

# **Announced Variation to Registration Care Inspection Report**

**16 November 2018**



## **David Reaney & Associates LTD t/a Bridge Dental**

**Type of Service: Independent Hospital (IH) – Dental Treatment**

**Address: 211 Albertbridge Road, Belfast, BT5 4PU**

**Tel No: 028 9691 9777**

**Inspector: Carmel McKeegan**

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Assurance, Challenge and Improvement in Health and Social Care

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 service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

## 1.0 What we look for



## 2.0 Profile of service

This is a registered dental practice with one registered place providing general dental care and treatment. An application to vary the registration of the practice to increase the number of dental chairs from one to two has been submitted to RQIA. Additional information in this regard can be found in Section 5.0 of this report.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> David Reaney & Associates Ltd t/a Bridge Dental  <b>Responsible Individual:</b> Mr David Reaney	<b>Registered Manager:</b> Mr David Neill
<b>Person in charge at the time of inspection:</b> Ms Gill Fairley, practice manager	<b>Date manager registered:</b> 06 September 2018
<b>Categories of care:</b> Independent Hospital (IH) - Dental Treatment	<b>Number of registered places:</b> 1 increasing to 2

Mr David Reaney also owns and operates David Reaney & Associates Dental Practice in Moy.

### 4.0 Inspection summary

An announced variation to registration care inspection of Bridge Dental took place on 16 November 2018 from 10.30 to 11.30.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, 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).

The practice was initially registered as David T Neill BDS Dental Surgery on 13 September 2011. The practice was sold to David Reaney and Associates Limited who operates under the name of Bridge Dental. The practice was relocated to new premises. Bridge Dental was subsequently registered with RQIA on 6 September 2018.

On 19 October 2108 RQIA received an application to vary the registration of the practice to increase the number of registered dental chairs from one to two.

This inspection sought to review the readiness of the practice for the provision of private dental care and treatment associated with the variation to registration application, to increase the number of dental chairs from one to two.

There were examples of good practice found in relation to infection prevention and control and decontamination, radiology and the maintenance of the environment.

No areas requiring improvement were identified during this inspection.

The variation to registration to increase the number of registered dental chairs from one to two was approved from a care perspective following this inspection. A premises inspection was not required as an announced premises inspection had been completed on 15 August 2018.

The findings of the inspection were provided to the practice manager at the conclusion of the inspection.

#### 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with the practice manager 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.

#### 4.2 Action/enforcement taken following the most recent care inspection dated 15 and 24 August 2018

No further actions were required to be taken following the most recent inspection on 15 and 24 August 2018

#### 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- review of the submitted variation to registration application
- the previous care inspection report
- evaluation and feedback
- the proposed statement of purpose

During the inspection the inspector met with the practice manager and briefly with a dental nurse. A tour of some areas of the premises was also undertaken.

## 6.0 The inspection

### 6.1 Review of areas for improvement from the most recent pre-registration care inspection dated 15 and 24 August 2018

The most recent inspections of the establishment were announced pre-registration care and estates inspections which were undertaken on 15 August 2018, the pre-registration care inspection concluded on 24 August 2018. No areas for improvement were made during the pre-registration care and estates inspection and registration of the practice was approved.

### 6.2 Review of areas for improvement from the last care inspection dated 15 and 24 August 2018

As above.

## 6.3 Inspection findings

### 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. The document had been updated to reflect the proposed additional dental chair.

### 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. The document had been updated to reflect the proposed additional dental chair.

### Recruitment of staff

Discussion with staff and review of the submitted variation to registration application confirmed that no new staff have been recruited since the previous inspection. The practice manager stated that an associate dentist from David Reaney & Associates Dental Practice in Moy will work in the new surgery on a part time basis.

It was confirmed that in the event of appointing new staff, all relevant information as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 would be sought and retained.

### Environment

The new second surgery is on the first floor of the practice. Review of the second dental surgery evidenced that works have been completed to a high standard. New fixtures included cabinetry, a dental chair and x-ray equipment.

The fire and legionella risk assessments had been reviewed and updated in respect of the second surgery. It was also confirmed that staff had fire safety refresher training to take into account the second dental surgery.

