



Business Services Authority

NHSBSA DENTAL SERVICES - PRACTICE INSPECTION ENGLAND & WALES

Inspection Requested by	
Date of Inspection	
Inspection team – Name(s): Designation:	

Part A - PRACTICE DETAILS

Provider Name(s)	
Contract Number	
Practice Address	
Post code	
Tel number	
Email	
Website	
Additional Services	Orthodontics / Sedation / Domiciliary / NHS Access Sessions
Advanced Mandatory Services	Oral Surgery / Endodontics / Periodontology / Paediatrics
Provider present	Yes / No
Provider registered with CQC / HIW	
Certificate on View?	

Part B - PRACTICE STAFF

	Dentists Name	GDC cert	Indemnity	DBS check	CPR	Hep B	IRMER	Comments
		GDC / GDS-Mandatory	GDC / GDS - Mandatory	Mandatory	GDC / RC Mandatory	DH - Mandatory	IR(ME)R Mandatory	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								

Dental Nurses Name	GDC cert	Indemnity	DBS check	CPR	Hep B	IRMER	Comments
	GDC / GDS-Mandatory	GDC / GDS Mandatory	Mandatory	GDC / RC Mandatory	DH Mandatory	IR(ME)R Mandatory	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							

	Name	GDC cert	Indemnity	DBS check	CPR	Hep B	IRMER	Comments
		GDC / GDS Mandatory	GDC / GDS Mandatory	Mandatory	GDC / RC Mandatory	DH Mandatory	IR(ME)R Mandatory	
Hygienists								
Therapists								

	Name	CPR	DBS check	Comments
		GDC / RC Mandatory	Mandatory	
Receptionists				
Practice Manager				

Part C - Written Policy Documents, Protocols and Procedures

Does the Practice have the following documents?

Safety systems and processes	Evidence Source	CQC Reg	Meeting Requirements	Partially Meeting Requirements	Not Meeting Requirements	Recommendations
Practice Risk Assessments						
Safer Sharps What does it include? • Sharps	HS	12,17				

<ul style="list-style-type: none"> • Matrix bands • Instruments • Endo single use • Scalpels 						
Legionella in accordance with ACOP L8	HTM / WHTM	12,15, 17				
Fire Risk Assessment	HS	12, 15,17				
COSHH	HS	12, 15,17				
Display Screen Equipment	HS DSA	15,17				
Lone worker risk assessment (e.g. Hygiene/Therapist)	HS	12,17				
Latex allergy	HS	12,17				
Radiation	I	12, 15,17				
Gas maintenance Certificate	HS GS					
Equipment						
Rubber Dam for Endodontics	GDC/ ESE	12, 15				
Service records for decontamination equipment	HTM / WHTM	12, 15,17				
Electrical 5 year fixed wire safety certificate	E	12, 15				
Portable Appliance Testing (1-5 years)	W					
Gas Maintenance Certificate	HS GS					

Fire equipment maintained in accordance with fire risk assessment	FS	12, 15				
Amalgam separator in place	CW	12, 15				
Encapsulated amalgam used	CW	12, 15				
Safe needle recapping system in place	HS	12, 15				
Safeguarding						
Local safeguarding policy, protocols and safeguarding authority contact details	CP CSA	13				
Safeguarding Lead	CP CSA	13				
Safeguarding training (Level 2)	CP CSA	13				
Incident Reporting						
Local System for Invasive Procedures Protocol (wrong site surgery)	LocSSIP	12,17				
How/where are concerns about adverse reactions to drugs reported?	MHRA	12,17				
Accident Book – HSE address, telephone phone and protocol.	RIDDOR	12,17				
RIDDOR protocol	RIDDOR	12,17				
Reporting notifications to CQC	CQC					
Medicines Management						
System for preventing theft and inappropriate use of NHS prescription pads	GDS	12,17				

Is there a system in place to ensure all drugs / syringes and needles are in date and a log book to show that regular checks are carried out?	RC	12,17				
Information Governance						
IG Policy in accordance with GDPR	GDPR / DP	17				
Privacy Notice Displayed	GDPR / DP	17				
Completion of IG tool Kit	GDPR	17				
DPO in place	GDPR / DP	17				
Clinical Records securely stored	GDPR / DP	17				

Part D – Radiation in Dental Practice

The Ionising Radiation Regulations 2017 and Ionising Radiation (Medical Exposure) Regulations 2017 cover all the requirements for radiographic equipment in a practice.

