

# Unannounced Enforcement Compliance Inspection Report 05 January 2017



## Railway Dental Care

**Type of service: Independent Hospital – Dental Treatment**

**Address: 9 Railway Street, Strabane, BT82 8EG**

**Tel no: 028 71382750**

**Inspector: Stephen O'Connor**

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Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An unannounced inspection of Railway Dental Care took place on 05 January 2017 from 10:00 to 10:45.

The purpose of the inspection was to assess the level of compliance achieved in relation to a failure to comply notice, FTC/IHC-DT/11510/2016-17/01, issued on 13 December 2016. The date for compliance with the notice issued on 13 December 2016 was 14 February 2017.

On 23 December 2016 Mr Kennedy contacted RQIA to advise that compliance had been achieved and requested the compliance inspection be undertaken on an earlier date.

### **FTC Ref: FTC/IHC-DT/11510/2016-17/01**

Evidence was available during this inspection to confirm that systems and processes have been implemented to address the deficits identified with the recruitment and selection of staff. RQIA is satisfied that full compliance had been achieved with the above failure to comply notice.

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 and the Department of Health, Social Services and Public Safety (DHSSPS) Minimum Standards for Dental Care and Treatment (2011).

While we assess the quality of services provided against regulations and associated DHSSPS care standards, we do not assess the quality of dentistry provided by individual dentists.

## 1.1 Inspection outcome

As indicated above, evidence was available to validate full compliance with the above failure to comply notice.

As a result of the findings of this inspection a confirmation of compliance letter was issued.

All enforcement notices for registered agencies/services are published on RQIA's website at: <https://www.rqia.org.uk/inspections/enforcement-activity/current-enforcement-activity/>

## 1.2 Actions/enforcement taken following the most recent care inspection

Following an announced follow-up care inspection on 01 December 2016 a failure to comply notice was issued with regards to recruitment and selection of staff. The date for compliance was 14 February 2017.

## 2.0 Service details

|   |   |
|---|---|
| <b>Registered organisation/registered person:</b><br>Mr Gordon Kennedy                  | <b>Registered manager:</b><br>Mr Gordon Kennedy |
| <b>Person in charge of the practice at the time of inspection:</b><br>Mr Gordon Kennedy | <b>Date manager registered:</b><br>4 March 2013 |
| <b>Categories of care:</b><br>Independent Hospital (IH) – Dental Treatment              | <b>Number of registered places:</b><br>1        |

## 3.0 Methods/processes

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

- discussion with Mr Gordon Kennedy, registered person
- discussion with the practice manageress
- review of relevant records
- evaluation and feedback

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 01 December 2016

The requirements and recommendations made during the most recent inspection were not reviewed during this unannounced enforcement compliance inspection. These will be reviewed during the next announced care inspection.

### 4.2 Inspection findings

FTC/IHC-DT/11510/2016-2017/01

The Independent Health Care Regulations (Northern Ireland) 2005 as amended

Regulation 19 (2) A person is not fit to work in or for the purposes of an establishment, or for the purposes of an agency unless –

(d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 2.

#### SCHEDULE 2

INFORMATION REQUIRED IN RESPECT OF PERSONS SEEKING TO CARRY ON, MANAGE OR WORK AT AN ESTABLISHMENT OR AGENCY

1. Positive proof of identity including a recent photograph.

## 2. Either –

- (a) where a certificate is required for a position that falls within Regulation 9 of the Police Act 1997 (Criminal Records) (Disclosure) Regulations (Northern Ireland) 2008 a, an enhanced criminal record certificate issued under section 113B of the Police Act 1997 which includes, as applicable, suitability information relating to adults (within the meaning of sections 113BB(2) of that Act) or suitability information relating to children (within the meaning of section 113BA(2) of that Act) or both; or
- (b) in any other case, a criminal record certificate issued under section 113A of the Police Act 1997.

3. Two written references relating to the person, including a reference from the person's present or most recent employers, if any.

