Hot Topics

CQC Inspection Trends – Action Plan

January – March 2025

As part of our ongoing work reviewing CQC inspection reports to identify trends and common themes, we have produced this document to highlight what inspectors are looking at and flagging as areas of concern or required improvement.

It details the top ten problem topics and the top five associated evidence categories looked at over the last three months. The topics and evidence categories are itemised in the order of priority, with the most frequently commented on listed first.

It is intended to be a supportive guide that can be used as a checklist to help practices identify, review, and mark off whether they have the associated evidence in place to provide reassurance that they are inspection-ready.

It also signposts Agilio members to the relevant support available to assist them with implementing the relevant evidence.

This document does not include all topics and evidence categories; it only highlights the most common themes identified over the last quarter. It is important to note that inspectors will examine other topics and pieces of evidence not covered in this document.

If you would like further details on how Agilio can support you, please call 0330 165 9711

Authors

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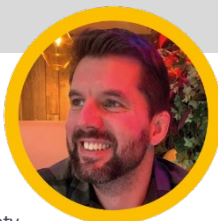
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Hot Topics CQC inspection trends

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01. Fire Safety

Fire risk assessment
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Inspectors will check that a fire risk assessment has been completed and will seek assurances that this has been done by someone competent, i.e., with the appropriate training, knowledge and experience. They will check that the assessment has been reviewed (at least annually), is up to date (reflecting any changes to the building or processes), and that any recommendations or actions have been acted on. They will also compare the assessment with their findings on the day of the inspection to verify whether the assessment is accurate and takes account of any areas of concern identified

iComply members can access a discounted fire risk assessment through one of our working partnerships

Fire exits
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Inspectors will check that all emergency routes and exits are accessible, unobstructed and appropriately signposted. They will also seek assurances from staff that they are aware of their location to ensure they can manage an evacuation from the premises in a safe and timely manner

iComply members can use M 266D to help with this

Fire safety awareness training
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Inspectors will check that all team members have received formal training in general fire safety every twelve months and will look for certified evidence in the staff records to demonstrate this

iLearn members can access the 'Fire Awareness Education' training course to help with this

Fire detection system checks
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Inspectors will check that in-house weekly inspections and testing of the fire alarm system are being carried out to verify that the system is in good working order. They will look for documented evidence of these checks and seek assurances that any concerns or actions identified have been addressed promptly

iComply members can use M 266D to help with this

Fire drills
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Inspectors will seek assurances that evacuation drills are being undertaken regularly (at least annually) and are being recorded. To verify whether the evacuation process was effective, they expect the records to contain details about the persons present, evacuation time & duration, any issues that arose, and any inappropriate behaviours observed

iComply members can use M 266E to help with this

02. Quality Improvement

Antimicrobial prescribing audit

Inspectors like to see that practices have undertaken an antimicrobial prescribing audit that reflects current guidelines from the College of General Dentistry. They expect the audit to cover whether the justification for prescribing has been documented and consider this an effective tool for practices to demonstrate quality assurance and continuous improvement in accordance with Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

iComply members can use the 'Audit of Antimicrobial Prescribing' activity to help with this

Infection prevention and control audit

Inspectors want to see that an infection prevention audit is being undertaken every six months to evidence that the practice is regularly assessing and monitoring the quality-of-service provision. They will check that the audit is aligned with HTM01-05 and will verify whether it is being undertaken effectively by cross-checking the findings of the audit with their own findings during the inspection

iComply members can use the 'Digital Tool: Audit of Infection Prevention and Control' to help with this

Radiography image quality audit

Inspectors want to see that practices have undertaken a radiograph image quality audit every six months that reflects the FGDP guidance notes for dental practitioners on the safe use of X-ray equipment. They will check that the audit is using the updated quality ratings of "diagnostically acceptable" and "diagnostically not acceptable", as well as checking that it includes a retrospective analysis of a suitable sample size of images with conclusions and learning points to help drive improvements

iComply members can use G 125C to help with this

Disability access audit

Inspectors like to see that practices have undertaken a disability access audit to help them identify where reasonable adjustments could be considered to improve access to the service and accommodate the needs of their patients. They expect the audit to include an action plan and will seek assurances that this is being acted on. They will also check the scope of the audit to ensure it covers all access requirements and caters for all forms of disability

iComply members can use the 'Digital Tool: Audit of Disability Access' to help with this