Safety Systems and Processes	Evidence Source	CQC Reg	Meeting Requirements	Partially Meeting Requirements	Not Meeting Requirements	Recommendations
Registration with HSE for Radiation in accordance with IRR 2017	I	17,15				
Evidence that the provider has consulted with an RPA/MPE.	I	12,17				
Has the provider documented the arrangements for radiation protection (such as in a radiation file/folder)?	I	12,17				

<p>Ask to see evidence that the provider has in place 'Local Rules'. This should make reference to:</p> <ul style="list-style-type: none"> • radiation-controlled areas access restriction • working instructions • personnel monitoring safe machine operation • equipment malfunction contingency plan 		12,17, 15				
<p>Ask to see evidence of a written examination 'protocol' defining what settings the X-ray machine is used on for each standard projection.</p>		12,17, 15				
<p>Is the radiography equipment subject to QA / performance testing? For 'new' equipment enquire whether there has been a "Critical Examination" by the installer AND an 'Acceptance Test' by the RPA/MPE.</p>		12,17, 15				
<p>Ask to see evidence that routine Quality Assurance [QA] measurements on intra-oral equipment have been carried out by the RPA/MPE every 3 years?</p> <p>Ask to see evidence in the form of a contract or service sheets,</p> <p>Ask to see evidence that any recommendations have been acted on.</p>		12,17, 15				
<p>The provider should be able to give evidence they carry out simple 'in-house' functional checks' on x-ray equipment 'at suitable intervals' (which may be every 6 months).</p>		12,17, 15				

These tests may include the correct operation of safety and warning systems as well as spring balance checks (on intra-oral equipment). Tests of associated equipment traditional film processing (records of film stocks/speed, processor chemical changes),						
X-ray sets must be located in surgeries or separate imaging rooms NOT in public areas or corridors.	I	12,17, 15				
Are x-ray sets activated using a remote controlled x-ray switch? This must be able ONLY to activate a single x-ray machine. Ask if it is possible for it to activate a second machine at the same practice.	I	12,17, 15				
Intra-oral equipment machines, including hand-held devices should be fitted with a rectangular rather than a circular profile collimator.	I	12,17, 15				
Clinical Audit: Image Quality Checks. Ask for evidence that the dentist carries out periodic checks of image quality/reject analysis	I GDS	12,17				
For new or other specialized dental equipment such as hand held intra-oral units or cone beam CT [CBCT] there should be evidence of both 'theoretical' training (perhaps AND have received 'practical' training (usually provided by the equipment supplier) along with the instructions for use for the equipment.	I	12,17, 15				

Dental Cone Beam Computed Tomography (CBCT) machine

Safety Systems and Processes	Evidence Source	CQC Reg	Meeting Requirements	Partially Meeting Requirements	Not Meeting Requirements	Recommendations
<p>What guidance are they following in the use of the equipment? Answer should be: Guidance on the Safe Use of Dental Cone Beam (Computed Tomography) Equipment 2010</p> <p>Are they aware of the changes with IRMER18 and IRR18?</p>		12,17, 15				
<p>Did they consult their RPA prior to purchase and installation?</p>		12,17				
<p>Annual routine test: Dental CBCT units should be subject to an annual routine test</p>		12,17, 15				
<p>Regular tests: monthly</p> <ul style="list-style-type: none"> • Do they use a phantom • Image noise • Image density values • Image uniformity • Image display monitor condition • Image display monitor distance calibration • Image display monitor resolution 		12,17, 15				
<p>QA programme? IRR 99</p> <ul style="list-style-type: none"> • Monthly QA checks on image quality and display screen: (not more than 5% diagnostically unacceptable) what would they do if it was above 5%? 		12,17				

