

Inspection Report

28 September 2022



The Dental Centre Belfast

Type of service: Independent Hospital (IH) – Dental Treatment
Address: 315-317 Donegal Road, Belfast, BT12 6FQ
Telephone number: 028 9032 8765

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>, [The Independent Health Care Regulations \(Northern Ireland\) 2005](#) and the [Minimum Standards for Dental Care and Treatment \(March 2011\)](#)

1.0 Service information

Organisation/Registered Provider: J.O.E. Hudson Limited	Registered Manager: Mr Jack Hudson
Responsible Individual: Mr Jack Hudson	Date registered: 12 August 2020
Person in charge at the time of inspection: The practice manager	Number of registered places: Four
Categories of care: Independent Hospital (IH) – Dental Treatment	
Brief description of how the service operates: The Dental Centre Belfast is registered with the Regulation and Quality Improvement Authority (RQIA) as an independent hospital (IH) with a dental treatment category of care. The practice has four registered dental surgeries and provides general dental services, private and health service (HSC) treatment and does not offer conscious sedation.	

2.0 Inspection summary

This was an unannounced follow-up inspection undertaken by a care inspector on 28 September 2022 from 10.00 am to 11.00 am.

The focus of the unannounced follow-up inspection was to ascertain the progress made to address the five areas for improvement made as a result of an unannounced care inspection carried out on 15 July 2022, which had been undertaken in response to receipt of information shared with RQIA from an anonymous source. The information received alleged issues in relation to infection prevention and control practises and the decontamination of reusable dental instruments.

Observations made, review of documentation and discussion with the practice manager and staff evidenced that all five areas for improvement have been met.

A variation to registration application had been submitted to RQIA prior to the previous inspection to increase the number of dental surgeries from two to four. At the time of the previous inspection, the variation to registration application had been granted from a care perspective however, separate approval had not been confirmed by the RQIA estates team. Since the previous inspection the application has been approved from an estates perspective. Therefore this practice now has four registered dental surgeries.

3.0 How we inspect

RQIA is required to inspect registered services in accordance with legislation. To do this, we gather and review the information we hold about the service, examine a variety of relevant records, meet and talk with staff and management and observe practices on the day of the inspection.

The information obtained is then considered before a determination is made on whether the practice is operating in accordance with the relevant legislation and minimum standards.

Prior to inspection we analysed the Quality Improvement Plan (QIP) submitted by Mr Hudson in respect of the inspection carried out on 15 July 2022.

During the inspection the inspector met with the practice manager and reviewed the areas of improvement as outlined in the previous QIP.

Examples of good practice are acknowledged and any areas for improvement are discussed with the person in charge and detailed in the QIP.

4.0 The inspection

4.1 What action has been taken to meet any areas for improvement identified at or since last inspection?

The most recent inspection of the establishment was an announced care inspection. The completed QIP was returned and approved by the care inspector.

Areas for improvement from the last inspection on 15 July 2022		
Action required to ensure compliance with The Independent Health Care Regulations (Northern Ireland) 2005		Validation of compliance
Requirement 1 Ref: Regulation 18 (2) Stated: First time	The responsible individual shall ensure that all staff receive appropriate infection prevention and control training to fulfil the duties of their role. Training records should also be retained.	Met
	Action taken as confirmed during the inspection: The practice manager stated that following the previous inspection a staff meeting was held to discuss the findings of the RQIA inspection and to inform staff the practice had subscribed to an online training platform to facilitate staff to complete IPC refresher training and other	

