

Announced Follow-up Care Inspection Report

27 November 2017



Gentle Dental Care

Type of Service: Independent Hospital (IH) – Dental Treatment Address: 58 Lisburn Road, Belfast BT9 6AF Tel No: 028 9032 6795 Inspector: Winifred Maguire

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Assurance, Challenge and Improvement in Health and Social Care

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 service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a registered dental practice with four registered places providing private dental treatment including orthodontics, implants and oral surgery with sedation.

3.0 Service details

Registered Providers:	Registered Manager:
Mrs Lucy Stock & Mr Adam Jaffa	Mr Adam Jaffa
Person in charge at the time of inspection:	Date manager registered:
Mr Adam Jaffa	22 November 2012
Categories of care:	Number of registered places:
Independent Hospital (IH) – Dental Treatment	4

4.0 Inspection summary

An announced inspection took place on 27 November 2017 from 10.00 to 11.00.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003; 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).

The inspection focused on the progress made on the areas for improvement in relation to recruitment and selection practice identified during the last care inspection on 14 June 2017.

The findings of this report will provide the practice with the necessary information to assist them to fulfil their responsibilities, and enhance practice and patients' experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mr Adam Jaffa, registered manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 14 June 2017

Issues of concern were identified in relation to recruitment and selection practice during the inspection on 14 June 2017.

RQIA were concerned that the safeguards to protect and minimise risk to patients, during recruitment, had been compromised.

Following consultation with senior management in RQIA, it was agreed that a meeting would be held with the registered persons with the intention of issuing a failure to comply notice.

A meeting was held on 27 June 2017 at the offices of RQIA. At this meeting, Mr Adam Jaffa, registered person, provided a robust action plan regarding contingency arrangements he had put in place for recruitment of staff, in a staff crisis situation, to prevent a reoccurrence. RQIA were assured that the appropriate actions to address the identified issues have already being taken and subsequently a failure to comply notice was not issued.

Two areas of improvement against the regulations were made in relation to recruitment and selection practice.

As a result of the findings of the inspection on 14 June 2017 and the subsequent meeting on 27 June 201, a decision was made to undertake a follow-up inspection within the next six months.

This follow up inspection was conducted 27 November 2017 and findings are outlined in this report.

5.0 How we inspect

During the inspection the inspector met with Mr Adam Jaffa, registered manager.

The following records were examined during the inspection:

- The staff register
- Three new members of staff recruitment information
- A log of staff AccessNI enhanced disclosures
- Induction programmes

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 14 June 2017

The most recent inspection of the practice was an announced care inspection.

The completed QIP was returned and approved by the care inspector.

6.2 Review of areas for improvement from the last care inspection dated 14 June 2017

Areas for improvement from the last care inspection			
Action required to ensure compliance with The Independent Health Care Regulations (Northern Ireland) 2005		Validation of compliance	
Area for improvement 1 Ref: Regulation 19 (2) Schedule 2, as amended Stated: First time	The registered person must ensure that AccessNI enhanced disclosure checks are undertaken and received prior to any new staff, including self-employed staff, commencing work in the future.		
	Action taken as confirmed during the inspection: Discussion with Mr Jaffa and a review of the staff register confirmed that three new members of staff had been recruited since the previous inspection. A review of these staff files and a log of staff AccessNI enhanced disclosures, confirmed that all three members of staff had an AccessNI enhanced disclosure undertaken and received prior to commencement of work in the practice.	Met	
Area for improvement 2 Ref: Regulation 19 (2) Schedule 2, as amended Stated: First time	The registered person must ensure that all information as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005, as amended, is sought and retained for all staff, including self-employed staff, who commence work in the future. Ref: 6.4 Action taken as confirmed during the inspection : Three new members of staff recruitment information was reviewed and it was confirmed all information as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005, as amended, had been sought and retained for	Met	
	these staff prior to commencing work in the practice. All three staff had also completed induction programmes.		

6.3 Inspection findings

Areas of good practice

Recruitment and selection practice had improved and now provided the safeguards to protect and minimise risk to patients.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required nor included as part of this inspection report.





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