



The Regulation and
Quality Improvement
Authority

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY
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VARIATION TO REGISTRATION INSPECTION REPORT

Inspection No:	20081
Name of Establishment:	Hamilton Road Dental
Inspector's Name:	Stephen O'Connor
Date of Inspection:	22 September 2014

1.0 GENERAL INFORMATION

Name of establishment:	Hamilton Road Dental
Address:	42 Hamilton Road Bangor BT20 4LE
Telephone number:	028 91272525
Registered Organisation/Responsible individual:	Hamilton Road Dental Care Limited Mr Jonathan Millar
Registered Manager:	Mr Jonathan Millar
Person-in-charge of the establishment at the time of inspection:	Mr Jonathan Millar
Registration Category:	IH-DT
Type of service provision:	Private dental treatment
Maximum number of places registered: (dental chairs)	3 increasing to 4 following this inspection
Date and type of previous inspection:	Announced Inspection 06 August 2013
Date and time of inspection:	22 September 2014 14:00 – 16:00
Name of care inspector:	Stephen O'Connor
Name of estates inspector:	Colin Muldoon

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 independent hospitals providing dental treatment. A minimum of one inspection per year is required and this may be announced or unannounced.

3.0 PURPOSE OF VARIATION TO REGISTRATION INSPECTION

The purpose of the variation to registration inspection is to determine compliance with:

- The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005;
- The Independent Health Care Regulations (Northern Ireland) 2005; and
- The Regulation and Improvement Authority (Independent Health Care) (Fees and Frequency of Inspections) (Amendment) Regulations (Northern Ireland) 2011.

The purpose of this inspection was to review the arrangements in the practice in relation to the increase in dental chairs, the relocation of the practice to new premises and the readiness of the practice for the provision of private dental care and treatment associated with the application to vary the registration of the practice.

4.0 METHODS/PROCESSES

The methods/process used in this inspection included the following:

- review of the submitted variation to registration information;
- discussion with Mr Jonathan Millar, responsible individual;
- discussion with staff;
- assessment of the environment;
- review of documentation required by legislation and good practice; and
- evaluation and feedback.

5.0 PROFILE OF ESTABLISHMENT

Following initial registration of the practice on the 7 March 2012 an application to vary the registration of the practice has been submitted to RQIA to increase the number of dental chairs from three to four and to relocate the practice.

Hamilton Road Dental is located within a former residential property which has been adapted and converted to accommodate a dental practice. The building is situated in the centre of Bangor town close to public transport routes. Nearby on street and public car parking is available for patients.

The new premises have the potential to provide six dental surgeries. Mr Millar is aware that an application to increase the number of registered dental chairs must be submitted to RQIA if additional dental chairs are established in the future.

The establishment is accessible for patients with a disability as two surgeries and a disabled accessible toilet are located on the ground floor.

Hamilton Road Dental operates four dental chairs, providing both private and NHS dental care. A dedicated decontamination room, reception, waiting area, toilets, and staff and storage facilities are also provided.

Mr Millar is supported by a team of staff including an associate dentist, a dental hygienist, dental nurses and receptionist staff.

Mr Millar has been the responsible individual and registered manager of Hamilton Road Dental since initial registration with RQIA on the 7 March 2012.

The establishment's statement of purpose outlines the range of services provided.

The practice is registered as an independent hospital (IH) providing dental treatment (DT).

Following the recent move to the existing premises a new certificate of registration will be issued by RQIA reflecting the increase in registered dental chairs and the new address of the practice.

6.0 SUMMARY

An application was submitted to RQIA by Mr Jonathan Millar, responsible individual, to vary the current registration of Hamilton Road Dental. The application was to increase the number of dental chairs from three to four and to relocate the practice. The practice was initially registered on 7 March 2012. The focus of the inspection was to review the readiness of the practice for the provision of private dental care and treatment associated with the application of variation. The variation application submitted to RQIA was reviewed as part of the inspection process.