<ul style="list-style-type: none"> • Six monthly audits? What for? Any actions taken to improve performance? • Carry out patient dose audits with the help of the MPE 						
Operator training: Core: 3hrs theory, 2hrs rad interpretation, 6hrs practical Refresher training- 1 hour in CPD cycle	I	12,17,18				
SLA in place from referring practices? <ul style="list-style-type: none"> • The legal person should make a decision which dental surgeons it is appropriate to accept referrals from this must be documented. • How do they ensure that referrers provide enough clinical information to justify the exposure? • Are referrers provided with referral criteria? • Are the referrers trained to interpret the image? 	I	12,17				
Understanding of HSE notification where patient receives high dose (>10 times the dose)	I	12,17				

Dental lasers (Class 3B and 4)

For Class 3B and 4 Lasers used in dental practice the Control of Artificial Optical Radiation at Work Regulations 2010 (CAOR) apply.

Safety Systems and Processes	Evidence Source	CQC Reg	Meeting Requirements	Partially Meeting Requirements	Not Meeting Requirements	Recommendations
Is the practice registered with CQC/HIW?	CAOR					

<ul style="list-style-type: none"> • Laser Protection Advisor (LPA) in place • Local rules • Policies • Safety measures • PPE staff and patients, eye Mirrors/windows covered • Do not enter sign on the surgery door • Staff trained • Risk assessments 	CAOR	12,17,15,18				
--	------	-------------	--	--	--	--

Part E – Dealing with medical emergencies

Safety Systems and Processes	Evidence Source	CQC Reg	Meeting Requirements	Partially Meeting Requirements	Not Meeting Requirements	Recommendations
Is there a process to identify and follow up risky patients? E.g. swelling, Accident & Emergency if doesn't resolve. What systems are in place to enable assessment of patients with presumed sepsis in line with NICE guidance and Quality Standards?	RC/NICE	12				
Is there an appointed First Aider?	FA					
Is there a first aid kit?	FA					
Equipment and medicines as per British National Formulary (BNF) and resuscitation council guidance.	RC/BNF	12, 15				
Resuscitation Equipment:	RC/BNF					

<ul style="list-style-type: none"> • Pocket mask with oxygen port • Portable suction • Oropharyngeal airways (sizes 0, 1, 2, 3, 4). • Self-inflating bag with reservoir – Adult / Child • Clear face masks for self-inflating bag (sizes 0, 1, 2, 3, 4). • Portable oxygen cylinder (C/D size) integral valve cylinder contains 460lts • Oxygen face mask with reservoir and tubing – Adult / Child • Spacer’ device for inhaled bronchodilators or cup • Automated External Defibrillator (AED) 						
Do any dentists undertake domiciliary visits– do they take the required equipment with them?	RC/GDC	12, 15				
Emergency Drugs: <ul style="list-style-type: none"> • Glyceryl trinitrate (GTN spray)(400 micrograms /dose) • Salbutamol aerosol inhaler (100micrograms / actuation) 	RC	12, 15				

<ul style="list-style-type: none"> • Adrenaline injection (1:1000, 1mg/ml) • Child Adrenaline dose available • Aspirin dispersible (300mg) • Glucagon injection 1mg • Oral glucose solution / tabs / gel / powder • Midazolam 10mg (buccal) • Single use syringes and needles available for use with ampules? 						
Logs in place to record checks? <ul style="list-style-type: none"> • AED • Drugs • Equipment • O2 	RC	12, 17				
Training to appropriate level (Basic Life Support (BLS) or Immediate Life Support (ILS) if providing sedation)	RC	18				

