

Inspector: Carmel McKeegan Tel: 028 9335 1825

Deacon Hanna & Thompson

RQIA ID: 11468

Carrickfergus BT38 7JJ

51 Victoria Road

Inspection ID: IN21282

Announced Care Inspection of Deacon Hanna & Thompson 28 April 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1. Summary of Inspection

An announced care inspection took place on 28 April 2015 from 14.00 to 15.30. Overall on the day of the inspection the management of medical emergencies and recruitment and selection of staff were generally found to be safe, effective and compassionate.

The practice has been registered with RQIA as Deacon Hanna and Thompson; however, the signage outside the practice states the name of the practice as Victoria Dental Care. This may cause confusion for patients or interested bodies, particularly if they wish to review the RQIA reports about the practice. A recommendation was made in this regard.

Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) within this report

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) Regulation 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

There were no requirements or recommendations made following the previous care inspection on 13 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
Total number of requirements and recommendations made at this inspection	0	3

The details of the QIP within this report were discussed with the Mr William Hanna, and Mr Robert Thompson, registered persons, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Mr William Hanna Mr Robert Thompson	Registered Manager: Mr William Hanna
Person in Charge of the Practice at the Time of Inspection: Mr William Hanna Mr Robert Thompson	Date Manager Registered: 11 April 2012
Categories of Care: Independent Hospital (IH) – Dental Treatment	Number of Registered Dental Chairs: 2

3. Inspection Focus

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 Mr William Hanna, and Mr Robert Thompson, registered persons, two dental nurses and a receptionist.

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

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the practice was an announced care inspection dated 13 August 2014. No requirements of recommendations were made following the previous inspection.

5.2 Review of Requirements and Recommendations from the last Care Inspection dated 13 August 2014

As above.

5.3 Medical and other emergencies

Is Care Safe?

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, with the exception of an automated external defibrillator (AED) is retained in the practice. It was observed format of Midazolam available is not the format recommended by the Health and Social Care Board (HSCB). The inspector advised that when the current form of Midazolam expires it should be replaced with Buccolam Pre-Filled syringes as recommended by HSCB.

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.

Mr Hanna and Mr Thompson confirmed that an AED is not available in the practice and that the practice does not have any formal arrangements to get access to an AED in the local area.

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, it was identified that some improvement is needed to ensure that the management of medical emergencies is 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

Advice and guidance should be sought from the medico-legal advisor in regards to the provision of an AED.

Number of Requirements	0	Number Recommendations:	1

Recruitment and selection

Is Care Safe?

5.4

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

One staff member had been recruited since registration with RQIA. This staff member's personnel file was reviewed and the following noted:

- positive proof of identity, including a recent photograph;
- evidence that an enhanced AccessNI check was received prior to employment;
- written references were not available; a verbal reference had been undertaken and recorded;
- 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 were not provided by the applicant;
- confirmation that the person is physically and mentally fit to fulfil their duties; and
- evidence of professional indemnity insurance, where applicable.

Discussion with Mr Hanna and Mr Thompson confirmed that the practice recruitment policy had been followed with regard to this staff member, however written references had not been obtained on this occasion. Messrs Hanna and Thompson confirmed that verbal references had been obtained prior to commencement of employment. Advice was provided on how to evidence that a written reference had been sought, and how to record a verbal reference to evidence the source of the reference.

A staff register was retained containing staff details including, name, date of birth, position; dates of employment; and details of professional qualification and professional registration with the GDC, where applicable.

Mr Hanna and Mr Thompson 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 a sample of records demonstrated that the appropriate indemnity cover is in place.

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.

One personnel file was reviewed which included a contract of employment, job description and an induction programme which had been completed for the new staff member when they had joined the practice. Induction programme templates are in place relevant to specific roles within the practice.

Discussion with Mr Hanna and Mr Thompson and staff confirmed that staff have been provided with a job description, contract of employment 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.

Discussion with staff demonstrated that they have 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

A criminal conviction declaration should be provided by applicants

Number of Requirements	0	Number Recommendations:	1
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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 Mr Hanna, and Mr Thompson, registered persons, two dental nurses and a receptionist. Questionnaires were also provided to staff prior to the inspection by the practice on behalf of the RQIA. Five 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 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 evidence provided in the returned questionnaire indicated that no complaints have been received by the practice between the 1 January 2014 and the 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 of critical, is used by the practice to improve, as appropriate.

5.5.4 Signage

The practice has been registered with RQIA as Deacon Hanna and Thompson; however, the signage outside the practice states the name of the practice as Victoria Dental Care. This may cause confusion for patients or interested bodies, particularly if they wish to review the RQIA reports about the practice. Following the inspection, the name of the practice was discussed with Mr Thompson who confirmed that Victoria Dental Care had been applied due to internal changes within the dental practice. A recommendation is made in this regard.

6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr William Hanna and Mr Robert Thompson, registered persons, as part of the inspection process. The timescales commence from the date of inspection.

The registered persons/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 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 may enhance service, quality and delivery.

6.2 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 independent.healthcare@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/manager 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/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the practice.

	Quality Improvement Plan
Recommendations	C 1 JUN: 2015
Recommendation 1 Ref: Standard 12.4 Stated: First time	It is recommended that advice and guidance is sought from the medic-legal advisor in regards to the provision of an automated external defibrillator (AED) in the practice. Any recommendations made should be actioned.
To be Completed by: 29 May 2015	
	Response by Registered Person(s) Detailing the Actions Taken: AN AED IS IN THE PROCESS OF BEING SOURCED FOR THIS PRACTICE
Recommendation 2 Ref: Standard 11.1 Stated: First time To be Completed by: 29 May 2015	It is recommended that recruitment records for new staff should include a criminal declaration made by each applicant. OR JOB AFFUCATION FORMS NOW INCLUDE A CRIMINAL DECLARATION SECTION— J HAVE ENCLOSED A COPY TO SEE IF IT MEETS YOUR REQUIREMENT
· ·	Response by Registered Person(s) Detailing the Actions Taken:
Recommendation 3 Ref: Standard 1 Stated: First time To be Completed by: 29 May 2015	The registered persons should notify RQIA registration team that the name of the practice has changed. RRIA REGISTRATION TO READ:— DEACON HAMMA THOMPSON ALSO TRADING AS VICTORIA DENTAL CARE. A NEW CONTIFICATE IS BEING-SENT TO US. Response by Registered Person(s) Detailing the Actions Taken:
Registered Manager Completing QIP	Date Completed 27/5/15 There
Registered Person Approving QIP	Date Completed 27/5/15 The Date Approved 24/5/15 mgg.
RQIA Inspector Assessing Response	Date Approved 9.6.15 Carmel Nickeaga.

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