The inspection was carried out by Stephen O'Connor on 22 September 2014 between the hours of 14:00 and 16:00. Mr Colin Muldoon, estates inspector, undertook an estates inspection of the new premises at the same time. The report and findings of the estates inspection will be issued under separate cover.

Mr Millar facilitated the inspection process and was available during the inspection and for verbal feedback at the conclusion of the inspection.

The inspector used the variation to registration inspection as an opportunity to review the requirements and recommendations outlined in the previous quality improvement plan. Further details can be found in section 7.0 of this report.

During the course of the inspection the inspector discussed operational issues, examined a selection of records and carried out a general inspection of the establishment.

Mr Millar informed the inspectors that the old premises ceased to operate on the 4 September 2014 and that the new premises opened on the 9 September 2014.

A range of policies and procedures were in place. Mr Millar confirmed that policies and procedures have been reviewed and where necessary updated to reflect the new arrangements in the practice.

Dental practices in Northern Ireland have been 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, should have been fully implemented by November 2012. HTM 01-05 was updated in 2013 and Primary Care Dental Practices were advised of this through the issue of Professional Estates Letter (PEL) (13) 13 on 1 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.

A separate decontamination room is available at this practice. The room is spacious and fully equipped. Discussion with Mr Millar and staff and a review of the arrangements in place confirmed that the decontamination room and the equipment in place is sufficient to meet the demands of the practice.

Arrangements are in place to ensure that all reusable dental instruments are cleaned, sterilised, and stored following use. A recommendation was made for the second time, that all wrapped instruments should be dated with the relevant expiry date. Mr Millar confirmed that the washer disinfectant and steam steriliser were not validated following installation in the new premises. A requirement was made to address this.

Review of documentation and discussion with staff demonstrated that in the main periodic tests are undertaken and recorded in keeping with HTM 01-05. A recommendation was made that the steam steriliser logbook must be further developed to ensure it fully reflects the periodic testing regime as specified by the manufacturer and HTM 01-05. The logbook must include the details of the weekly safety checks.

The inspectors undertook a tour of the premises, which were maintained to a high standard of maintenance and décor. It was observed that the covering of the dental chair in surgery four is torn in places. A recommendation was made that this should be repaired/reupholstered.

The practice has four dental surgeries, each of which has an intra-oral x-ray machine. Discussion with Mr Millar and review of documentation demonstrated that a critical examination has been undertaken by the appointed radiation protection advisor (RPA) on the 12 September 2014 in respect of three of the four intra-oral x-ray machines. A requirement was made that a critical examination is undertaken on the intra-oral x-ray machine in surgery four prior to this surgery going operational.

The RPA report detailing the findings of the critical examination of the three intra-oral x-ray machines examined on the 12 September 2014 found a high standard of radiation protection. However, review of the report and discussion with Mr Millar demonstrated that not all recommendations made in the RPA report have been addressed. A recommendation was made to address this.

Mr Millar confirmed that no new staff have been recruited in relation to this variation application, existing part time staff are increasing their hours. However, Mr Millar is fully aware of the procedures to be followed if additional staff are required in the future. Robust recruitment policies and procedures are in place.

Following this inspection the registration of four dental chairs is approved.

Two requirements and four recommendations were made as a result of this variation to registration inspection, details can be found in the main body of the report and the attached Quality Improvement Plan (QIP).

The inspector would like to thank Mr Millar and staff for their helpful discussions, assistance and hospitality throughout the inspection process.

