CQC Information November 2010.

All dental practices need to be fully registered by April 2011. It will be against the law for dental services to be provided from a particular location post this date if it has not been registered with the CQC. As it takes time to register practices (i.e. Principals and Practice Owners) need to react immediately to CQC contact on the registration process.

Duplication with the GDC.

It is a common comment that dentists make to say ask why must we now comply with the CQC when we already have the GDC to regulate us. This demonstrates a misunderstanding of what the 2 organisations are about. First of all the GDC regulates individuals and covers **all** DCPs, Principals, Associates and Assistants. However, the CQC regulates healthcare facilities, systems and processes and by extension, these duties lie mainly in the hands of principals and practice owners.

CQC Objective.

Furthermore the main remit of the CQC is to ensure that practices have such facilities systems and processes that ensure patients do not come to harm. In this regard as a profession we should not be so vociferous and anti in welcoming this desirable objective. The CQC are not insisting on any prescriptive way of achieving this outcome only that whatever systems are in place you able to demonstrate and satisfy the CQC requirement of **no harm to patients**.

Company Mailshots.

There have been at least 25 organisations so far identified who exist to charge dentists fees to help them comply with the CQC. Dentists need to be aware that there is **no** requirement for principals to commission these services. Help with compliance is readily available form the CQC themselves and also from the BDA for BDA members. The CQC publication; “Guidance about Compliance. Essential Standards of Quality & Safety” lists 28 outcomes for patients. In fact there are very few practices that will have to comply with all 28 and indeed there are only about 20 outcomes for most practices. You will find that as a practice much of what is required you already do especially those that already have a clinical governance package like the BDA Good Practice. Also practices that have an NHS contract and that are inspected on a 3 year rolling scheme will also find it easier.

CRB Checks.

All dentists need an enhanced CRB check.

To obtain your CRB disclosure application form

- Call the Criminal Records Bureau on 0870 90 90 811.
- Quote the registered body **name** and **number** of: **Care Quality Commission 232 443 00 003**.
- Request a criminal record disclosure check at an **enhanced level.**
- The CRB will post an application form out to your home address.

And here are a couple of further guidance links should you need them.

http://www.cqc.org.uk/guidanceforprofessionals/independenthealthcare/criminalrecordchecks.cfm

http://www.cqc.org.uk/_db/_documents/RP_PoC2B_100646_20100622_v1_00_CRB_guidance_for_HSCA_registered_providers_FOR_EXTERNAL_PUBLICATION.pdf

It is possible to get your documents validated at a crown post office and there are now 110 available across the country. In Kent we have Dartford, Ashford and Maidstone. The process is very quick as along as the queues are not long. Read the form very carefully before filling it in as it easy to make a mistake.

It is still not clear if nurses and receptionists need CRB checks. Until recently the guidance was that nurses do not need CRB checks but new legislation suggests that if a particular member of the practice carries out a “regulated activity” then they must have a CRB check. In this regard a nurse’s activities are regulated as they have to be registered with the GDC. If it becomes clear that nurses do need to be registered then it is likely that a different registered body and name will be required. Just as soon as the LDC knows we will update this information here.

November 2010.