Audit action plans

Inspectors will check that an analysis of all audit results and resulting action plans has been undertaken to satisfy them that practices are learning and driving improvements where required. They will cross-examine the outcomes of the audits to verify whether they are being undertaken accurately and reflect any issues found during the inspection. They will also look for evidence of changes made to the service to reflect the outcomes and how the learnings have been shared with team members, such as through documented meeting minutes

iComply audit templates and digital tools incorporate an appropriate action plan to help with this

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03. Clinical Governance

Competence and leadership

Inspectors will check that the practice has strong leadership, that managers are competent, and that clinical management is efficient. They expect leaders to demonstrate an understanding of their roles, responsibilities, and legal requirements to support good governance and ensure that compliance arrangements are effective. This includes allocating appropriate time for governance and compliance-related duties, ensuring information is shared and cascaded effectively, promoting a transparent and open culture, and following up on comments, suggestions, and action plans to demonstrate a commitment to making continual improvements

iManage provides a remote compliance management solution that is designed to supplement and support this

Policy management

Inspectors will check that the governance system includes policies, protocols and procedures that reflect the practice arrangements and relevant regulations and guidance. They will also seek assurances that these are regularly reviewed, updated where necessary, stored in a way that can be easily accessed by all team members, and are being adhered to

iComply includes a digital policy editor, send-to-team ability, and document read tracking to help with this

Conscious sedation arrangements

Inspectors will check that practices offering conscious sedation have appropriate arrangements in place to ensure this is undertaken in accordance with current guidance issued by the Dental Faculties of the Royal College of Surgeons and the Royal College of Anaesthetists. This includes carrying out checks before and after treatment, ensuring appropriate emergency equipment is available, that medicines are being managed accordingly, that sedation equipment is subjected to the necessary in-house checks, that maintenance records are available, and that staff are trained as required

iComply members can use the 'Conscious Sedation Arrangements Review' activity to help with this

Business continuity plan

Inspectors will check that practices have a suitable business continuity plan in place that is up to date with the current contact information (e.g. local ICB instead of Primary care trusts) and is reflective of the practice protocols. This also needs to outline the procedures (contingency plan) to support staff in the case of an emergency or disaster, e.g. fire, flood, loss of power, etc. and to ensure formal arrangements are in place to ensure patients can access care in the event of practice closure

iComply members can use M 255 to help with this

MHRA registration

Inspectors will check that practices that use an external dental laboratory have documented evidence that it is registered with the Medicines and Healthcare products Regulatory Agency (MHRA) and that the dental technicians are registered with the General Dental Council (GDC). This also applies to practices that make their own dental appliances in-house and those that have access to a laboratory that is located on the same premises

iComply members can use the 'Custom-Made Medical Devices Arrangements Review' activity to help with this

04. Risk Management

Sharps risk assessment

Inspectors will check that a risk assessment has been completed for sharps safety, that this is relevant to the practice, and reflects the findings during their inspection, for example, it needs to accurately reflect the types of sharps in use, whether needle guards are being utilised, the process for dismantling/disposal, and the practice specific control measures that have been put in place to avoid the risk of needlestick injuries

iComply members can use M 250B to help with this

Lone working risk assessment

Inspectors will check that a risk assessment has been undertaken to assess, monitor, and mitigate the risks associated with staff working alone in the practice, as well as cleaners working out of hours and staff working without chairside support. They will look for evidence that appropriate control measures have been put in place to protect lone workers from physical harm, ill health or abuse

iComply members can use M 250B to help with this

Health and safety risk assessment

Inspectors will check that a general health and safety risk assessment has been carried out in accordance with Regulation 3 of the Management of Health and Safety at Work Regulations 1999 and will seek assurances that this has been done by someone competent, i.e., with the appropriate training, knowledge and experience. They will also check that the assessment has been reviewed (at least annually), is up to date (reflecting any changes to the building or processes), and that any recommendations or actions have been acted on. They will cross-examine it to ensure it reflects any hazards identified during their inspection

iComply members can use M 250B to help with this

Sepsis awareness

Inspectors will seek assurances that team members are aware of their responsibilities for identifying and managing cases of suspected or confirmed Sepsis, and will look for certified training evidence to demonstrate this

iLearn members can access the 'Sepsis in Dentistry' training course to help with this