7.0 Follow-up on Previous Issues

No	Regulation Ref.	Requirements	Action Taken – as confirmed during this inspection	Inspector's Validation of Compliance
1	25(2)(b)	Ensure that a dedicated decontamination room which complies with best practice is established.	A dedicated decontamination room has been established in the new premises. The layout and design of the room is in keeping with HTM 01-05. Additional information can be found in section 8.3 of this report. This requirement has been addressed.	Compliant
2	15(3)	Ensure that all reusable three in one tips are reprocessed following each patient use.	Discussion with a dental nurse demonstrated that reusable three in one tips are reprocessed following each patient use. This requirement has been addressed.	Compliant

No	Minimum Standard Ref.	Recommendations	Action Taken – as confirmed during this inspection	Inspector's Validation of Compliance
1	13	All wrapped instruments should be dated with the relevant expiry date.	Discussion with a dental nurse demonstrated that all wrapped instruments are dated with the date processed. This recommendation has not been addressed and it is now stated for the second time. Additional information can be found in section 8.3 of this report.	Not compliant
2	13	The skin on the steriliser door should be replaced to remove rust and aid effective cleaning.	It was observed that the skin on the steriliser door is in a good state of repair. This recommendation has been addressed.	Compliant

8.0 INSPECTION FINDINGS

8.1 Statement of purpose

Review of the statement of purpose demonstrated that it has been amended to reflect the increase in dental chairs and the details of the new premises.

8.2 Patient Guide

A patient guide was prepared in a recognised format which covered the key areas and themes specified in regulation 8 of The Independent Health Care Regulations (Northern Ireland) 2005.

8.3 Infection prevention and control/decontamination

Dental practices in Northern Ireland have been 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, should have been fully implemented by November 2012. HTM 01-05 was updated in 2013 and Primary Care Dental Practices were advised of this through the issue of Professional Estates Letter (PEL) (13) 13 on 1 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.

A separate decontamination room is available at this practice. The room is spacious and fully equipped. Discussion with Mr Millar and staff and a review of the arrangements in place confirmed that the decontamination room and the equipment in place is sufficient to meet the demands of the practice.

Arrangements are in place to ensure that all reusable dental instruments are cleaned, sterilised, and stored following use. Following processing instruments are wrapped and dated with the date processed. As discussed in section 7.0 of this report a recommendation was made for the second time that all wrapped instruments should be dated with the relevant expiry date. The inspector discussed the new storage timeframes as specified in the 2013 edition of HTM 01-05.

A washer disinfectant and steam steriliser have been installed. Review of documentation and discussion with Mr Millar demonstrated that this equipment was not validated following installation in the new premises. A requirement was made that the washer disinfectant and steam steriliser must be validated and arrangements put in place to ensure annual revalidation thereafter.

Review of equipment logbooks evidenced that in the main periodic tests are undertaken and recorded in keeping with HTM 01-05. A recommendation was made that the steam steriliser logbook must be further developed to ensure it fully reflects the periodic testing regime as specified by the manufacturer and HTM 01-05. The logbook must include the details of the weekly safety checks.

8.4 Environment

The inspectors undertook a tour of the premises, which were maintained to a high standard of maintenance and décor. As discussed previously an estates inspection was also undertaken during this inspection, and identified issues will be addressed under separate cover.

The inspectors observed that the covering of the dental chair in surgery four is torn in places. This was discussed with Mr Millar and a recommendation was made that this should be repaired/reupholstered.

8.5 Radiology

The practice currently has four surgeries each of which has an intra-oral x-ray machine.

A critical examination had been undertaken by the appointed radiation protection advisor (RPA) on 13 September 2014 in respect of three of the four intra-oral x-ray machines. Mr Millar informed the inspectors that the critical examination of the fourth intra-oral x-ray was not undertaken on the 13 September 2014 as the machine had not been fully installed. A requirement was made to ensure that the RPA undertakes a critical examination on the intra-oral x-ray machine in surgery four prior to this surgery going operational. Any recommendations made in the RPA report must be addressed and records retained for inspection.

A review of the critical examination report demonstrated that a high standard of radiation protection is in place. However, not all recommendations made in the critical examination report have been addressed. A recommendation was made that the recommendations made by the RPA in regards to the critical examination of three intra-oral x-ray machines should be addressed. Records should be retained confirming this.

Mr Millar is the radiation protection supervisor (RPS) for the practice. Mr Millar confirmed that all x-rays are graded for quality and that the justification and clinical evaluation of all x-rays taken is recorded on the patient's electronic notes. The inspector observed that the intra-oral x-ray machines are fitted with rectangular collimators in keeping with best practice guidance and that the local rules are on display near the x-ray machines.

