

Mullan Gallagher Dental Group RQIA ID: 11614 35 St Patricks Avenue Downpatrick BT30 6DW

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Inspector: Emily Campbell Inspection ID: IN023643

# Announced Care Inspection of Mullan Gallagher Dental Group

**04 November 2015** 

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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#### 1. Summary of Inspection

An announced care inspection took place on 4 November 2015 from 09.55 to 11.35. On the day of the inspection the management of medical emergencies and recruitment and selection were found to be safe, effective and compassionate. The outcome of the inspection found no areas of concern. Mullan Gallagher Dental Group was initially registered with RQIA as a partnership; Mr Peter Mullan has now retired from the practice and Mrs Ciara Gallagher has taken over as the sole owner. As this represents a new entity, a new application for registration was submitted to RQIA following the inspection.

This inspection was underpinned by 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, The DHSSPS Minimum Standards for Dental Care and Treatment (2011), Resuscitation Council (UK) guidelines on quality standards for cardiopulmonary resuscitation practice and training in primary dental care (November 2013), Resuscitation Council (UK) guidelines on minimum equipment list for cardiopulmonary resuscitation in primary dental care (November 2013), and the British National Formulary (BNF) guidelines on medical emergencies in dental practice.

#### 1.1 Actions/Enforcement Taken Following the Last Care Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last care inspection on 25 February 2015.

## 1.2 Actions/Enforcement Resulting from this Inspection

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

#### 1.3 Inspection Outcome

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

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

#### 2. Service Details

Registered Organisation/Registered Person: Mrs Ciara Gallagher Mr Peter Mullan	Registered Manager: Mrs Mary Deeny
Person in Charge of the Practice at the Time of Inspection:  Mrs Ciara Gallagher	Date Manager Registered: 16 January 2012
Categories of Care: Independent Hospital (IH) – Dental Treatment	Number of Registered Dental Chairs:

# 3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection.

The themes for the 2015/16 year are as follows:

- Medical and other emergencies; and
- Recruitment and selection.

#### 4. Methods/Process

Specific methods/processes used in this inspection include the following:

Prior to inspection the following records were analysed: staffing information, patient consultation report, and complaints declaration.

During the inspection the inspector met with Mrs Gallagher, registered person, Mrs Deeny, registered manager, an associate dentist, two dental nurses and a dental nurse/receptionist.

The following records were examined during the inspection: relevant policies and procedures, training records, three staff personnel files, job descriptions, contracts of employment, and three patient medical histories.

#### 5. The Inspection

### 5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the practice was an announced care inspection dated 25 February 2015. The completed QIP was returned and approved by the care inspector.

# 5.2 Review of Requirements and Recommendations from the last Care Inspection dated 25 February 2015

Last Inspection Reco	ommendations	Validation of Compliance
Recommendation 1 Ref: Standard 13 Stated: First time	Ensure that the coving, which has been affixed to the vinyl flooring in surgeries, is sealed.  Cabinetry should be sealed in surgeries and the decontamination room where it meets the flooring.  Action taken as confirmed during the inspection: The lead dental nurse confirmed that coving and cabinetry had been sealed in surgeries and the decontamination room. Observation of the decontamination room and three surgeries evidenced this.	Met
Recommendation 2 Ref: Standard 13 Stated: First time	Mops should not be left steeping in water.  Action taken as confirmed during the inspection:  Mops were observed to be stored inverted.	Met
Recommendation 3 Ref: Standard 13 Stated: First time	Any stainless steel dedicated hand washing basins with overflows should have the overflows blanked off using a stainless steel plate sealed with antibacterial mastic.  Action taken as confirmed during the inspection: The lead dental nurse confirmed that overflows of dedicated stainless steel hand washing basins had been blanked off as recommended. Observation of three surgeries evidenced this.	Met

# 5.3 Medical and other emergencies

#### Is Care Safe?

Review of training records and discussion with staff confirmed that the management of medical emergencies is included in the induction programme and training is updated on an annual basis, in keeping with the General Dental Council (GDC) Continuing Professional Development (CPD) requirements.

Discussion with Mrs Gallagher and staff confirmed that they were knowledgeable regarding the arrangements for managing a medical emergency and the location of medical emergency medicines and equipment.

Review of medical emergency arrangements evidenced that emergency medicines are provided in keeping with the British National Formulary (BNF), and that emergency equipment as recommended by the Resuscitation Council (UK) guidelines is retained in the practice. A robust system is in place to ensure that emergency medicines and equipment do not exceed their expiry date. There is an identified individual within the practice with responsibility for checking emergency medicines and equipment.

Discussion with staff and review of documentation demonstrated that recording and reviewing patients' medical histories is given high priority in this practice.

On the day of the inspection the arrangements for managing a medical emergency were found to be safe.

#### Is Care Effective?

The policy for the management of medical emergencies reflected best practice guidance. Protocols are available for staff reference outlining the local procedure for dealing with the various medical emergencies.