During the previous pre-registration premises inspection on 15 August 2018 RQIA confirmed that all electrical work had been completed in this new surgery.

### **Infection prevention and control/decontamination**

The arrangements in regards to the newly established second dental surgery were reviewed. The new surgery has been established in a room which was previously unused. It was observed that the flooring in the surgery was impervious and coved where it meets the walls and kicker boards of cabinetry. The surgery was tidy and uncluttered, cabinetry and work surfaces were intact and easy to clean.

Staff confirmed that the newly installed dental chair has an independent bottled-water system and that the dental unit water lines (DUWLs) will be managed in keeping with the manufacturer's instructions.

Sharps boxes were safely positioned to prevent unauthorised access and had been signed and dated on assembly. Staff confirmed during discussion that used sharps boxes will be locked with the integral lock and stored ready for collection away from public access.

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 laminated/wipe-clean posters promoting hand hygiene were on display.

Personal protective equipment (PPE) was readily available.

The clinical waste bin in the surgery was pedal operated 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.

It was confirmed that there are sufficient dental instruments to meet the demands of the second dental surgery and that additional instruments will be provided should this need be identified in the future.

A decontamination room separate from patient treatment areas and dedicated to the decontamination process was available. The decontamination room adequately meets the practice requirements and facilitates the flow from dirty through to clean areas for the cleaning and sterilising of reusable instruments. Appropriate equipment, including a washer disinfectant and a steam steriliser, has been provided to meet the practice requirements.

A review of documentation evidenced that equipment used in the decontamination process has been appropriately validated. A review of equipment logbooks evidenced that periodic tests are undertaken and recorded in keeping with Health Technical Memorandum (HTM) 01-05 Decontamination in primary care dental practices.

A review of the most recent IPS audit, completed on 25 September 2018, evidenced that the audit had been completed in a meaningful manner and had identified areas of good practice and areas that require to be improved. It was confirmed that an action plan had been generated to address the issues identified. The audit had been carried out by the lead decontamination dental nurse from David Reaney & Associates Dental Practice in Moy, in order to facilitate shared learning and provide support. Ms Fairley stated that future audits will involve staff from within the practice and confirmed that the outcome of the audit is discussed at staff meetings.

A range of policies and procedures were in place in relation to decontamination and infection prevention and control.

## 5.2 Radiology

As previously stated one dental surgery had been operational in this practice and a second dental surgery has recently been established. Both surgeries have an intra-oral x-ray machine.

A new intra-oral x-ray machine has been installed in the second surgery. It was confirmed that, as this machine is new, it is under manufacturer's warranty and it will be serviced and maintained in keeping with the manufacturer's instructions.

A critical examination of the new intra-oral x-ray machine had been undertaken by the appointed radiation protection advisor (RPA) on 12 November 2018. The RPA report had not yet been provided to the practice however the practice manager was aware of the recommendations made and stated that all recommendations had been addressed.

A dedicated radiation protection file containing the relevant local rules, employer's procedures and other additional information was retained. A review of the file confirmed that staff have been authorised by the radiation protection supervisor (RPS) for their relevant duties and have received local training in relation to these duties. It was evidenced that all measures are taken to optimise dose exposure. This included the use of rectangular collimation, x-ray audits and digital x-ray processing.

A copy of the local rules was on display near the x-ray machine in surgery 1 and appropriate staff had signed to confirm that they had read and understood these. Staff spoken with demonstrated sound knowledge of the local rules and associated practice. The practice manager confirmed that the practice had not yet been provided with the local rules for surgery 2.

On 04 December 2018 RQIA received an email from the practice manager confirming that the RPA critical examination and acceptance report for the intra-oral machine in surgery 2 had been received and the local rules specific to surgery 2 which were displayed in surgery 2.

Quality assurance systems and processes were in place to ensure that all matters relating to x-rays reflect legislative and best practice guidance.

### 5.3 Conclusion

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

### 5.4 Areas for improvement

#### Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

### 6.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a quality improvement plan (QIP) is not required or included, as part of this inspection report.





The Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
BELFAST  
BT1 3BT

**Tel** 028 9536 1111  
**Email** [info@rqia.org.uk](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
 [@RQIANews](https://twitter.com/RQIANews)

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