	<p>mandatory training.</p> <p>A review of individual staff training records demonstrated that all staff had completed relevant IPC training.</p> <p>The practice manager also demonstrated that a system was in place for ongoing monitoring of compliance with IPC training requirements.</p>	
<p>Requirement 2</p> <p>Ref: Regulation 18 (2)</p> <p>Stated: First time</p>	<p>The responsible individual shall ensure that all pressure vessels are inspected in accordance with the written scheme of examination.</p> <p>On completion a copy of the pressure vessel test should be submitted to RQIA with the returned QIP.</p> <p>Action taken as confirmed during the inspection:</p> <p>A review of documents confirmed that the compressor and the autoclave had been inspected in accordance with the written scheme of examination.</p>	<p>Met</p>
<p>Action required to ensure compliance with the Minimum Standards for Dental Care and Treatment (March 2011)</p>		<p>Validation of compliance</p>
<p>Recommendation 1</p> <p>Ref: Standard 13.2</p> <p>Stated: First time</p>	<p>The responsible individual shall ensure that the issues identified in relation to infection prevention and control are addressed as follows:</p> <ul style="list-style-type: none"> • declutter the decontamination room floor to ensure effective cleaning can take place • provide waste receptacles in accordance with best practice guidance • display laminated hand hygiene posters at each of the hand washing basins • provide disposable hand towels for patient and staff use in the identified toilet • provide wall mounted disposable hand towel dispensers in keeping with best practice guidance • ensure new unused sharps containers are stored in a clean area away from clinical waste 	<p>Met</p>

	<p>Action taken as confirmed during the inspection: A review of the decontamination room confirmed that the floor was free from clutter.</p> <p>A review of two dental surgeries confirmed that pedal operated waste receptacles were provided and laminated hand hygiene posters were in place at each of the hand washing basins.</p> <p>A review of the toilet areas confirmed that disposable hand towels were provided in wall mounted disposable hand towel dispensers in keeping with best practice guidance.</p> <p>A review of the storage arrangements confirmed that unused sharps containers are stored in a clean area away from clinical waste.</p>	
<p>Recommendation 2 Ref: Standard 13.1 Stated: First time</p>	<p>The responsible individual shall ensure that cleaning schedules are developed to include the arrangements for all areas of the practice; state the frequency of cleaning; identify who is responsible and ensure that cleaning records are maintained for all areas within the practice.</p> <p>Action taken as confirmed during the inspection: The cleaning arrangements of the dental practice were discussed with the practice manager. The use of individual pre-printed cleaning logbooks has been introduced, one for each dental surgery, one for the decontamination room and one to be completed in respect of the communal areas.</p> <p>It was noted that the logbooks reference the colour coded cleaning equipment to be used in each of the identified areas and includes a detailed checklist to be completed on a daily basis.</p> <p>The practice manager confirmed that each of the logbooks are audited on a weekly basis to ensure compliance.</p> <p>Discussion with staff members confirmed they were aware of their responsibilities in relation to cleaning duties and of maintaining records in this regard.</p>	<p style="text-align: center;">Met</p>

<p>Recommendation 3</p> <p>Ref: Standard 13.2</p> <p>Stated: First time</p>	<p>The responsible individual shall ensure that the infection prevention society (IPS) audit is revisited to ensure it is meaningful in identifying issues in relation to infection prevention and control. An action plan should be developed and embedded into practice to address any shortfalls identified during the audit process.</p>	<p style="text-align: center;">Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>It was evidenced that the most recent IPS audit was undertaken on 17 July 2022 and any areas identified for action have been addressed. The practice manager confirmed that the IPS audit will be completed six monthly on an ongoing basis.</p>		
<p>Recommendation 4</p> <p>Ref: Standard 13.4</p> <p>Stated: First time</p>	<p>The responsible individual shall ensure that all reusable dental instruments are appropriately stored following use and the expiry dates are recorded on the packaging in keeping with best practice guidance.</p>	<p style="text-align: center;">Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>Discussion with staff and review of the storage arrangements of reusable dental instruments demonstrated that processed packaged dental instruments have the expiry date recorded on the outer packaging. A weekly audit is undertaken of all reusable dental instruments in each of the surgeries and the decontamination room.</p>		

5.0 Quality Improvement Plan/Areas for Improvement

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



The Regulation and Quality Improvement Authority

7th Floor, Victoria House
15-27 Gloucester Street
Belfast
BT1 4LS

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
Twitter @RQIANews