



**D I Crutchley Dental Practice**  
**RQIA ID: 11453**  
**1<sup>st</sup> Floor**  
**116 Upper Lisburn Road**  
**Belfast**  
**BT10 0BD**

**Inspector: Emily Campbell**  
**Inspection ID: IN21388**

**Tel: 028 9060 3440**

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**Announced Care Inspection  
of  
D I Crutchley Dental Practice**

**14 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](http://www.rqia.org.uk)**

## 1. Summary of Inspection

An announced care inspection took place on 14 May 2015 from 09.50 to 11.40. Overall on the day of the inspection the management of medical emergencies and recruitment and selection were found to be safe, effective and compassionate. The outcome of the inspection found no areas of concern.

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, The DHSSPS Minimum Standards for Dental Care and Treatment (2011), Resuscitation Council (UK) guidelines on quality standards for cardiopulmonary resuscitation practice and training in primary dental care (November 2013), Resuscitation Council (UK) guidelines on minimum equipment list for cardiopulmonary resuscitation in primary dental care (November 2013), and the British National Formulary (BNF) guidelines on medical emergencies in dental practice.

### 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 20 August 2014.

### 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
<b>Total number of requirements and recommendations made at this inspection</b>	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Mr Ian Crutchley	<b>Registered Manager:</b> Mr Ian Crutchley
<b>Person in Charge of the Practice at the Time of Inspection:</b> Ms Natalie Moore, senior nurse	<b>Date Manager Registered:</b> 03 January 2012
<b>Categories of Care:</b> Independent Hospital (IH) – Dental Treatment	<b>Number of Registered Dental Chairs:</b> 1

## 3. Inspection Focus

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

The themes for the 2015/16 year are as follows:

- Medical and other emergencies; and
- Recruitment and selection

## 4. Methods/Process

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

Prior to inspection the following records were analysed: staffing information, patient consultation report, and complaints declaration.

During the inspection the inspector met with Ms Natalie Moore, senior nurse, the practice manager and a receptionist. Mr Crutchley, registered person, was not available during the inspection and the inspection was facilitated by Ms Moore. Ms Moore confirmed that Mr Crutchley will be available for discussion during the inspection of his other practice, Fifteen Dental scheduled for 04 June 2015.

The following records were examined during the inspection: relevant policies and procedures, training records, four staff personnel files, job descriptions, contracts of employment, and three patient medical histories.

## 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 dated 20 August 2014. The completed QIP was returned and approved by the care inspector.

### 5.2 Review of Requirements and Recommendations from the last Care Inspection dated 20 August 2014

Last Inspection Recommendations		Validation of Compliance
<b>Recommendation 1</b>  <b>Ref: Standard 13</b>  <b>Stated: First time</b>	The overflow of the dedicated hand washing basin in the dental surgery should be blanked off using a stainless steel plate sealed with antibacterial mastic.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Ms Moore advised that attempts have been made to blank off the overflow. However, this has been unsuccessful due to a protrusion integral to the design of the basin in the middle of the overflow.  It is accepted that efforts have been made to address this recommendation; however, due to the design of the basins this has not been possible. It was suggested that a clinical hand washing basin is provided in the surgery on the next refurbishment.	

### 5.3 Medical and other emergencies

#### Is Care Safe?

Arrangements are in place that the emergency medicines and equipment for D I Crutchley Dental Practice are shared with Loughridge Dental Care which is located on the ground floor of the building. Medicines and equipment are located in Loughridge Dental Care and are within easy access to both practices.

Review of training records and discussion with staff confirmed that the management of medical emergencies is included in the induction programme and training is updated on an annual basis, in keeping with the General Dental Council (GDC) Continuing Professional Development (CPD) requirements.

Discussion with staff confirmed that they were knowledgeable regarding the arrangements for managing a medical emergency and the location of medical emergency medicines and equipment.

Review of medical emergency arrangements evidenced that emergency medicines are provided in keeping with the British National Formulary (BNF), and that emergency equipment as recommended by the Resuscitation Council (UK) guidelines is retained in the practice with the exception of an automated external defibrillator (AED). Ms Moore advised that a community AED was being installed in the near future at a local retailer's which was within easy access to the practice in a timely manner and that it was their intention to avail of this if required. Confirmation was emailed to RQIA on 22 May 2015 advising that the community AED has now been installed this arrangement has been included in the appropriate protocol. A robust system is in place to ensure that emergency medicines and equipment do not exceed their expiry date. There is an identified individual within the practice with responsibility for checking emergency medicines and equipment. Emergency medicines and equipment checks are carried out by the identified staff members in both D I Crutchley Dental Practice and Loughridge Dental Care.

Discussion with staff and review of documentation demonstrated that recording and reviewing patients' medical histories is given high priority in this practice.

Overall on the day of the inspection the arrangements for managing a medical emergency were found to be safe.

### **Is Care Effective?**

The policy for the management of medical emergencies reflected best practice guidance. Protocols are available for staff reference outlining the local procedure for dealing with the various medical emergencies.

Discussion with staff demonstrated that they have a good understanding of the actions to be taken in the event of a medical emergency and the practice policies and procedures.

Discussion with staff confirmed that there have been no medical emergencies in the practice since the previous inspection.

Overall on the day of the inspection the arrangements for managing a medical emergency were found to be effective.

### **Is Care Compassionate?**

Review of standard working practices demonstrated that the management of medical and other emergencies incorporate the core values of privacy, dignity and respect.

During discussion staff demonstrated a good knowledge and understanding of the core values that underpins all care and treatment in the practice.

Overall on the day of the inspection the arrangements for managing a medical emergency were found to be compassionate.