8.6 Recruitment of staff

Mr Millar confirmed that no new staff have been recruited in relation to this variation application, existing part time staff are increasing their hours. However, Mr Millar is fully aware of the procedures to be followed if additional staff are required in the future. Robust recruitment policies and procedures are in place.

8.7 Emergency arrangements/management of medicines

Appropriate resuscitation procedures were in place and emergency equipment was readily available for the management of medical emergencies in keeping with the Resuscitation Council (UK) guidance.

The inspector reviewed the arrangements in place for the management of medications retained within the practice.

9.0 Conclusion

The variation to the registration in regards to the increase in dental chairs from three to four and relocation of the practice was approved during this inspection.

QUALITY IMPROVEMENT PLAN

The findings of this inspection were discussed with Mr Millar as part of the inspection process.

This inspection resulted in no requirements or recommendations being made. The registered provider/manager is asked to sign the appropriate page confirming they are 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 Authority 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**

**Stephen O'Connor
Inspector/Quality Reviewer**

Date

QUALITY IMPROVEMENT PLAN

VARIATION TO REGISTRATION INSPECTION

HAMILTON ROAD DENTAL

22 SEPTEMBER 2014

The areas where the service needs to improve, as identified during this inspection visit, are detailed in the inspection report and Quality Improvement Plan.

The specific actions set out in the Quality Improvement Plan were discussed with Mr Millar either during or after the inspection visit.

Registered providers/managers should note that failure to comply with regulations may lead to further enforcement and/or prosecution action as set out in The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

It is the responsibility of the registered provider/manager to ensure that all requirements and recommendations contained within the Quality Improvement Plan 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.

STATUTORY REQUIREMENTS

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Independent Health Care Regulations (NI) 2005 as amended.

NO.	REGULATION REFERENCE	REQUIREMENTS	NUMBER OF TIMES STATED	DETAILS OF ACTION TAKEN BY REGISTERED PERSON(S)	TIMESCALE
1	15 (2) (b)	The washer disinfectant and steam steriliser must be validated and arrangements put in place to ensure annual revalidation thereafter. Ref: 8.3	One		Two months
2	15 (2) (b)	Ensure that the appointed radiation protection advisor (RPA) undertakes a critical examination on the intra-oral x-ray machine in surgery four prior to this surgery going operational. Any recommendations made in the RPA report must be addressed and records retained for inspection. Ref: 8.5	One		Two months

RECOMMENDATIONS

These recommendations are based on The Minimum Standards for Dental Care and Treatment (2011), research or recognised sources. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

NO.	MINIMUM STANDARD REFERENCE	RECOMMENDATIONS	NUMBER OF TIMES STATED	DETAILS OF ACTION TAKEN BY REGISTERED PERSON(S)	TIMESCALE
1	13	All wrapped instruments should be dated with the relevant expiry date. Ref: 7.0 & 8.3	Two		From the date of inspection
2	13	The steam steriliser logbook must be further developed to ensure it fully reflects the periodic testing regime as specified by the manufacturer and HTM 01-05. The logbook must include the details of the weekly safety checks. Ref: 8.3	One		One month
3	13	The damaged dental chair in surgery four should be repaired/reupholstered. Ref: 8.4	One		Two months
4	13	The recommendations made by the RPA in the report dated 13 September 2014 in regards to the critical examination of three intra-oral x-ray machines should be addressed. Records should be retained confirming this. Ref: 8.5	One		On month

The registered provider/manager is required to detail the action taken, or to be taken, in response to the issues raised in the Quality Improvement Plan. The Quality Improvement Plan is then to be signed below by the registered provider and registered manager and returned to:

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

SIGNED: _____

NAME: _____
Registered Provider

DATE _____

SIGNED: _____

NAME: _____
Registered Manager

DATE _____

DATE	APPROVED YES/NO	SIGNATURE OF INSPECTOR