4. Where a person has previously worked in a position whose duties which involved work with children or vulnerable adults, verification, so far as reasonably practicable, of the reason why he ceased to work in that position.

5. Documentary evidence of any relevant qualifications or accredited training.

6. A full employment history, together with a satisfactory written explanation of any gaps in employment.

7. Where he is a health care professional, details of his registration with the body (if any) responsible for regulation of members of the health care profession in question.

## 8. Details of any criminal offences –

- (a) of which the person has been convicted, including details of any convictions which are spent within the meaning of Article 3 of the Rehabilitation of Offenders (Northern Ireland) Order 1978(a) and which may be disclosed by virtue of the Rehabilitation of Offenders (Exceptions) Order (Northern Ireland 1979)(b); or
- (b) in respect of which he has been cautioned by a constable and which, at the time the caution was given, he admitted.

9. Confirmation that he is physically and mentally fit to fulfil his duties and responsibilities.

10. Details of any professional indemnity insurance.

The inspection findings of the actions specified in the failure to comply (FTC) notice are as follows:

**The registered person must ensure that at all times staff are recruited and employed in accordance with statutory legislation and mandatory requirements. This includes the receipt of a satisfactory AccessNI enhanced disclosure check prior to commencement of employment.**

Mr Kennedy confirmed that no new staff have been recruited since the previous inspection and that there are no staff currently in the process of being recruited.

Discussion with Mr Kennedy and the practice manageress evidenced that they understand their roles and responsibilities in relation to recruitment and selection of

staff. Mr Kennedy confirmed that should staff be recruited in the future they will be recruited in accordance with statutory legislation and mandatory requirements. This will include ensuring that an AccessNI enhanced disclosure check is in place prior to any new staff, including self-employed staff commencing work in the future.

Review of documentation evidenced that an AccessNI enhanced disclosure check had been undertaken and received for the staff member identified during the previous inspection. All relevant information in respect of this check had been recorded in keeping with the AccessNI Code of Practice.

**The registered person must ensure that the staff recruitment policy and procedure contains details of all the required information as listed within Regulation 19 (2) and Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 as amended.**

Review of the recruitment policy demonstrated that it had been further developed following the previous announced care inspection. The date of implementation has been recorded on the updated policy.

Mr Kennedy is named in the policy as the person with overall responsibility for the recruitment of staff. The policy includes the procedure for ensuring that all required information as listed within Regulation 19 (2) and Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 will be sought and retained. The policy also details the procedure for completing the newly developed employee checklist and that the practice manageress will review the employee checklist to provide assurances that all recruitment documentation has been sought and retained.

**The registered person must implement robust monitoring systems to ensure that the recruitment process is compliant with statutory legislation and mandatory requirements.**

Mr Kennedy and the practice manageress confirmed during discussions that they understood what was required to be obtained prior to any new staff commencing employment at the practice.

Review of documentation evidenced that an employee checklist has been developed since the previous inspection. The employee checklist includes all of the required information as outlined in Regulation 19 (2) and Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005. Mr Kennedy confirmed that this checklist will be completed and retained.

As discussed the recruitment policy includes the procedure for completing the new employee checklist and it identifies that Mr Kennedy is responsible for completing the checklist. The policy also details that the practice manageress will review the checklist to ensure that all documentation has been sought and retained.

**The registered person must ensure that all staff involved in recruitment processes receive training or refresher training in safeguarding of children and vulnerable adults.**

Mr Kennedy confirmed that he has overall responsibility for the recruitment of staff and that he will be supported by the practice manageress.

Review of documentation evidenced that Mr Kennedy and the practice manageress had completed training in safeguarding of children and vulnerable adults on the 11 December 2016 and 15 December 2016. It was also confirmed that other staff in the practice had completed this training on various dates during December 2016.

## **Conclusion**

The inspection on 05 January 2017 found that the necessary improvements to comply with the regulation set out in the notice had been made. RQIA is satisfied that full compliance had been achieved with the above failure to comply notice.

### **5.0 Quality improvement plan**

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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.



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