



The Regulation and
Quality Improvement
Authority

Failure to Comply Notice Announced Compliance Inspection

Name of Establishment: Finaghy Dental Practice

Establishment ID No: 11502

Date of Inspection: 06 May 2014

Inspectors' Names: Philip Colgan
Elaine Connolly

Inspection No: 18056

**The Regulation and Quality Improvement Authority
9th floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501**

1.0 General Information

Name of establishment:	Finaghy Dental Practice
Address:	12 Finaghy Road South Belfast BT10 0DR
Telephone number:	028 9062 3559
Registered organisation / registered provider:	Mr Joseph Scullion
Registered manager:	Mr Joseph Scullion
Person in charge of the establishment at the time of inspection:	Mr Joseph Scullion
Registration category:	IH-DT
Type of service provision:	Private dental treatment
Maximum number of places registered: (dental chairs)	3
Date and type of previous inspection:	Announced Follow up Inspection 20 February 2014
Date and time of inspection:	06 May 2014
Name of inspectors:	Philip Colgan Elaine Connolly

2.0 Introduction

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect dental practices providing private dental care and treatment. A minimum of one inspection per year is required. The service is also inspected to determine compliance with the requirements of the Independent Health Care Regulations (Northern Ireland) 2005 and the Minimum Standards for Dental Care and Treatment March 2005.

This is a report of the announced inspection to assess the compliance against a failure to comply notice. The report details the extent to which the standards measured during inspection were met.

3.0 Purpose of the Inspection

The purpose of the inspection was to ascertain the progress made to address the actions outlined in the Failure to Comply Notice issued on 04 March 2014.

The breaches of legislation identified in the Failure to Comply Notices were as follows:

The Independent Health Care Regulations (Northern Ireland) 2005

Regulation 15 (3) - Where reusable medical devices are used in an establishment or agency, the registered person shall ensure that appropriate procedures are implemented in relation to cleaning, disinfection, inspection, packaging, sterilisation, transportation and storage of such devices.

4.0 Inspection Focus

An announced follow-up inspection was undertaken to Finaghy Dental Practice on 20 February 2014 as it had been identified during the previous inspection of 12 August 2013 that satisfactory progress towards compliance with the decontamination of reusable dental instruments, as outlined in HTM 01-05 and the PEL 12(23) had not been made. Subsequent to this a Failure to Comply Notice was issued on 04 March 2014 in this regard.

This inspection of 06 May 2014 was undertaken to establish the progress made towards compliance with the Failure to comply notice.

5.0 Methods/Process

- Review of the actions taken to comply with the failure to comply notice;
- Discussion with Mr Joseph Scullion, registered provider;
- Examination of relevant records;
- Consultation with relevant staff;
- Tour of the premises; and
- Evaluation and feedback.

Any other information received by RQIA about this practice has also been considered by the inspector in preparing for this inspection.

6.0 DHSSPS Policy Position and Northern Ireland Amendment

Dental practices in Northern Ireland were directed by the DHSSPS, that best practice recommendations in the Health Technical Memorandum (HTM) 01-05, decontamination in primary care dental practices, along with Northern Ireland amendments as noted in the Professional Estates Letter (PEL) (10) 04, should be fully implemented by **November 2012**. PEL (10) 04 was replaced by PEL (12) 23 on 21 December 2012. HTM 01-05 was updated in 2013 and this was forwarded to Primary Care Dental Practices through the issue of Professional Estates Letter (PEL) (13) 13 on 01 October 2013. The PEL (13) 13 advised General Dental Practitioners of the publication of the 2013 version of HTM 01-05 and the specific policy amendments to the guidance that apply in Northern Ireland.

7.0 Summary

An announced follow-up inspection was undertaken to Finaghy Dental Practice on 06 May 2014, as it had been identified during the previous inspection on 20 February 2014 that satisfactory progress towards compliance with the decontamination of reusable dental instruments, as outlined in HTM 01-05 and the PEL (13) 13 had not been made.

Subsequent to this a Failure to Comply Notice was issued to Mr Joseph Scullion, registered provider, in respect of Finaghy Dental Practice on 04 March 2014. This inspection was undertaken by Elaine Connolly and Philip Colgan on 06 May 2014 between the hours of 09:55 and 10:30. Mr Joseph Scullion, registered provider, was available during the inspection and for verbal feedback at the conclusion of the inspection.

The breaches of legislation identified in the Failure to Comply Notice was as follows:

The Independent Health Care Regulations (Northern Ireland) 2005 Regulation 15 (3) – Where reusable medical devices are used in an establishment or agency, the registered person shall ensure that appropriate procedures are implemented in relation to cleaning, disinfection, inspection, packaging, sterilisation, transportation and storage of such devices.

A dedicated decontamination room, separate from patient treatment areas has been established. The layout of the room is in keeping with best practice as indicated in HTM 01-05.

