

Announced Variation to Registration Care Inspection Report 26 February 2018



Harbour Dental Practice

Type of Service: Independent Hospital (IH) – Dental Treatment

Address: 13 The Parade, Donaghadee, BT21 0AE

Tel No: 02891 883513

Inspector: Norma Munn

www.rgia.org.uk

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 two registered places.

3.0 Service details

Organisation/Registered Provider: Mr Michael Long	Registered Manager: Mr Michael Long
Person in charge at the time of inspection: Mr Michael Long	Date manager registered: 6 March 2012
Categories of care: Independent Hospital (IH) - Dental Treatment	Number of registered places: Two increasing to three following the inspection

4.0 Inspection summary

An announced variation to registration inspection of Harbour Dental Practice took place on 26 February 2018 from 09.45 to 10.35.

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).

An application for a variation of the registration of the practice was submitted to RQIA by Mr Michael Long, registered person. The application was to increase the number of registered dental chairs from two to three.

The inspection sought to review the readiness of the practice for the provision of private dental care and treatment associated with the application of variation for one additional dental chair.

There were examples of good practice found in relation to infection prevention and control and decontamination, maintenance of the environment and staff recruitment.

No areas requiring improvement were identified during this inspection.

The variation to registration to increase the number of registered dental chairs from two to three was approved from a care perspective following this inspection.

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

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.

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 Long, registered person, 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 17 August 2017

No further actions were required to be taken following the most recent inspection on 17 August 2017.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- review of the submitted variation to registration application
- the previous care inspection report
- patient guide
- statement of purpose
- evaluation and feedback

During the inspection the inspector met with Mr Long, registered person, one dental nurse and one receptionist. A tour of the premises was also undertaken.

The following records were examined during the inspection:

- recruitment and selection
- infection prevention and control and decontamination
- maintenance arrangements

The findings of the inspection were provided to Mr Long, registered person, at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 17 August 2017

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

6.2 Review of areas for improvement from the last care inspection dated 17 August 2017

There were no areas for improvement made as a result of the last care inspection.

6.3 Inspection findings

Statement of Purpose

A statement of purpose was prepared in a recognised format which covered the key areas and themes outlined in Regulation 7, Schedule 1 of The Independent Health Care Regulations (Northern Ireland) 2005. Mr Long has agreed to add the details of any new staff employed to the statement of purpose.

Patient Guide

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

Infection prevention and control/decontamination

The arrangements in regards to the newly established third dental surgery were reviewed. The flooring in the new surgery was impervious and coved where it meets the walls and kicker boards of cabinetry. The surgery was tidy and uncluttered and work surfaces were intact and easy to clean.

Sharps boxes were safely positioned to prevent unauthorised access and had been signed and dated on assembly. It was confirmed during discussion that used sharps boxes will be locked with the integral lock and stored ready for collection away from public access.

A dedicated hand washing basin is available in the dental surgery and Mr Long has agreed to ensure that hand hygiene signage is displayed, hand soap and disposable hand towels are wall mounted and a foot or sensor operated clinical waste bin is provided in keeping with best practice. Personal protective equipment (PPE) was readily available.

Staff confirmed that the newly installed dental chair has an independent bottled-water system and that the dental unit water lines (DUWLs) will be managed in keeping with the manufacturer's instructions.

Appropriate arrangements are in place in the practice for the storage and collection of general and clinical waste, including sharps waste.

Staff confirmed that the practice has sufficient dental instruments to meet the needs of the new surgery once it is operational.

A decontamination room separate from patient treatment areas and dedicated to the decontamination process is available. Appropriate equipment, including one washer disinfectant and two steam sterilisers, has been provided to meet the practice requirements. Mr Long confirmed that the decontamination equipment will be sufficient to meet the needs of the three operational surgeries. A review of documentation evidenced that equipment used in the decontamination process has been appropriately validated. A review of equipment logbooks evidenced that periodic tests are undertaken and recorded in keeping with Health Technical Memorandum (HTM) 01-05 Decontamination in primary care dental practices.

It was confirmed that the practice continues to audit compliance with HTM 01-05 using the Infection Prevention Society (IPS) audit tool.

A range of policies and procedures were in place in relation to decontamination and infection prevention and control.

Environment

A tour of the premises was undertaken, including the newly established third dental surgery on the first floor and a new consultation room. The premises were maintained to a high standard of maintenance and décor.

Arrangements were in place for maintaining the environment. This included the servicing of firefighting equipment, weekly fire detector testing and monthly functional emergency lighting testing.

A legionella risk assessment had been undertaken and water temperatures are monitored and recorded as recommended.

A fire risk assessment had been undertaken and staff confirmed fire training and fire drills had been completed. Staff demonstrated that they were aware of the action to take in the event of a fire.

Radiology

Discussion with Mr Long confirmed that the new surgery will be used as a dental hygiene surgery and therefore x-ray equipment is not required in the surgery.

Recruitment of staff

Mr Long confirmed that one dental nurse has recently commenced work in the practice and an additional associate dentist will be recruited in the future.

Review of the staff personnel file of the new member of staff evidenced that all the relevant information as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 has been sought and retained.

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

Areas of good practice

There were examples of good practice found in relation to infection prevention and control and decontamination, maintenance of the environment and staff recruitment.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.4 Conclusion

The variation to the registration in regards to the increase in dental chairs from two to three was approved, by the care inspector, following this inspection.

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included as part of this inspection report.



The Regulation and
Quality Improvement
Authority

The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email info@rqia.org.uk

Web www.rqia.org.uk

 @RQIANews