## Areas for Improvement

No areas for improvement were identified during the inspection.

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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### 5.4 Recruitment and selection

#### Is Care Safe?

There was a recruitment policy and procedure available. The policy was comprehensive and reflected best practice guidance.

The practice has not employed any new staff since registration with RQIA and therefore no staff personnel files were reviewed in this regard. However, Ms Moore confirmed on discussion that the following information would be retained in the event of any new staff being recruited:

- positive proof of identity, including a recent photograph;
- evidence that an enhanced AccessNI check was received prior to commencement of employment;
- two written references;
- details of full employment history, including an explanation of any gaps in employment;
- documentary evidence of qualifications, where applicable;
- evidence of current GDC registration, where applicable;
- criminal conviction declaration on application;
- confirmation that the person is physically and mentally fit to fulfil their duties; and
- evidence of professional indemnity insurance, where applicable.

A staff register was not retained containing staff details including, name, date of birth, position; dates of employment; and details of professional qualifications and professional registration with the GDC, where applicable. However, this was established during the inspection. Ms Moore is aware that this is a live document which should be kept updated.

Ms Moore confirmed that a robust system is in place to review the professional indemnity status of registered dental professionals who require individual professional indemnity cover. A review of indemnity certificates of staff who require individual professional indemnity cover evidenced this.

Overall on the day of the inspection, recruitment and selection procedures were found to be safe.

## Is Care Effective?

The dental service's recruitment and selection procedures comply with all relevant legislation including checks to ensure qualifications, registrations and references are bona fide.

Review of four personnel files evidenced that staff had been issued with a contract of employment/agreement and job description.

Induction programme templates are in place relevant to specific roles within the practice for use when new staff commence employment. Induction records were not reviewed during the inspection as no new staff have been appointed since registration.

Discussion with the lead nurse, the practice manager and a receptionist confirmed that staff have been provided with a job description, contract of employment/agreement and have received induction training when they commenced work in the practice.

Discussion with staff confirmed that they are aware of their roles and responsibilities.

Clinical staff spoken with confirmed that they have current GDC registration and that they adhere to GDC CPD requirements.

Overall on the day of the inspection recruitment and selection procedures were found to be effective.

## Is Care Compassionate?

Review of recruitment and selection procedures demonstrated good practice in line with legislative requirements.

Recruitment and selection procedures, including obtaining an enhanced AccessNI check, minimise the opportunity for unsuitable people to be recruited in the practice. As discussed previously, no new staff have been appointed since registration with RQIA. Ms Moore confirmed that enhanced AccessNI checks will be undertaken and received prior to any new staff commencing employment.

Discussion with Ms Moore demonstrated that she had a good knowledge and understanding of the GDC Standards for the Dental Team and the Scope of Practice.

Discussion with staff demonstrated that the core values of privacy, dignity, respect and patient choice are understood.

Overall on the day of the inspection recruitment and selection procedures were found to be compassionate.

## Areas for Improvement

No areas for improvement were identified during the inspection.

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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## **5.5 Additional Areas Examined**

### **5.5.1 Staff Consultation/Questionnaires**

During the course of the inspection, the inspector spoke with the lead nurse, the practice manager and a receptionist. Questionnaires were also provided to staff prior to the inspection by the practice on behalf of the RQIA. Three were returned to RQIA within the timescale required.

Review of submitted questionnaires and discussion with staff evidenced that they were provided with a job description and contract of employment/agreement on commencing work in the practice. Staff also confirmed that induction programmes are in place for new staff which includes the management of medical emergencies. Staff confirmed that annual training is provided on the management of medical emergencies.

### **5.5.2 Complaints**

It is not in the remit of RQIA to investigate complaints made by or on the behalf of individuals, as this is the responsibility of the providers. However, if there is considered to be a breach of regulation as stated in The Independent Health Care Regulations (Northern Ireland) 2005, RQIA has a responsibility to review the issues through inspection.

A complaints questionnaire was forwarded by the Regulation and Quality Improvement Authority (RQIA) to the practice for completion. The returned questionnaire indicated that no complaints have been received for the period 01 January 2014 to 31 March 2015.

### **5.5.3 Patient consultation**

The need for consultation with patients is outlined in The Independent Health Care Regulations (Northern Ireland) 2005, Regulation 17 (3) and The Minimum Standards for Dental Care and Treatment 2011, Standard 9. A patient consultation questionnaire was forwarded by the Regulation and Quality Improvement Authority (RQIA) to the practice for completion. A copy of the most recent patient satisfaction report was submitted to RQIA prior to the inspection.

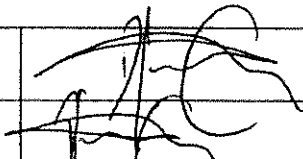
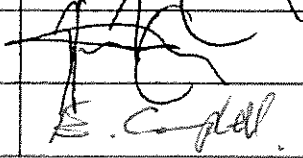

Review of the most recent patient satisfaction report demonstrated that the practice pro-actively seeks the views of patients about the quality of treatment and other services provided. Patient feedback whether constructive or critical, is used by the practice to improve, as appropriate.

### **5.5.4 Rebranding**

Mr Crutchley is in the process of rebranding and the practice will be known as Fifteen Dental. Ms Moore confirmed that when this process is complete RQIA will be formally notified of the new name of the practice. Ms Moore confirmed that there is no change of ownership associated with the rebranding.



No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager		Date Completed	10/6/15
Registered Person		Date Approved	10/6/15.
RQIA Inspector Assessing Response		Date Approved	12/6/15

Please provide any additional comments or observations you may wish to make below:

*\*Please complete in full and returned to*

*email address\**

*from the authorised*