All reusable dental instruments are appropriately cleaned, sterilised and stored in the decontamination room following use. A validated washer disinfectant has been installed and is incorporated within the decontamination process.

Review of documentation, discussion with Mr Scullion and the practice manager, Ms B McKeown, and observations made during the inspection, evidenced that the necessary actions have been taken to comply with the Failure to Comply Notice.

Mr Scullion was issued with a letter of confirmation of compliance following the inspection.

The inspectors wish to thank Mr Scullion and Ms McKeown for their helpful discussions and co-operation throughout the inspection process.

8.0 Inspection Findings of Action Required to Comply with Regulations:

A dedicated decontamination room must be completed, fully equipped and operational to ensure that all reusable dental instruments are appropriately cleaned, sterilised and stored following use in keeping with best practice as outlined in HTM 01-05. This includes the following:

The inspectors observed that a dedicated decontamination room has been completed. The room is fully equipped and has been operational for approximately two weeks prior to the inspection. Discussion with Mr Scullion and Ms McKeown demonstrated that all reusable dental instruments are appropriately cleaned, sterilised and stored following use in keeping with best practice as outlined in HTM 01-05. All instruments are bagged and dated with the appropriate expiry date.

The establishment of a fully functioning dedicated decontamination room separate from patient treatment areas. The layout of the room should be in keeping with best practice as indicated in HTM 01-05 (2013 edition and PEL(13) (13), which replaced PEL (12) 23).

Observations made evidenced that the layout of the decontamination room is in keeping with HTM 01-05. Space is provided for clean and dirty set down areas, work surfaces were uncluttered and easy to clean and the floor covering was coved and sealed at the edges.

A dedicated hand wash basin is available with adequate supplies of liquid soap, hand cream and paper towels available. A personal Protective Equipment (PPE) station has been provided for staff.

A dirty to clean flow is in place and two sinks are provided for the manual cleaning of instruments. A procedure for manual cleaning is provided for staff along with appropriate equipment.

The cessation of the decontamination of dental instruments in dental surgeries.

Mr Scullion and Ms McKeown confirmed that the decontamination of all dental instruments is now undertaken in the dedicated decontamination room. There is a robust transport system in place for the movement of soiled and decontaminated instruments from the surgeries to and from the decontamination room.

All instruments are bagged and dated with the appropriate expiry date and the storage of the decontaminated instruments complies with best practice guidance.

Provision and implementation of an automated validated washer disinfectant within the decontamination process.

The inspectors observed that a washer disinfectant has been installed. Discussion with the practice manager confirmed that it is being used in line with best practice and she was aware of the correct procedures for loading and unloading instruments from the washer disinfectant.

A review of records confirmed that the washer disinfectant was validated on commissioning. A dedicated logbook has been established and the relevant periodic tests are undertaken and recorded in line with HTM 01-05.

Mr Scullion and Ms McKeown confirmed that a procedure for the use of the washer disinfectant is in place and includes that the cycle parameters are recorded using an automatic data logger recording system. Arrangements are in place to upload and review the information recorded on the data logger on a monthly basis.

Certificates of training in the use of the washer disinfectant were available for Ms McKeown and two members of the dental nursing staff.

8.0 CONCLUSION

Review of documentation, discussion with Mr Scullion and Ms McKeown, the practice manager, and observations made during the inspection evidenced that the necessary actions have been taken to comply with the Failure to Comply Notice.

Mr Scullion was issued with a letter of confirmation of compliance following the inspection.

9.0 Quality Improvement Plan

The findings of this inspection were discussed with Mr Joseph Scullion and Ms Breige McKeown, the practice manager, as part of the inspection process.

This inspection resulted in no recommendations or requirements being made. The registered provider is asked to sign the appropriate page confirming he is assured about the factual accuracy of the content of the report.

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.

Enquiries relating to this report should be addressed to:

Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Philip Colgan
Inspector/Quality Reviewer

Date



The Regulation and Quality Improvement Authority

No requirements/recommendations resulted from the announced inspection of Finaghy Dental Practice undertaken on 06 May 2014 and I agree ~~do not agree~~ with the content of the report.

** Please delete as appropriate*

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

SIGNED: J. Dav
Registered Provider

SIGNED: _____
Registered Person in Control
(or Designated Person in Control)

NAME: JOSEPH SCULLION
(PRINT)

NAME: _____
(PRINT)

DATE: 7/5/14

DATE: _____

The registered provider/manager is required to sign this declaration and return to:

The Regulation and Quality Improvement Authority
9th floor
Riverside Tower
5 Lanyon Place
Belfast
BT1 3BT

DATE RECEIVED	APPROVED	SIGNATURE OF INSPECTOR
13/5/14	Yes	<u>[Signature]</u>

13 MAY 2014