Part F – Decontamination of Instruments and compliance with HTM 01-05

Safety Systems and Processes	Evidence Source	CQC Reg	Meeting Requirements	Partially Meeting Requirements	Not Meeting Requirements	Recommendations
Number of Autoclaves... Type of Autoclave – Type B Vacuum... Type N pressure...	HTM WHTM	12,15				

Type S...						
Scheme of maintenance for each autoclave?	HTM WHTM					
Inspection certificate for each autoclave (max interval 14 months)	HTM WHTM					
Daily Maintenance programme: <ul style="list-style-type: none"> • Log books for each machine • 'Start of day' checks carried out • 'End of day' checks carried out (including emptying of water reservoir) 	HTM WHTM	12,15,17				
Pre-sterilisation cleaning methods: <ul style="list-style-type: none"> • Washer-disinfector • Ultrasonic bath • Manual cleaning 	HTM WHTM	12,15				
Is there a magnification lamp available for cleaning and inspection of instruments? Is there a thermometer available (45 degrees max)? Does the room have clearly designated dirty/clean areas?	HTM WHTM					
How are Impressions disinfected?	HTM WHTM	12,15				
Are dental laboratories registered with MHRA?	HTM WHTM					
PPE: <ul style="list-style-type: none"> • Apron, Heavy duty gloves, mask, visor all available? • Is PPE changed weekly? 	HTM WHTM					

• Is there a log book for this?						
Are there dedicated hand washing facilities?	HTM WHTM	12,15				
Are there two dedicated sinks for decontamination or two bowls incorporated into one single unit for instrument cleaning?	HTM WHTM	12,15				
Is there separation of instrument processing from other clinical work?	HTM WHTM	12,15				
Are instruments bagged and dated and used within specified time of processing?	HTM WHTM	12,15				
How are instruments transported between surgeries and the decontamination room?	HTM WHTM	12,15				
Are routine audits of infection control requirements undertaken?	HTM WHTM	17				
Has all staff undertaken decontamination training?	HTM WHTM	18				

PART G – Handling, Storage and Disposal of Hazardous Waste

Requirement	Evidence Source	CQC Reg	Meeting Requirements	Partially Meeting Requirements	Not Meeting Requirements	Recommendations
Waste: Contracts for disposal of and consignments notes for: <ul style="list-style-type: none"> • Clinical (hazardous) waste • Sharps • Non-hazardous waste (transfer notes) 	CW	12,15				
In Surgery:	CW	12,15				

<p>Hazardous waste –</p> <ul style="list-style-type: none"> • Orange bags used? • Sharps containers - wall mounted? • Amalgam – white container available? • Extracted teeth <ul style="list-style-type: none"> - With amalgam (hazardous waste) - Without amalgam (sharps yellow container) • X-ray processing chemicals and foils? • Unused medicines <p>Non-hazardous waste –</p> <ul style="list-style-type: none"> • separate bin available 						
<p>Waste awaiting disposal out of surgery:</p> <ul style="list-style-type: none"> • Hazardous waste • Amalgam • Study Models and Gypsum • Non-hazardous waste <p>Security of waste</p>	CW	12,15				

Amalgam separation	CW	12,15				
Mercury: • Mercury spillage kit available • Mercury handling policy available	CW	12,15				

Part H - Clinical Facilities

Surgery number:

Primary User: Dentist / Hygienist / Therapist

Requirement	Evidence Source	CQC Reg	Meeting Requirements	Partially Meeting Requirements	Not Meeting Requirements	Recommendations
Overall, are Clinical areas clean, tidy and clutter free?	GDS HTM WHTM	12,15				
Floor – clean and sealed at edges?	GDS HTM WHTM	12,15				
Work Tops easily cleansable, clutter free and sealed at edges?	GDS HTM WHTM	12,15				
Water supply isolation	WSF	12,15				
Cabinetry – easily cleansable, and in good condition	GDS HTM WHTM	12,15				
Small equipment: • Amalgamator • Curing light • Laser • Loupes - do they have independent lighting?	GDS	12,15				