Good housekeeping

Inspectors will check that all areas of the practice which are accessible to both patients and team members, are clean, well-lit, well-maintained and free from clutter. They will look at general housekeeping arrangements to ensure the practice is free from obvious hazards, such as poorly organised storage spaces, poorly maintained or damaged flooring, inadequate or faulty light sources, broken or damaged furniture, and unsecured access to restricted equipment or rooms (such as preventing patients from accessing decontamination facilities or cleaning storage cupboards)

iComply members can use the 'Opening and Closing the Practice Checklist Review' activity to help with this

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05. Recruitment

Recruitment policy and procedures

Inspectors will check that a recruitment policy and procedure is present to help the practice employ suitable staff, including agency or locum staff. They will check that this follows relevant legislation, i.e., Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and that it is being adhered to during the recruitment process

iComply members can use M 222H and M 233-RXO to help with this

Staff files

Inspectors will examine a sample of staff files to seek assurances that they include all the statutory evidence outlined in Regulation 19 and Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This includes a photo ID, DBS check, references, qualifications, GDC registration, full employment history, and the reason why previous employment ended (if the employment involved working with children or vulnerable adults)

iComply members can use M 249 to help with this

Immunisation records

Inspectors will check that staff recruitment files include evidence of vaccinations for clinical team members, particularly Hepatitis B antibody levels, to ensure that they have adequate immunity for vaccine-preventable infectious diseases before commencing their employment. For those who are non-responders, the inspectors will seek evidence that a suitable risk assessment has been undertaken to ensure that the appropriate control measures have been put in place to mitigate the risk of contracting such diseases

iComply members can use M 257J and M 257TA to help with this

Staff inductions

Inspectors will check that all staff have completed a structured induction programme. They will look for evidence of this, such as documented records, and expect these to contain information regarding what was discussed as part of the induction process. They expect inductions to include topics such as safeguarding, medical emergencies, and radiography. To verify this, inspectors will seek assurances from newly appointed team members that these records accurately reflect what they were inducted on

iComply members can use the 'Induction and Probation Procedures Review' activity to help with this

Professional indemnity cover

Inspectors will check that all GDC registrants have appropriate professional indemnity in place that is up to date, covers the procedures being undertaken by them and the hours they work. Where registrants are covered by someone else's indemnity, for example, a nurse being covered under the dentist's indemnity, the inspector will check that a copy of the policy has been made available to that person

iComply members can use the 'Indemnity Certificates Check' activity to help with this

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06. Workforce

Continuing professional development (CPD)

Inspectors will check that staff have completed CPD relevant to their role to maintain their registration with the General Dental Council (GDC). They will request certified evidence of the training undertaken and will check that these have not expired. Examples of the training they expect staff to have undertaken include autism & learning disability awareness, fire safety, legionella awareness, sepsis awareness, infection prevention & control, and awareness around the Mental Capacity Act

iLearn members can access a suite of training courses covering the above, plus more, to help with this

Appraisals

Inspectors will check that annual appraisals are being carried out and documented for team members and will seek assurances from staff that these provide them with the opportunity to discuss learning needs, general well-being and aims for future professional development

iComply members can use the 'Prepare for and Schedule Annual Appraisals' activity to help with this

Staff meetings

Inspectors will check that practice meetings are being regularly carried out and documented. They will check the meeting minutes to verify that a range of topics are being discussed and expect the meetings to also cover staff training needs and feedback/learnings from any events, incidents or complaints. They will also seek assurances that the meeting minutes are being shared and communicated with any team members who were not present during the meeting

iComply members can use the various 'Practice Meeting Agendas' and 'Meeting Register' to help with this

Staff training needs

Inspectors will check that GDC registered staff have a Personal Development Plan (PDP) in place and are being provided with opportunities to discuss their training needs, such as informal discussions, appraisals, one to one meetings etc. They will also seek assurances from staff that they feel supported by the practice leadership team or management to further develop themselves and take on lead roles and responsibilities where available

iComply members can use the 'Personal Development Arrangements Review' activity to help with this

Staffing levels

Inspectors will check with both patients and staff members whether they feel the practice has appropriate numbers of trained staff available to accommodate their needs and deliver effective care. They will seek assurances that the practice is not short-staffed, that there is an appropriate skill mix present, and that dental nurses are not being stretched across two roles at the same time, for example, covering both clinical and reception needs

iTeam members can use the 'Digital Rota' to help organise shift patterns, absences, and annual leave

