

Announced Premises Inspection Report 20 July 2016



Belmore Dental Studio and Implant Clinic

Address: 16 Belmore Street, Enniskillen, BT74 6AA

Tel No: 028 6632 9222

Inspector: Raymond Sayers

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced inspection of Belmore Dental Studio and Implant Clinic took place on 20 July 2016 from 10.00 to 11.30hrs.

The inspection was scheduled and announced, and involved a review of building services maintenance records, plus a physical review of the premises.

This inspection was underpinned by The Independent Health Care Regulations (Northern Ireland) 2005 and the Minimum Standards for Dental Care and Treatment produced by the Department of Health, Social Services and Public Safety in March 2011.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	3

Details of the QIP within this report were discussed with Ms Lorraine Browne, Assistant Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

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

1.2 Actions/enforcement taken following the most recent premises inspection

This was the dental surgery's first premises inspection conducted by an Estate Inspector.

2.0 Service details

Registered organisation/registered person: Belmore Dental Studio and Implant Clinic/Mr Niall McEnhill and Ms Sinead McEnhill	Registered manager: Mrs Iris Browne
Person in charge of the premises at the time of inspection: Ms Sinead McEnhill	Date manager registered: 11 April 2012
Categories of care: Independent Hospital (I.H.) – Dental Treatment	Number of registered places: 4

3.0 Methods/processes

The duty call records were examined prior this inspection.

During the inspection the inspector met with Ms Lorraine Browne, Assistant Manager.

The following records were examined during the inspection: fire safety risk assessment, legionella risk assessment, user fire sensor test records, BS7671 Periodic Inspection certificate for the electrical installation, portable appliance test (PAT) records.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 9 December 2015

The most recent inspection of the establishment, IN023614, dated 9 December 2015 was an announced care inspection. The completed QIP was returned, and approved by the care inspector on 6 January 2016.

4.2 Review of requirements and recommendations from the last premises inspection

This is the first premises inspection to be completed at this dental surgery, and therefore there are no previous reports for review.

4.3 Inspection findings

1. The self-contained fire detection/alarm sensor located in the stairwell was located at the ceiling/wall junction, contrary to manufacturer`s recommendations.
2. The compressor room contained Oxygen and Nitrous oxide gas cylinders; there was no fire detection sensor/alarm in the room.
3. Staff fire safety training and drills are listed as implemented.
4. Fire extinguisher annual test/inspection to BS5306 completed May 2015.
5. There was no emergency lighting in the means of escape stairwell.
6. The BS7671 Periodic Inspection Report for the electrical installation ICN3/0388300 dated 28 January 2013 was listed as valid for one year. A subsequent e-mail received on 04 August detailed that an inspection was completed on 01 August 2016; a number of recommendations were listed for action by the responsible person.
7. Portable Appliance Testing (PAT) was completed on 28 August 2015.

8. A fire risk assessment dated 29 July 2016 was submitted by e-mail on 15 August 2016; Ms Lorraine Browne, Assistant Manager states that remedial works to implement the fire risk assessment action plan recommendations are currently under way, and that it is envisaged that the process will take several months.

Areas for improvement

1. The gas service pipe work should be subjected to maintenance/testing by a competent gas safe engineer.
Refer to Quality Improvement Plan recommendation 3.
2. The 01 August 2016 BS7671 Periodic Inspection of the electrical installation should be assessed, recommended works actions should be prioritised been completed and that the installation is compliant with the Electricity at Work Regulation.
Refer to Quality Improvement Plan recommendation 2.
3. Implement the 29 July 2016 fire risk assessment report action plan recommendations.
Refer to Quality Improvement Plan recommendation 1.

Number of requirements:	0	Number of recommendations:	3
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5.0 Quality improvement plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Lorraine Browne, Assistant Manager 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.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The Independent Health Care Regulations (Northern Ireland) 2005.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Minimum Standards for Dental Care and Treatment produced by the Department of Health, Social Services and Public Safety in March 2011. They promote current good practice and if adopted by the registered person(s) may enhance service, quality and delivery.

5.3 Actions taken by the registered manager/registered person

The QIP will be completed by the registered manager to 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 by the registered manager. 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 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 person/manager from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered person/manager with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan

Recommendations

<p>Recommendation 1</p> <p>Ref: Standard 14.2</p> <p>Stated: First time</p> <p>To be completed by: 29 July 2017</p>	<p>The registered person should consult with the fire risk assessor and complete a programme of remedial works to implement the 29 July 2016 fire risk assessment report recommendations.</p> <p>Response by registered person detailing the actions taken: Work commenced and will be complete by 1st Nov 2016</p>
<p>Recommendation 2</p> <p>Ref: Standard 14.2</p> <p>Stated: First time</p> <p>To be completed by: 21 September 2016</p>	<p>The registered person should evaluate the BS7671 Periodic Inspection Report recommendations, prioritising and implementing control measures, ensuring that the electrical installation complies with the Electricity at Work Regulations.</p> <p>Response by registered person detailing the actions taken: Inspection completed and no recommendations require action</p>
<p>Recommendation 3</p> <p>Ref: Standard 14.2</p> <p>Stated: First time</p> <p>To be completed by: 26 October 2016</p>	<p>The registered person should commission a competent engineer to maintain and test the integrity of the medical gas system installation.</p> <p>Response by registered person detailing the actions taken: Inspection booked for October 2016</p>

Please ensure this document is completed in full and returned to Estates.Mailbox@rqia.org.uk from the authorised email address



The Regulation and
Quality Improvement
Authority

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