Instruments: <ul style="list-style-type: none"> • Hand instruments – rust free • Hand instruments bagged and dated • LA syringes – aspirating? • Film holding devices available 	HTM WHTM	12,15				
PPE: <ul style="list-style-type: none"> • Gloves • Visor • Masks • Eye protection for patient • Patient bib 	HTM WHTM PPE	12,15				
Disposable Items: <ul style="list-style-type: none"> • Gloves – latex, powder free • Masks • Patient bibs • Needles • LA cartridges • Endodontic files • Impression trays • Matrix bands • 3-in-1 syringe tips • Suction tubes 	HTM WHTM	12,15				
Handpieces: Sufficient numbers of: <ul style="list-style-type: none"> • Turbines, • Contra-angles • Straight • Ultrasonic scaler and tips 	GDS	12,15				
Needle re-sheathing device	GDS	12,15				
Dental materials within expiry date	GDS	12,15				
Is there a system and log-book in place to	GDS	12,15,1				

ensure out-of date materials are disposed of?		7				
Is there evidence to show that the practice is complying with clinical guidelines regarding amalgam – not to be used on children under the age of 15 or pregnant / nursing mothers without sound clinical reasons	AR					
Compressor: Inspection certificate (maximum 24 months) Scheme of maintenance certificate	PV	12,15,17				

Part G – Intravenous Conscious Sedation

Safety Systems and Processes	Evidence Source	CQC Reg	Meeting Requirements	Partially Meeting Requirements	Not Meeting Requirements	Recommendations
Are the main recovery and waiting areas separate?	IACSD	12,15				
Is there access for emergency services to the building/treatment room?	IACSD	12,15				
Is there space in the treatment room around the dental chair to deal with an emergency?	IACSD	12,15				
Can the dental chair be placed in a head down tilt position?	IACSD	12,15				
Does the practice follow a recognised sedation protocol?	IACSD	12				
Are patients normally assessed for suitability for sedation at a preceding appointment?	IACSD	12				
Are recognised discharge criteria followed?	IACSD	12				

Does the sedationist discharge the patient?	IACSD	12				
Are patients provided with emergency contact information?	IACSD	12, 17				
Are patients given written pre- and post-operative instructions?	IACSD	12,17				
Are the following noted and checked prior to the sedation? <ul style="list-style-type: none"> • Medical, dental and social histories • Previous sedations/Gas • ASA category (Normally 1 or 2?) • Pre- operative vital signs including blood pressure • Dental treatment required 	IACSD	12				
Is written consent obtained prior to the day of the sedation?	IACSD	11,9				
Is a contemporaneous record kept of the administration of sedation?	IACSD	17				
Is a cannula normally used to secure intravenous access?	IACSD	12				
Is midazolam administered by titration to a recognised sedation end point?	IACSD	12				
Is a pulse oximeter used throughout? Does it <ul style="list-style-type: none"> • Measure continuously? • Alarm if the oxygen saturation drops? 	IACSD	12,15				
Is there equipment for measuring blood pressure?	IACSD	12,15				
Is monitoring equipment serviced and calibrated in line with manufacturers' recommendations?	IACSD	12,15				
Are drug labels for syringes available?	IACSD	12,15				

Can supplemental oxygen be given?	IACSD	12,15				
Is Flumazenil (reversal agent for Midazolam) available and in date?	IACSD	12,15				
Are emergency Oxygen and a backup cylinder available?	IACSD	12,15				
Are emergency medicines and equipment available and in date, in line with the recommendations of the BNF and Resuscitation Council UK?	IACSD	12,15				
Can all sedationists demonstrate training in sedation?	IACSD	18				
Can all DCPs assisting demonstrate training in sedation?	IACSD	18				
Can all recovery staff (if applicable) demonstrate training appropriate to their duties?	IACSD	18				
Have all staff involved in sedation received training in immediate life support and/or paediatric immediate life support. Or equivalent training?	IACSD	18				
How often is emergency training provided? Date?	IACSD	18				
Is relevant and up to date clinical audit being completed in respect of sedation?	IACSD	17				
Is all appropriate schedule 3 information available for any visiting sedationists?	IACSD	19				
Are sedationist and nurse up to date with CPD.	IACSD	18				

