

Announced Premises Inspection Report 15 September 2016



Moira Cosmetic Dental Ltd

Type of Service: Independent Hospital (IH) - Dental Treatment
Address: 81 Main Street, Moira, BT67 0LH
Tel No: 028 9261 1828
Inspector: K. Monaghan

1.0 Summary

An announced premises inspection of Moira Cosmetic Dental Ltd took place on 15 September 2016 from 10:25 to 11:40hrs.

The inspection sought to determine if this private dental practice was delivering safe, effective and compassionate care and if the service was well led.

Is care safe?

On the day of the inspection the premises supported the delivery of safe care. However some issues were identified for attention by the registered provider. Reference should be made to section 4.3.

Is care effective?

On the day of the inspection the premises supported the delivery of effective care.

Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care.

Is the service well led?

On the day of the inspection the management of the premises was considered to be well led.

This inspection was underpinned by The Independent Health Care Regulations (Northern Ireland) 2005 and the Minimum Standards for Dental Care and Treatment.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	2

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mrs. Naomi Bingham, Registered Manager and Ms. Natasha Donnelly, Acting Practice Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

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

1.2 Actions/enforcement taken following the most recent premises inspection

This was the first scheduled premises inspection to this dental practice. A review of the requirements and recommendations from the most recent premises inspection was not therefore relevant.

2.0 Service Details

Registered provider / responsible individual: Moira Cosmetic Dental Ltd / Mr. Derek Bingham	Registered manager: Mrs. Naomi Bingham
Person in charge of the dental practice at the time of inspection: Mrs. Naomi Bingham, Registered Manager	Date manager registered: 08 March 2012
Categories of care: Independent Hospital (IH) - Dental Treatment	Number of registered places: 2

3.0 Methods/processes

Prior to this premises inspection, the following records were reviewed:

- The statutory notifications over the past 12 months (no notifications)
- The RQIA concerns log (no concerns)

During this premises inspection discussions took place with Naomi Bingham, Registered Manager and Ms. Natasha Donnelly, Acting Practice Manager.

During this premises inspection, the following records were reviewed:

- A range of service records and in-house records relating to the maintenance and upkeep of the premises
- The legionella bacteria risk assessment report.
- Fire risk assessment report

4.0 The Inspection

4.1 Review of requirements and recommendations from the most recent care inspection on 05 July 2016

The most recent inspection of this private dental practice was an announced care inspection IN025209 on 05 July 2016. No requirements or recommendations were made during this care inspection.

4.2 Review of requirements and recommendations from the last premises inspection

This was the first scheduled premises inspection to this dental practice. A review of the requirements and recommendations from the most recent premises inspection was not therefore relevant.

4.3 Is care safe?

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this premises inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments.

Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this premises inspection.

A range of fire protection measures are in place for the premises. This includes smoke alarms and first aid fire-fighting equipment.

A number of issues were however identified for attention during this premises inspection. These are detailed in the 'areas for improvement' section below.

Comments and areas for improvement

1. It is good to report that Mrs. Bingham confirmed that the electrical equipment had been inspected and tested on 09 September 2016. The fixed wiring installation was also inspected and tested on 12 August 2011. The report for this inspection and test confirmed that the installation was satisfactory overall and in good condition. The interval for re-inspection and re-testing stated on the report was two years. Mrs. Bingham agreed to contact the electrician to check if a re-inspection and re-test should now be carried out. Subsequent to this premises inspection Ms Bingham confirmed to RQIA that the electrician had visited the premises again on 16 September 2016 and apart from one light that needs to be repaired (in hand) the installation was satisfactory and a new certificate will be issued. Ms. Bingham agreed to forward a copy of this certificate to RIQA.

Comments and areas for improvement continued

2. A fire risk assessment was carried out in January 2016. Copies of fire safety reference documents and an emergency fire plan were also available in the dental practice. In addition a fire drill was carried out on 03 May 2016. The need for emergency lighting in the premises was discussed during this premises inspection. In this regard it would be beneficial to consider the installation of one emergency light on each floor to assist with emergency escape during the winter months.
3. There was a legionella policy in place and a water risk assessment had been carried out. A written scheme of control had been draw up. This included a procedure for checking the water temperatures and a schematic drawing for the water systems in the premises. The water risk assessment should however be reviewed and updated to include the date that the risk assessment was carried out, more information in relation to the people at risk, an overall evaluation of the risk and the review arrangements. In addition the temperatures recorded during the monthly water temperature checks should be noted in the record for this activity. Reference should be made to recommendation 1 in the attached Quality Improvement Plan.
4. The decontamination room is equipped with a reverse osmosis water purification system to provide clean water for the decontamination equipment. This system was not however working at the time of this premises inspection. This system should be flushed at least twice each week until it is brought back into service. Reference should be made to recommendation 1 in the attached Quality Improvement Plan.
5. The overflow to the wash basin in the first floor surgery room should be sealed up in accordance with current good infection control practice. Reference should be made to recommendation 2 in the attached Quality Improvement Plan.

Number of requirements	0	Number of recommendations:	2
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4.4 Is care effective?

There are arrangements in place for routine premises management and upkeep as well as timely breakdown/repair maintenance.

This supports the delivery of effective care.

Number of requirements	0	Number of recommendations:	0
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4.5 Is care compassionate?

The areas of the premises reviewed during this premises inspection were well presented, comfortable, clean, free from malodours and adequately lit

This supports the delivery of compassionate care.

Number of requirements	0	Number of recommendations:	0
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4.6 Is the service well led?

Premises related policies and documentation are retained in a manner which is accessible to relevant people.

The registered person has dealt appropriately with issues relating to the premises and has been adequately supported and resourced by the registered responsible person.

There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate.

This supports a well led service.

Number of requirements	0	Number of recommendations:	0
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5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs. Naomi Bingham, Registered Manager and Ms. Natasha Donnelly, Acting Practice Manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all requirements and recommendations contained within the QIP 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 the Private Dental Practice. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises, RQIA would apply standards current at the time of that application.

5.1 Statutory requirements

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

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and the Minimum Standards for Dental Care and Treatment. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

5.3 Actions taken by the Registered Provider

The QIP should be completed and detail the actions taken to meet the legislative requirements stated. The registered provider should confirm that these actions have been completed and return completed QIP to Estates.Mailbox@rqia.org.uk for assessment by the inspector.

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. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan

Recommendations

Recommendation 1

Ref: Standard 14

Stated: First time

To be completed by:
11 November 2016 &
Ongoing

The water risk assessment should be reviewed and updated to include the date that the risk assessment was carried out, more information in relation to the people at risk, an overall evaluation of the risk and the review arrangements. In addition the temperatures recorded during the monthly water temperature checks should be noted in the record for this activity and the reverse osmosis water purification system should be flushed at least twice each week until it is brought back into service.

Response by registered provider detailing the actions taken:

This has now been updated as of 14/10/2016
this risk assessment has been expanded and review dates added in line with all other policies, our spreadsheet for recording temperatures has been ammended and the RO water system is now back in use

Recommendation 2

Ref: Standard 14

Stated: First time

To be completed by:
11 November 2016

The overflow to the wash basin in the first floor surgery room should be sealed up in accordance with current good infection control practice.

Response by registered provider detailing the actions taken:

after many complications we have sorced from the sink supplier a blanking plate which has been ordered and is due to arrive in the next few days

** Please ensure this document is completed in full and returned to Estates.Mailbox@rqia.org.uk from the authorised email address**



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