

Mr. Michael T C Wong

Dental Surgery

Inspection Report

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Overall summary

We carried out a focused inspection on 20 January 2017 at Mr Michael T C Wong's Dental Surgery.

We had undertaken an announced comprehensive inspection of this service on 21 October 2016 as part of our regulatory functions where a breach of legal requirements was found.

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

This was a desktop review and we did not revisit Mr Michael T C Wong's Dental Surgery as part of this review. We checked whether they had followed their action plan and requested documents from the provider to confirm that they now met the legal requirements.

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

At our previous inspection we had found that the practice had not established an effective system to assess, monitor and mitigate the risks relating to the health, safety and welfare of patients, staff and visitors. They had also not ensured that their audit, risk assessment and governance systems were effective.

We carried out an inspection on the 20 January 2017. Action had been taken to ensure that the practice was well-led because there were now effective system to assess, monitor and mitigate the risks relating to the health, safety and welfare of patients, staff and visitors. The provider had now ensured that their audit, risk assessment, policy updates and governance systems were effective.

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

No action



Dental Surgery

Detailed findings

Background to this inspection

This inspection was planned to check whether the practice was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

This inspection was carried out to check that improvements to meet legal requirements planned by the

practice after our comprehensive inspection on 21 October 2016 had been made. We reviewed the practice against one of the five questions we ask about services: is the service well-led?

The review was undertaken by a CQC inspector on 20 January 2017.

During our review we checked that the provider's action plan had been implemented by looking at a range of documents such as training records, audits, and policies.

Are services well-led?

Our findings

Governance arrangements

The principal dentist provided us with information about the changes to the governance arrangements at the practice since the previous inspection.

We found that there were new systems for monitoring and reducing risks to patients and staff.

For example, the practice's arrangements for managing medical emergencies had been reviewed. We found that the practice now held all relevant equipment and medicines in line with guidance issued by the Resuscitation Council UK and the British National Formulary. There was also a new system in place for receiving and responding to patient safety alerts, recalls and rapid response reports issued from the Medicines and Healthcare products Regulatory Agency (MHRA).

In addition to this, the practice had reviewed and updated its arrangements for monitoring the Control of Substances Hazardous to Health (COSHH). The principal dentist also confirmed that the decontamination procedure had been further revised with clinical staff to ensure that the practice was working in line with the guidance issued by the Department of Health - Health Technical Memorandum

01-05: Decontamination in primary care dental practices and The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance'.

There was a new recruitment policy to ensure that accurate, complete and detailed records were maintained for all staff.

Learning and improvement

The practice had carried out two, new audits since the last inspection. These covered X-ray quality and compliance with the requirements of the Equality Act 2010 in relation to potential disability discrimination. Both of these audits had successfully identified areas for action as part of a commitment to continually monitoring and improving the quality of care.

We also saw evidence confirming that staff had engaged in additional training since the last inspection with a view to ensuring that they maintained the necessary skills to meet the needs of the patients visiting the practice. For example, all staff had completed training in responding to in safeguarding children and vulnerable adults.

In summary, following our review on the 20 January 2017, we found evidence which showed that the practice was providing a well-led service.