Part G (Cont) – Additional Information for Inhalation Conscious Sedation

Safety Systems and Processes	Evidence Source	CQC Reg	Meeting Requirements	Partially Meeting Requirements	Not Meeting Requirements	Recommendations
Is there a dedicated Inhalation Sedation machine? (IS machine)	IACSD	12,15				
Does it have the following features? <ul style="list-style-type: none"> Minimal delivery of 30% Oxygen Emergency nitrous oxide cut-off 	IACSD	12,15				
Is the IS machine checked by a suitably qualified and experienced member of staff before each session?	IACSD	12,15				
Does the practice have a method of scavenging waste gases?	IACSD	12,15				
Is equipment serviced in line with manufacturers' guidelines?	IACSD	12,15				
Service date?		12,15				
Can supplemental oxygen be given?	IACSD	12,15				
Are the gases stored appropriately?	IACSD	12,15				
Are emergency Oxygen and a backup cylinder available?	IACSD	12,15				

Part H – Domiciliary Care

Safety Systems and Processes	Evidence Source	CQC Reg	Meeting Requirements	Partially Meeting Requirements	Not Meeting Requirements	Recommendations
Are there any policies and procedures specifically for domiciliary care?	BSDOH	12,17				
What clinical procedures are completed during	BSDOH	12				

domiciliary visits? Extractions? Fillings? Dentures? Radiography? Anything else?						
How does the dentist risk assess the patient and environment?	BSDOH	12,17				
What dental equipment does the dentist take on domiciliary care visits? Portable drill? Hand held X-ray machine? Lighting?	BSDOH	12,15				
Administrative Identification badges Patient records- and how are they transported and stored. Laboratory forms Consent forms FP17DC forms Medical history forms and how to they ensure they have an accurate medical history if the patient is confused or lacks capacity? Prescription sheet and stamp: Record of numbers in case of theft (if NHS) BNF List of contact numbers (Lone Working) Health promotion literature	BSDOH GDS	17				
Does the dentist ask about the patient's status with regard to the MCA?	BSDOH	13,9,11				

<p>What steps does the dentist take to find out if there is anyone with power of attorney?</p> <p>Does the dentist ask to see any evidence that the patient has capacity (for example capacity assessment)?</p> <p>If there is someone who claims to have power of attorney – does the dentist verify this through checking the paper work?</p>						
How are clean and dirty instruments transported on the domiciliary care visit?	HTM WHTM	12				
What emergency equipment and drugs are taken on domiciliary care visits? Informed by a risk assessment?	RC GDC	12,15				
How are sharps managed during domiciliary care visits?	HTM WHTM	12,15				
Mental capacity assessments	BSDOH	13,9,11				
Do they complete them for every vulnerable patient?						
How does the dentist assure themselves that the patient has capacity?	BSDOH	13,9,11				
If the patient lacks capacity and a relative (for example) has power of attorney what steps will the dentist take to ascertain this?	BSDOH	13,9,11				
Does the dentist routinely contact any other family member either before or after the visit?	BSDOH	13,9,11				

Summary of Recommendations:

Partially Meeting Requirements	Recommendations:
Not Meeting Requirements	Recommendations:

Appendix A- Regulations used in this document:

AR	• Article 10(2) of Regulation (EU) 2017/852 on Mercury.
BNF	• British National Formulary
BSDOH	• British Society for Disability and Oral Health
CAOR	• Control of Artificial Optical Radiation at Work Regulations 2010
C	• Control of Substances Hazardous to Health Regulations 2002
CP	• Working Together to Safeguard Children “A guide to interagency working to safeguard and promote the welfare of children” 2018 • All Wales Child Protection Procedures • All Wales Safeguarding Adult Policy and Procedures
CSA	• Care Standards Act 2014
CQC	• Care Quality Commission

