



The Regulation and
Quality Improvement
Authority

Alexander Dental Practice
RQIA ID: 11361
40 Northland Row
Dungannon
BT71 6AP

Inspector: Raymond Sayers
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**Announced Estates Variation Inspection
of
Alexander Dental Practice**

12 May 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced estates pre-registration variation estates inspection took place on 12 May 2015 from 10.10am to 11.00am. An announced care inspection was undertaken by Mr Stephen O'Connor between 09.50am to 12.05pm. Overall on the day of the inspection the premises supported the delivery of safe, effective and compassionate care. Two items requiring improvement works action were found and are listed in the *areas for Improvement* section in the Quality Improvement Plan (QIP) within this report.

1.1 Actions/Enforcement Taken Following the Last Care Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last care inspection on .

1.2 Actions/Enforcement Resulting from this Inspection

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

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	2	0

The details of the QIP within this report were discussed with Ms Susanne McCammick, Practice Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Alexander Dental Practice/ Mr David Gordon Mr Patrick McGeary Mr Eamonn O'Brien	Registered Manager: Mr Eamonn O'Brien
Person in Charge of the Practice at the Time of Inspection: Mr David Gordon Mr Patrick McGeary Mr Eamonn O'Brien	Date Manager Registered: Registration pending
Categories of Care: Independent Hospital (IH) – Dental Treatment	Number of Registered Dental Chairs: 5 increasing to 6 following this inspection

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection.

4. Methods/Process

Specific methods/processes used in this inspection include the following:

Prior to inspection the following records were analysed: previous estates inspection report and Quality Improvement Plan.

During the inspection the inspector met with Ms Suzanne McCammick.

The following records were examined during the inspection: relevant policies, risk assessments and procedures, fire safety awareness training records, engineer works certificates.

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the practice was an announced care inspection undertaken on 8 April 2014. Five recommendations were made as a result of this care inspection. The completed Quality Improvement Plan (QIP) was approved by the care inspector on 19 May 2014. Review of the QIP by the care inspector during the announced inspection undertaken on the 12 May 2015 demonstrated that four of the five recommendations had been addressed. The recommendation made to replace the damaged chair covering in surgery five and examine all dental chairs for evidence of rips and tears has been partially addressed, and the unaddressed component has been stated for the second time.

5.2 Review of Requirements and Recommendations from the last estates Inspection dated 08 October 2012

Last Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 25(4)(a) & (b) Stated: First time	Implement corrective/improvement works recommended in fire risk assessment report.	Met
	Action taken as confirmed during the inspection: Control measures implemented.	

Last Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 13 Stated: First time	Complete planned alteration/refurbishment works in water treatment room.	Met
	Action taken as confirmed during the inspection: Redecoration works completed	
Recommendation 2 Ref: Standard 14 Stated: First time	Verify that legionella risk assessment recommended control measures have been implemented	Partially Met
	Action taken as confirmed during the inspection: Data recorded was not detailed; location and temperature were not listed.	
Recommendation 3 Ref: Standard 14 Stated: First time	Verify that a BS7671 Periodic Inspection Report for the electrical installation is completed and that the installation is compliant with the electricity at work regulations.	Not Met
	Action taken as confirmed during the inspection: Inspection report submitted for review but document not validated by inspection engineer signature or date.	

Is Care Safe?

A range of documents relating to the maintenance of the premises was presented for review during this Estates inspection. This documentation included inspection and test reports plus risk assessments for various elements of the engineering services. This supports the delivery of safe care

Is Care Effective?

A range of accommodation, facilities and support services are provided in the premises. This supports the delivery of effective care.

Is Care Compassionate?

The areas of the premises reviewed during this Estates inspection were well presented, this supports the delivery of compassionate care.

Areas for Improvement

Records listing legionella prevention control measures were not maintained in sufficient detail; location of sentinel outlet and temperature of water sample was not recorded.

The BS7671 Periodic Inspection Report of the electrical installation was not available for examination.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Susanne McCammick as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Independent Health Care Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The DHSSPS Minimum Standards for Dental Care and Treatment (2011). They promote current good practice and if adopted by the registered person/s may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered person/registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to estates.mailbox@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the practice. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person(s) from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person(s) with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the practice.

Quality Improvement Plan

Statutory Requirements

<p>Requirement 1</p> <p>Ref: Regulation 25.(2)(d)</p> <p>Stated: Second time</p> <p>To be Completed by: 07 July 2015</p>	<p>Record legionella prevention control measures implemented; i.e. record location of sentinel outlet and temperature recorded at outlet.</p> <p>Response by Registered Person(s) Detailing the Actions Taken: Yes this will be completed going forward.</p>		
<p>Requirement 2</p> <p>Ref: Regulation 25.(2)(d)</p> <p>Stated: Second time</p> <p>To be Completed by:</p>	<p>Complete a BS7671 Periodic Inspection Report for the electrical installation, assess report recommendations and implement corrective/improvement works.</p> <p>Response by Registered Person(s) Detailing the Actions Taken: BS7671 is completed. this was done on the 06/06/2011 and is not due again until june 2016. we have a 14 page report for the copmpany who complied.</p>		
Registered Manager Completing QIP	Eamonn O'Brien	Date Completed	10/06/2016
Registered Person Approving QIP	Patrick McGeary	Date Approved	10/06/2016
RQIA Inspector Assessing Response	Raymond Sayers	Date Approved	15/05/2015

Please ensure the QIP is completed in full and returned to estates.mailbox@rqia.org.uk from the authorised email address