07. Infection Prevention Control and Decontamination

Legionella temperature checks

Inspectors will check that monthly hot and cold-water temperature checks are being undertaken from the sentinel outlets (the nearest and furthest outlets). They will look for documented evidence of this and will seek assurances that the temperatures fall within the appropriate ranges as instructed by the Legionella Risk Assessment (this is usually below 20°C for cold and 55°C or above for hot outlets). Where the temperatures have been recorded outside of the ranges, inspectors will seek assurances that appropriate action has been taken to address this

iComply members can use the 'Digital Tool: Legionella temperature log' to help with this

Legionella risk assessment

Inspectors will check that a legionella risk assessment has been completed and will seek assurances that this has been done by someone competent, i.e., with the appropriate training, knowledge and experience. They will check that the assessment has been reviewed (at least annually), is up to date (reflecting any changes to the building, such as renovations or extensions), and that any recommendations or actions have been acted on. They will also compare the assessment with their findings on the day of the inspection to verify whether the assessment is accurate and takes account of any areas of concern identified

iComply members can access a discounted legionella risk assessment through one of our working partnerships

Infection prevention and control training

Inspectors will check that team members have undertaken appropriate training in infection prevention and control (disinfection and decontamination) as highly recommended by the GDC continuing professional development requirements. They will seek assurances that this has been undertaken by looking for certified evidence of this within the staff files

iLearn members can access the 'Infection Control Update' training course to help with this

Infection prevention and control policy

Inspectors will check that IPC procedures are in place and that they accurately reflect published guidance, specifically HTM 01-05. They will also check that the procedures have been adapted to account for the protocols, sterilisation processes, and equipment used in the practice. In addition, they will seek assurances that staff can demonstrate knowledge and awareness of the IPC procedures and that these have been embedded effectively, including effective hand hygiene and the appropriate use of clinical clothing/PPE

iComply members can use M 257B to help with this

Autoclave testing protocols

Inspectors will check that the periodic tests, as outlined in HTM 01-05, are being undertaken on all sterilisers, for example, steam penetration test, automatic control test, air leakage test, residual air test, etc. They will look for documented evidence of this and will seek assurances that any faults or areas of non-conformity have been identified and appropriately addressed

iComply members can use the 'Digital Tool: Autoclave daily log' to help with this

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08. Complaints, Feedback and Learning

Incident and accident management

Inspectors expect an appropriate system to be in place for reviewing and investigating incidents and accidents. They will check that all accidents, incidents, and near misses are being recorded and review any completed records to identify potential trends. They will also seek assurances that these have been acted on to manage improvements and communicated to the team to demonstrate shared learning. They expect all team members to be aware of the reporting system and will verify this with them to confirm if they can demonstrate an appropriate understanding of it

iComply members can use the 'Accident, Incident and Notification Review' activity to help with this

Complaints procedure

Inspectors will check that all complaints and concerns, both verbal and written, are managed appropriately in accordance with a written complaint-handling policy and that the procedure for raising a complaint is clearly displayed and made available for patients. They will look for evidence that complaints are being recorded and tracked, and seek assurances that the outcomes of complaints are being shared and discussed with team members to demonstrate learning and help improve the service

iComply members can use the 'Patient Complaints Policy and Procedure Review' activity to help with this

Patient feedback arrangements

Inspectors will check that the practice has embedded a range of methods for obtaining patient feedback regarding service provision and that these arrangements are suitable for patients. For example, digital feedback forms should not be relied upon as the sole mechanism, as this would not be suitable for patients who do not have access to the internet. Mechanisms for feedback they will look for include patient surveys and a comments/suggestion box, etc. They will also review social media channels for feedback, such as the practice website and Google reviews, and question patients about the service before and during their visit

iComply members can use the 'Patient Satisfaction' and 'Comments Box' activities to help with this

Feedback analysis

Inspectors will check how patient and staff feedback is managed and responded to. They expect a suitable system of analysis to be undertaken that includes a reference to the sample size, timescale of the survey, questions asked, summary of trends, and how the feedback outcomes have been embedded to demonstrate continuous improvement

iComply members can use the 'Patient' and 'Staff Satisfaction Survey' activities to help with this