CW	<ul style="list-style-type: none"> • EU Waste Framework Directive 2011 • The Controlled Waste Regulations 2012 • The Environmental Protection Act 1990 • The Environmental Protection (Duty of Care) Regulations 1991 • The Carriage of Dangerous Goods and Use of Transportable Pressure Receptacles Regulations 2017
DP	<ul style="list-style-type: none"> • Data Protection Act 2018
DSA	<ul style="list-style-type: none"> • Health and Safety (Display Screen Equipment) Regulations 1992
E	<ul style="list-style-type: none"> • The Electricity at Work Regulations 1989
ESE	<ul style="list-style-type: none"> • Quality guidelines for endodontic treatment: European Society for Endodontology
FA	<ul style="list-style-type: none"> • Health and Safety (First Aid) Regulations 2018
FS	<ul style="list-style-type: none"> • The Regulatory Reform (Fire Safety) Order 2005
GDC	<ul style="list-style-type: none"> • General Dental Council
GDPR	<ul style="list-style-type: none"> • General Data Protection Regulation
GDS	<ul style="list-style-type: none"> • The National Health Service (General Dental Services Contracts) Regulations 2005 • The National Health Service (General Dental Services Contracts) (Wales) Regulations 2005
GS	<ul style="list-style-type: none"> • Gas Safety (Installation and Use) Regulations 1998
HIW	<ul style="list-style-type: none"> • Health Inspectorate Wales
HS	<ul style="list-style-type: none"> • Health and Safety at Work Act 2015 • Health and Safety (Sharp Instrument in Healthcare) Regulations 2013
HTM / WHTM	<ul style="list-style-type: none"> • Department of Health – Health Technical Memorandum 01-05: Decontamination in primary care dental practices, 2013 • NHS Wales – Welsh Health Technical Memorandum 01-05: Decontamination in primary care dental practices and community dental services, 2014
IACSD	<ul style="list-style-type: none"> • Intercollegiate Advisory Committee for Sedation in Dentistry 2015
I	<ul style="list-style-type: none"> • Ionising Radiation (Medical Exposure) Regulations 2017
LocSSIP	<ul style="list-style-type: none"> • Local Safety Standards for Invasive Procedures (Dentistry) Royal College of Surgeons
MD	<ul style="list-style-type: none"> • Misuse of Drugs (Safe Custody)(Amendment) Regulations 2007
MDR	<ul style="list-style-type: none"> • Medical Devices Regulations 2002
MHRA	<ul style="list-style-type: none"> • Medicines and HealthCare Products Regulatory Agency
NICE	<ul style="list-style-type: none"> • National Institute for Healthcare Excellence

PPE	<ul style="list-style-type: none"> • Personal Protective Equipment at Work Regulations 1992
PV	<ul style="list-style-type: none"> • Pressure Systems Safety Regulations 2000
RC	<ul style="list-style-type: none"> • Resuscitation Council (UK) • https://www.resus.org.uk/quality-standards/primary-dental-care-quality-standards-for-cpr/ • https://www.resus.org.uk/quality-standards/primary-dental-care-equipment-list/
RIDDOR	<ul style="list-style-type: none"> • Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
W	<ul style="list-style-type: none"> • Workplace (Health, Safety and Welfare) Regulations 1992
WSF	<ul style="list-style-type: none"> • Water Supply Fittings Regulations 1999

Appendix B- CQC Regulations:

Regulation 9: Person-centred care

Regulation 11: Need for consent

Regulation 12: Safe care and treatment

Regulation 13: Safeguarding service users from abuse and improper treatment

Regulation 15: Premises and equipment

Regulation 17: Good governance

Regulation 18: Staffing

Regulation 19: Fit and proper persons employed