Yester day we had our visit from the Care Quality Commission.

We received a telephone call on Friday informing that the visit would take place the following Tuesday. I don’t work on Fridays so we really only had a day to ensure everything was in place.

As we all know there is an element of anguish when you know you are about to be inspected, however on the other hand I believe that the standards that are set by the profession should be in place and if they are nobody has anything to worry about.

Human behaviour
On the Monday the younger staff were agitated wondering if they would be asked any questions, this is just normal human behaviour. I suppose in a sense I was wishing it was over but I wasn’t concerned about the evidence that we may have been asked for.

Two ladies arrived, one being the lead, the other making notes, they were both very pleasant, and made you feel at ease. We did have a staff meeting beforehand and it was decided just to be ourselves, if we don’t pass we only have ourselves to blame. Everybody in the profession is aware of the legislation surrounding dentists and if there is a problem these inspectors should find it.

This is where I feel it for the single-handed practitioner, trying to achieve targets whilst ensuring all the admin side is up to date plus all the other evidence that is required; it’s a task for a manager.

‘Although they make it clear their intention is not meant to disrupt our day I will say that if you know you need an empty surgery or meeting room where they can be left will all the various files of legislation that we have. My own office is so small we couldn’t have accommodated them in there.

Following this, they asked to speak with the principal and three members of staff one being an apprentice nurse. The whole process took around three hours. Finally we received feedback although we weren’t concerned about the evidence, this is just normal human behaviour. We did have a staff meeting beforehand and it was decided just to be ourselves, if we don’t pass we only have ourselves to blame. Everybody in the profession is aware of the legislation surrounding dentists and if there is a problem these inspectors should find it.

This is where I feel it for the single-handed practitioner, trying to achieve targets whilst ensuring all the admin side is up to date plus all the other evidence that is required; it’s a task for a manager.

The visit started with an interview with me, the registered manager, followed by interviewing four patients with their record cards.

Although they make it clear their intention is not meant to disrupt our day I will say that if you know you need an empty surgery or meeting room where they can be left will all the various files of legislation that we have. My own office is so small we couldn’t have accommodated them in there.

Although they make it clear their intention is not meant to disrupt our day I will say that if you know you need an empty surgery or meeting room where they can be left will all the various files of legislation that we have.

The whole process took around three hours. Finally we received feedback although we were told that if anything was wrong they are not allowed to inform you how to put it right.

We were assessed on five outcomes in total.

The questions we were asked were various, they did seem to concentrate on the employment files, so if you haven’t a procedure in place now is the time to implement. In my employment folder I have template evidence of:

- Application forms for employment
- Acceptance/rejection letters
- Interview questions
- Interview assessment forms
- Letter of request for references
- Letters for Occupational Health
- CRB applications
- Evidence that employees can legally work in the UK
- Copies of Contracts
- Job descriptions
- Induction programme
- HEP B evidence
- GDC and Medical Protection
- Certificates
- Training agreement

I then have a folder which shows evidence of all the above for every member has been collected.

Disability access, emergency procedures, cleanliness of the practice and condition of chairs etc. were also mentioned.

I was also asked what was the procedure for mentoring long term existing staff in addition to apprentices.

This is just a rough idea of what to expect. I found the experience fine, they were very friendly made me feel at ease, it wasn’t a problem and certainly not worth being stressed about.

Although they make it clear that the visit is not meant to disrupt our day I will say that if you know you have everything in place you have nothing to worry about.

My next article may read different, as I await the formal report which will appear on the CQC Website.

About the author

Jane Armitage is an award-winning practice manager and has almost all years industry experience. She is currently a practice manager for Thompson & Thomas, and holds a Vocational Assessors award. She is also a BDA Good Practice Assessor, BDA Good Practice Regional Consultant, and has a BDA Certificate of Merit for services to the profession. She is her own company, JA Team Training, offering a practice management consultancy service, which includes mentorship and training. She works in all aspects of practice management with a pathway if required for managers to take their qualification in dental practice management. If you’ve any members of the early 1970s or any specific choices of topics you’d like addressed, call Jane on 01142 545546 or email ja@tiscali.co.uk.

CQC Visit - a practice manager’s perspective

Jane Armitage details when the CQC came visiting...

Q

Care Quality Commission

Fridays so we really only had a day to ensure everything was in place.

The visit started with an interview with me, the registered manager, followed by interviewing four patients with their record cards.

Although they make it clear their intention is not meant to disrupt our day I will say that if you do need an empty surgery or meeting room where they can be left will all the various files of legislation that we have. My own office is so small we couldn’t have accommodated them in there.

Following this, they asked to speak with the principal and three members of staff one being an apprentice nurse. The whole process took around three hours. Finally we received feedback although we weren’t concerned about the evidence, this is just normal human behaviour. We did have a staff meeting beforehand and it was decided just to be ourselves, if we don’t pass we only have ourselves to blame. Everybody in the profession is aware of the legislation surrounding dentists and if there is a problem these inspectors should find it.

This is where I feel it for the single-handed practitioner, trying to achieve targets whilst ensuring all the admin side is up to date plus all the other evidence that is required; it’s a task for a manager.

The visit started with an interview with me, the registered manager, followed by interviewing four patients with their record cards.

Although they make it clear their intention is not meant to disrupt our day I will say that if you do need an empty surgery or meeting room where they can be left will all the various files of legislation that we have. My own office is so small we couldn’t have accommodated them in there.

Following this, they asked to speak with the principal and three members of staff one being an apprentice nurse. The whole process took around three hours. Finally we received feedback although we weren’t concerned about the evidence, this is just normal human behaviour. We did have a staff meeting beforehand and it was decided just to be ourselves, if we don’t pass we only have ourselves to blame. Everybody in the profession is aware of the legislation surrounding dentists and if there is a problem these inspectors should find it.

This is where I feel it for the single-handed practitioner, trying to achieve targets whilst ensuring all the admin side is up to date plus all the other evidence that is required; it’s a task for a manager.