

Announced Premises Inspection Report 11 October 2016



Bishop Street Dentalcare

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

Address: 21 Bishop Street, Derry, BT48 6PR

Tel No: 028 7126 2402

Inspector: P Cunningham

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of Bishop Street Dentalcare took place on 11 October 2016 from 9:00 to 10:15hrs.

The inspection sought to determine if the premises was supporting the delivery of safe, effective and compassionate care and if the service was well led.

Is care safe?

On the day of the inspection the premises supported the delivery of safe care. However some issues were identified for attention by the registered provider. Refer to section 4.3.

Is care effective?

On the day of the inspection the premises supported the delivery of effective care.

Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care.

Is the service well led?

On the day of the inspection the management of the premises was considered to be well led.

This inspection was underpinned by The Independent Health Care Regulations (Northern Ireland) 2005 and the Minimum Standards for Dental Care and Treatment.

1.1 Inspection outcome

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

Details of the Quality Improvement Plan (QIP) within this report were discussed with Gerard Cleary, Registered 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 first premises inspection of the practice.

2.0 Service Details

Registered organisation/registered provider: Mr Gerard Cleary	Registered manager: Mr Gerard Cleary
Person in charge of the practice at the time of inspection: Mr Gerard Cleary	Date manager registered: 23 February 2012
Categories of care: Independent Hospital (IH) – Dental Treatment	Number of registered places: 4

3.0 Methods/processes

During the inspection the inspector met with Mr Gerard Cleary, Registered Manager.

The following records were examined during the inspection: Copies of service records and in-house log books relating to the maintenance and upkeep of the building and engineering services, legionellae risk assessment, fire risk assessment.

4.0 The Inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 18/8/15

The most recent inspection of the Private Dental Practice was an announced care inspection carried out on 18 August 2015. It is good to note that no recommendations or requirements were made as a result of that inspection.

4.2 Review of requirements and recommendations from the last premises inspection

This was the first premises inspection of the practice.

4.3 Is care safe?

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this premises inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments.

Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this premises inspection.

A range of fire protection measures are in place for the premises. This includes a fire detection and alarm system, emergency lighting, first aid fire-fighting equipment, structural fire separation and protection to the means of escape. The practice occupies the ground floor section of a larger building as a tenant and the landlord retains responsibility for elements of the fire safety including the fire alarm and detection system.

A number of issues were identified for attention during this premises inspection. These are detailed in the 'areas for improvement' section below.

Areas for improvement

1. The fire alarm and detection system is managed by the building landlord. The dental practice occupies one section of the building on the ground floor. Records relating to the upkeep of the system are retained by the landlord.
See recommendation 1 in the attached QIP.
2. The measures for the upkeep of the emergency lighting system are ongoing in the practice. The registered manager agreed that these would be reviewed in line with current good practice (British Standard 5266) so that monthly function checks by practice staff are carried out and recorded alongside annual full duration service checks by the specialist contractor..
3. The measures for the control of legionella in the premises' domestic plumbing system and in the dental unit water lines (DUWLs) have been identified in the legionella risk assessment report. The assessment was carried out by the registered manager. A proprietary disinfection system is used in the upkeep of the DUWLs and the procedures for this appear to be in line with current best practice guidance. The parts of the domestic hot and cold water plumbing system which are outside the dental practice have not been identified in the assessment report.
See recommendation 2 in the attached QIP.
4. While fire safety practice fire drills are in place, records did not indicate that regular staff fire safety training is in place.
See recommendation 3 in the attached QIP.

Number of requirements	0	Number of recommendations:	3
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4.4 Is care effective?

There are arrangements in place for routine premises management and upkeep as well as timely breakdown/repair maintenance.

This supports the delivery of effective care.

Number of requirements	0	Number of recommendations:	0
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4.5 Is care compassionate?

The areas of the premises reviewed during this premises inspection were well presented, comfortable, clean, free from malodours and adequately lit.

This supports the delivery of compassionate care.

Number of requirements	0	Number of recommendations:	0
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4.6 Is the service well led?

Premises related policies and documentation are retained in a manner which is accessible to relevant people.

Arrangements are in place for managing premises related incidents/notifiable events and Medical Device and Equipment Alerts.

The registered person has dealt appropriately with previous RQIA QIP items and other relevant issues relating to the premises and has been adequately supported and resourced by the registered responsible person.

There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate.

This supports a well led service.

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

Any issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr Gerard Cleary, Registered Manager as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/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 provider 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 the Private Dental Practice. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises, RQIA would apply standards current at the time of that application.

5.1 Statutory requirements

No requirements were made as a result of this inspection.

5.2 Recommendations

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

5.3 Actions taken by the Registered Provider

The QIP should be completed and detail the actions taken to meet the legislative requirements stated. The registered provider should confirm that these actions have been completed and return completed QIP to Estates.Mailbox@rqia.org.uk for assessment 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 provider 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 provider 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: 16 December 2016</p>	<p>The registered provider should confirm that the fire alarm and detection system is suitably maintained and tested in line with current best practice guidance BS5839. Copy of relevant certification and records should be forwarded to RQIA.</p> <p>Response by registered provider detailing the actions taken: I have been given copies of all records and tests for the fire alarm and fire detection system for my building by the landlord. These will be forwarded to RQIA by arrangement before 16.12.2016</p>
<p>Recommendation 2</p> <p>Ref: Standard 13.2</p> <p>Stated: First time</p> <p>To be completed by: 16 December 2016</p>	<p>The registered provider should review the legionellae risk assessment after consultation with the building landlord. This should give due consideration to the parts of the plumbing installation outside the dental practice which may affect people using the facility e.g. cold water storage tanks etc.</p> <p>Guidance on this can be obtained on the Health and Safety Executive website. https://www.hseni.gov.uk/topics/legionella</p> <p>Response by registered provider detailing the actions taken: The landlord has consulted the contractor and subsequently has stated that ' the water supply to the dental surgery is a direct supply to that unit only and has no other connection to any other part of the building' This will be added to the legionellae risk assessment</p>
<p>Recommendation 3</p> <p>Ref: Standard 12.5</p> <p>Stated: First time</p> <p>To be completed by: 16 December 2016</p>	<p>The registered provider should undertake fire safety awareness training for all staff and this should be repeated annually.</p> <p>Response by registered provider detailing the actions taken: a session has been arranged for all staff and dentists at 2.00 p.m. on Thursday 24th November 2016 in the practice. It will be given by Gurney Fire Safety Ltd</p>

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



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