Safety alerts

Inspectors will check that there is a suitable system in place for receiving, reviewing, and acting on safety alerts. They will check that team members, such as management, have signed up for relevant newsletters and alerts, including MHRA and CAS, and will seek assurances that they are being effectively recorded, disseminated to team members, and acted on as and when required to demonstrate continuous improvement and learning

iComply members can use the 'Safety Alert Management and Policy Review' activities to help with this

09. Medical Emergencies and Equipment

Emergency drugs and equipment availability

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Inspectors will physically check that all emergency medical equipment and medicines, as recommended by Resuscitation Council Quality Standards for Primary Dental Care and NICE guidelines: Medical emergencies in dental practice, are available, in date, and in good repair. They will also seek assurances that team members can access these in a timely manner; for example, they should not be locked away or located where retrieving them could delay medical assistance

iComply members can use M 254 to help with this

Emergency drugs and equipment checks

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Inspectors will seek assurances that there is a suitable system for checking emergency equipment and drugs (including oxygen and the AED) on a weekly basis as a minimum in line with the Resuscitation Council Quality Standards for Primary Dental Care guidelines. They will check that this is being documented and will cross-examine the record with the contents of the kit to ensure it is being undertaken effectively, with no items missing, in disrepair, or expired (where applicable)

iComply members can use the 'Digital Tool: Emergency drugs and equipment checklist' to help with this

Emergency resuscitation and BLS training

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Inspectors will check that all team members have completed 'hands-on' resuscitation training in the previous twelve months, in line with the Resuscitation Council Quality Standards for Primary Dental Care guidelines and the GDC's recommended CPD topics and will look for certified evidence of this in the staff records. They will also seek assurances by speaking with team members that they are able to demonstrate confidence and knowledge of how to respond to a medical emergency

iComply members can access discounted CPR training through our preferred working partnerships

Accident book

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Inspectors will check that practices have a GDPR-compliant accident book available, that this is being used, and whether any completed accident records have been separated from the book and are being stored securely. They will also review any completed records to identify potential trends and will seek assurances that any accidents have been reviewed, investigated, and acted upon

An approved accident book can be purchased directly from the Health and Safety Executive

Medical emergency management procedures

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Inspectors will check that procedures are in place for managing medical emergencies, and that team members know how to respond to a medical emergency in line with these procedures, including how to use the emergency equipment, how to administer the emergency medicines, and whether the procedures are being rehearsed through simulated medical emergency scenarios

iComply members can use the 'Medical Emergencies Review' activity to help with this

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10. Medicines Management

Prescribing, handling and dispensing medicines

Inspectors will check that suitable arrangements are in place for the safe management of medicines. This includes ensuring medicines are kept secure and implementing a recording system that details who a medicine was prescribed to, when, the quantity and batch number. They will also seek assurances that patients are being provided with information about the medicines, such as the dose and possible side effects, and will look for evidence that medicines are being correctly labelled when dispensing. In addition, inspectors will check the justification for the medicine is documented in the patient record

iComply members can use M 233-DMG to help with this

Prescription pad log

Inspectors will check that NHS prescriptions are being monitored in accordance with current guidance to track their use and prevent fraudulent misuse. They expect the log to be pre-populated with serial numbers for more effective and secure monitoring and will seek assurances from team members that they are aware of the process to follow should a prescription form go missing. They will also check that prescription forms are not being pre-stamped or pre-signed before use

iComply members can use M 268G to help with this

Antimicrobial prescribing

Inspectors are checking that antibiotic prescribing is being carried out in line with the FGDP Antimicrobial Prescribing in Dentistry guidelines. If practices are deviating from this guidance, inspectors will seek assurances that an appropriate justification has been provided and documented and will make a judgement on whether the rationale is reasonable

iComply members can use M 268 to help with this

Prescription pad storage

Inspectors will check that prescription pads are being stored securely in a lockable cupboard that is located away from public access and that the cupboard has not been labelled highlighting what is kept inside. They will also check that the forms have not been pre-stamped with the practice address or pre-written with the medicine details and that NHS prescriptions have not been provided to private patients

iComply members can use the 'Medicines Management and Arrangements Review' activity to help with this

Refrigerator temperature checks

Inspectors will check that the temperature of the fridge storing medicines is monitored and logged daily to ensure it remains between 2 and 8 degrees Celsius. If the temperatures have been recorded outside of this range, they will seek assurances that the appropriate action has been taken. They will also check that the fridge is not being used for storing other items, such as food and drink

iComply members can use the 'Digital Tool: Daily fridge temperature log' to help with this