CARE QUALITY COMMISSION

POSSIBLE PRACTICE INSPECTION QUESTIONS

The following questions have been formulated by reading the CQC reports and from feedback from members. Generally, the CQC is looking at Outcomes 1, 4, 7 and 8, although a number of reports published on its website did look at some others.

We are not sure if all of the information sought is necessarily within the CQC's remit, but these are the ones members seem to have been asked.

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Outcome 1 – Respecting and involving people who use services (Regulation 17 of the Regulated Activities Regulations 2010)

- Are treatment plans/test results discussed with the patient at a level which can be easily understood?
- Are other resources used to explain the treatment options eg leaflets, models and/or DVDs?
- Are the plans discussed in private and is there a confidentiality policy to be adhered to?
- Are wider health issues discussed eg smoking and drinking?
- Are the plans (including options and any risks) recorded in the patient record?
- Are patients given sufficient time to make decisions about their treatment?
- If the patient is receiving NHS treatment, is an FP17DC (for similar form) given to the patient, detailing the plan and its costs?
- Generally, is written information on the options and quotes available?
- Are price lists available?
- Are consent forms signed and dated?
- Are the patient records stored in lockable cabinets?
- Is there evidence of record card audits, to show the consistency of patient involvement across the practice?
- Is there information available (eg leaflets and/or website) on what services the practice provides?

- Is this information available in languages to reflect the local population?
- Is there a practice information point/leaflet available displaying a list of all the staff, emergency contact numbers (for out-of-hours cover) and opening times?
- Is there an Equality and Diversity Policy in place which all the staff understand and adhere to?
- Have the staff also aware of/been trained in the ramifications of the Mental Capacity Act?
- Are patient surveys undertaken and are the results available, with the resulting actions noted?
- Are patients encouraged to use NHS Choices website to provide feedback?
- Is there practice complaints procedure which also lists the contact details of various complaint bodies?
- Are there any records of the complaints and any actions taken as a result?

Outcome 4 – Care and welfare of people who use services (Regulation 9 of the Regulated Activities Regulations 2010)

- Is a full medical history (ie dental and social) kept on the patient and is it updated at each routine check-up appointment?
- Are children encouraged to be involved in the decision-making process about their treatment (particularly in the case of orthodontics)?
- For patients who may experience a lack of understanding, are they encouraged/supported by another competent person?
- Are all staff training in medical emergencies and basic life support?
- Is there a practice medical emergency plan in place, with all staff knowing the protocols for summoning the emergency services?
- Is there an emergency drug box and oxygen easily accessible?
- Are all the drugs checked monthly to ensure they are in date?
- Are all incidents and "near misses" recorded?
- Are these – and other such issues – discussed at staff meetings and acted upon?
- For practices with an NHS commitment, are dental practice advisor reports available?

(many of the questions apparently asked in this section appear to be similar to the section above)

Outcome 7 – Safeguarding people who use services form abuse (Regulation 11 of the Regulated Activities Regulations 2010)

- Is there a child protection and a protection of vulnerable adults policy in place?
- Does safeguarding training take place on a regular basis?
- Do staff meetings discuss this awareness and reporting procedure?
- Are staff regularly updated on the procedures for reporting any safeguarding concerns (eg how to contact local advice teams)?
- Does the practice have a copy of the DH document "Child protection and the dental team"?
- Has any training taken place regarding the "Mental Capacity Act/Mental Health Act"?
- Is there training and a practice policy concerning the general reporting of abuse?
- Are staff aware of the procedures for dealing with both physical and verbal abuse from patients/their representatives?
- Is there a "whistle-blowing" policy in place?

Outcome 8 – Cleanliness and infection control (Regulation 12 of the Regulated Activities Regulations 2010)

Is there a robust infection control policy to ensure consistency in procedures across the practice?

Is this policy signed by all staff to state an understanding of the procedures?*

Is the practice working to the Code of Practice or an equivalent?

Do clinical staff attend annual infection control training?

Does a quarterly Infection Protection Society audit take place?

Are there policies are in place as a result of HTM 01-05 guidance e.g. the safe transfer of instruments to the decontamination room?

Have there been any patient complaints about the cleanliness and infection control at the practice?

Is there a designated lead for infection control, decontamination and general cleaning?

Is this role written in the job description?*

Do infection control audits (e.g. hand washing) take place?*

Are staff aware of National Patient Safety Agency guidelines and protocols for cleaning routines that have been put in place?*

Are these routines implemented and audited?*

What infection control risk assessments have been done?

Is a comprehensive medical history taken of the patient and are all concerns regarding blood borne diseases recorded?

Is there an induction programme for all new and agency staff to ensure that all staff understand the practice's infection control procedures?

Are there training records for all infection and prevention training?

(means that the BDA has some views/reservations about these requirements)*