been formulated but this had yet to be implemented.

An X-ray audit had not yet been completed. The X-rays which we viewed were all well developed, of good quality and of diagnostic use. The dentist had implemented a process for checking the temperature of the developing solution to ensure X-rays were immersed for the correct amount of time to ensure the developing process was effective.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Diagnostic and screening procedures Surgical procedures Treatment of disease, disorder or injury	Regulation 9 HSCA (RA) Regulations 2014 Person-centred care How the regulation was not being met: <ul style="list-style-type: none">The registered provider did not take into account nationally recognised evidence-based guidelines in relation to the British Society of Periodontology. Regulation 9(1)