

Announced Variation to Registration Inspection Report 06 March 2017



Loughry Dental Practice

Type of service: Independent Hospital (IH) - Dental Treatment

Address: Unit 2, 3a Killycolp Road, Cookstown, BT80 9AD

Tel no: 028 8676 1108

Inspector: Elizabeth Colgan

1.0 Summary

An announced inspection of Loughry Dental Practice took place on 6 March 2017 from 09.45 to 11.00. Mr Raymond Sayers, estates inspector, undertook a premises inspection on the same day. The report and findings of the premises inspection will be issued under separate cover.

Loughry Dental Practice was registered with RQIA as an Independent Hospital providing dental treatment with effect from 17 November 2014. An application for variation of the registration of the practice was submitted to RQIA by Mr Adam Jeffers, registered person. The application was to increase the number of registered dental chairs from two to three.

The inspection sought to assess progress with any issues raised during and since the previous inspection and to review the readiness of the practice for the provision of private dental care and treatment associated with the application of variation for one additional dental chair.

The variation to registration application was approved from both a care and estates perspective following this inspection.

This inspection was underpinned by The Independent Health Care Regulations (Northern Ireland) 2005, The Regulation and Improvement Authority (Independent Health Care) (Fees and Frequency of Inspections) (Amendment) Regulations (Northern Ireland) 2011 and the Department of Health, Social Services and Public Safety (DHSSPS) Minimum Standards for Dental Care and Treatment (2011) or The Minimum Care Standards for Independent Healthcare Establishments (July 2014).

While we assess the quality of services provided against regulations and associated DHSSPS care standards, we do not assess the quality of dentistry provided by individual dentists.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Mr Adam Jeffers, registered person as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

1.2 Actions/enforcement taken following the most recent variation to registration inspection

There were no further actions required to be taken following the most recent inspection.

2.0 Service details

Registered organisation/registered person: Mr Adam Jeffers	Registered manager: Mr Adam Jeffers
Person in charge of the practice at the time of inspection: Mr Adam Jeffers	Date manager registered: 17 November 2014
Categories of care: Independent Hospital (IH) - Dental Treatment	Number of registered places: 2 increasing to 3 following inspection

3.0 Methods/processes

The methods/process used in this inspection included the following:

- review of the submitted variation to registration application
- discussion with Mr Jeffers, registered person
- discussion with staff
- assessment of the environment
- review of documentation required by legislation and good practice
- evaluation and feedback

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 21 July 2016

The most recent inspection of the establishment was an announced care inspection. The completed QIP was returned and approved by the care inspector.

4.2 Review of requirements and recommendations from the last care inspection dated 21 July 2016

Last care inspection statutory requirements		Validation of compliance
Requirement 1 Ref: Regulation 19 (2) Schedule 2 Stated: First time	The registered provider must ensure that an enhanced AccessNI check is undertaken and received in respect of any new self-employed staff prior to commencing work in the practice.	Met
	Action taken as confirmed during the inspection: Review of the personnel file of a newly recruited member of staff evidenced that an enhanced AccessNI check had been undertaken and received in respect of the new self-employed staff prior to commencing work in the practice.	

Last care inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 11 Stated: First time	A system should be established to ensure that the professional indemnity of any self-employed staff is reviewed on their anniversary.	Met
	Action taken as confirmed during the inspection: Review of documentation evidenced that a system has been put in place to ensure that the professional indemnity of any self-employed staff is reviewed on their anniversary.	
Recommendation 2 Ref: Standard 11 Stated: First time	The relevant recruitment information as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 should be sought and retained in respect of any new self-employed practitioners prior to them commencing work in the practice.	Met
	Action taken as confirmed during the inspection: Review of the personnel file of a newly recruited member of staff evidenced that the relevant recruitment information as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 had been sought and retained in respect of the new self-employed practitioner prior to them commencing work in the practice.	
Recommendation 3 Ref: Standard 13.4 Stated: First time	Establish a system to ensure that decontamination equipment is validated on an annual basis in keeping with Health Technical Memorandum (HTM) 01-05.	Met
	Action taken as confirmed during the inspection: Review of documentation evidenced that decontamination equipment was validated on 24 November 2016. A system is in place to undertake this validation on an annual basis in keeping with Health Technical Memorandum (HTM) 01-05.	

4.3 Inspection findings

4.3.1 Statement of Purpose

A statement of purpose was prepared in a recognised format which covered the key areas and themes outlined in regulation 7, schedule 1 of The Independent Health Care Regulations (Northern Ireland) 2005.

4.3.2 Patient Guide

A patient guide was available in a recognised format which covered the key areas and themes specified in regulation 8 of The Independent Health Care Regulations (Northern Ireland) 2005.

4.3.3 Infection prevention and control/decontamination

The refurbishment of the practice included the establishment of an additional dental surgery within a previously unused room. Review of this dental surgery evidenced that the room had been refurbished and equipped to a high standard and is compliant with HTM 01-05 best practice guidance.

The arrangements in regards to the newly established third dental surgery were reviewed. It was observed that the flooring in the new surgery was impervious and coved where it meets the walls and kicker boards of cabinetry. The surgery was tidy and uncluttered and work surfaces were generally intact and easy to clean.

Sharps boxes were safely positioned to prevent unauthorised access and had been signed and dated on assembly.

A dedicated hand washing basin is available in the dental surgery and adequate supplies of liquid soap, paper towels and disinfectant rub/gel were available. It was observed that a laminated /wipe-clean poster promoting hand hygiene was on display.

Staff confirmed that the newly installed dental chair has an independent bottled-water system and that the dental unit water lines (DUWLs) will be appropriately managed.

Personal protective equipment (PPE) was readily available.

The clinical waste bin in the surgery was in keeping with best practice guidance. Appropriate arrangements are in place in the practice for the storage and collection of general and clinical waste, including sharps waste.

Staff confirmed that the practice has sufficient dental instruments to meet the needs of the new surgery once it is operational.

A decontamination room separate from patient treatment areas and dedicated to the decontamination process is available.

Appropriate equipment, including a washer disinfector and a steam steriliser have been provided to meet the practice requirements. Mr Jeffers confirmed that the decontamination equipment will be sufficient to meet the needs of the three operational surgeries.

4.3.4 Environment

A tour of the some of the premises was undertaken, including the newly established third dental surgery. The premises were maintained to a good standard of maintenance and décor.

4.3.5 Radiology

An intra-oral x-ray machine has been installed in the new surgery. Review of the radiation protection file evidenced that a critical examination of the x-ray unit had been undertaken by the appointed radiation protection advisor (RPA) on 21 February 2017 and any recommendations made have been addressed. The local rules were on display and were signed by staff to confirm they have read and understood these. Mr Jeffers stated that the new associate dentist will sign the local rules on commencement of work in the practice.

4.3.6 Recruitment of staff

An associate dentist has been appointed to commence work on 8 March 2017. Mr Jeffers confirmed that he is in the process of recruiting a new dental nurse. Review of the personnel file of a newly recruited member of staff evidenced that the relevant recruitment information as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 had been sought and retained in respect of the new self-employed practitioner prior to them commencing work in the practice

4.3.7 Conclusion

The variation to the registration in regards to the increase in dental chairs from two to three was approved, by both the care inspector and the estates inspector, following this inspection.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
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5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the registered provider from their responsibility for maintaining compliance with the regulations and standards.



The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email info@rqia.org.uk

Web www.rqia.org.uk

 @RQIANews