Discussion with Mrs Gallagher and staff demonstrated that they have a good understanding of the actions to be taken in the event of a medical emergency and the practice policies and procedures.

Discussion with staff confirmed that medical emergencies in the practice were treated appropriately.

On the day of the inspection the arrangements for managing a medical emergency were found to be effective.

#### **Is Care Compassionate?**

Review of standard working practices demonstrated that the management of medical and other emergencies incorporate the core values of privacy, dignity and respect.

During discussion Mrs Gallagher and staff demonstrated a good knowledge and understanding of the core values that underpins all care and treatment in the practice.

On the day of the inspection the arrangements for managing a medical emergency were found to be compassionate.

#### **Areas for Improvement**

No areas for improvement were identified during the inspection.

Number of Requirements:	0	Number of	0	
	Recommendations:			

#### 5.4 Recruitment and selection

#### Is Care Safe?

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

Three personnel files of staff recruited since registration with RQIA were examined. The following was noted:

- positive proof of identity, including a recent photograph;
- evidence that an enhanced AccessNI check was received prior to commencement of employment;
- two written references;
- details of full employment history, including an explanation of any gaps in employment;
- documentary evidence of qualifications, where applicable;
- evidence of current GDC registration, where applicable;
- confirmation that the person is physically and mentally fit to fulfil their duties; and
- evidence of professional indemnity insurance, where applicable.

Files reviewed did not have a criminal conviction declaration, however, this was developed during the inspection and will be included as part of the recruitment process.

Records regarding enhanced AccessNI checks were retained in keeping with the AccessNI code of practice, with the exception of the dates checks were applied for and received. However, Mrs Deeny had introduced a new template which facilitates the recording of all relevant information for future use.

A staff register was retained containing staff details including, name, date of birth, position; dates of employment; and details of professional qualification and professional registration with the GDC, where applicable. A minor amendment was made to the staff register during the inspection.

Mrs Deeny confirmed that a robust system is in place to review the professional indemnity status of registered dental professionals who require individual professional indemnity cover. A review of a sample of records demonstrated that the appropriate indemnity cover is in place. Applications for individual dental nurse indemnity have recently been submitted.

On the day of the inspection, recruitment and selection procedures were found to be safe.

#### Is Care Effective?

The dental service's recruitment and selection procedures comply with all relevant legislation including checks to ensure qualifications, registrations and references are bona fide.

Three personnel files were reviewed. It was noted that each file included a contract of employment/agreement and job description.

Induction programme templates are in place relevant to specific roles within the practice.

Discussion with staff confirmed that they have been provided with a job description, contract of employment/agreement and have received induction training when they commenced work in the practice.

Discussion with staff confirmed that they are aware of their roles and responsibilities.

Clinical staff spoken with confirmed that they have current GDC registration and that they adhere to GDC CPD requirements.

On the day of the inspection recruitment and selection procedures were found to be effective.

#### **Is Care Compassionate?**

Review of recruitment and selection procedures demonstrated good practice in line with legislative requirements.

Recruitment and selection procedures, including obtaining an enhanced AccessNI check, minimise the opportunity for unsuitable people to be recruited in the practice.

Discussion with staff demonstrated that they have a good knowledge and understanding of the GDC Standards for the Dental Team and the Scope of Practice.

Discussion with staff demonstrated that the core values of privacy, dignity, respect and patient choice are understood.

On the day of the inspection recruitment and selection procedures were found to be compassionate.

#### **Areas for Improvement**

No areas for improvement were identified during the inspection.

Number of Requirements:	0	Number of	0
		Recommendations:	

#### 5.5 Additional Areas Examined

#### 5.5.1 Staff Consultation/Questionnaires

During the course of the inspection, the inspector spoke with Mrs Gallagher, registered person, Mrs Deeny, registered manager, an associate dentist, two dental nurses and a dental nurse/receptionist. Questionnaires were also provided to staff prior to the inspection by the practice on behalf of the RQIA. Fifteen were returned to RQIA within the timescale required.

Review of submitted questionnaires and discussion with staff evidenced that they were provided with a job description and contract of employment/agreement on commencing work in the practice. Staff also confirmed that induction programmes are in place for new staff which includes the management of medical emergencies. Staff confirmed that annual training is provided on the management of medical emergencies.

The following comments were provided in submitted questionnaires:

- "Provides good quality dental care at a high standard. It's a well-established practice within the community. I have enjoyed working here for 12 years."
- "Have worked here for a very long time and feel that I can discuss anything with management."
- "Good friendly team. Great environment to work in."
- "All management and staff have been extremely welcoming and helpful throughout my training."
- "Happy and friendly atmosphere within the practice."
- "It's a lovely practice to work for, everyone friendly and helpful. I have worked here for over 10 years and still love coming into work every day."
- "Always up to date with all requirements (legally), constant training and a lot of opportunities to learn and expand skills."
- "I have worked in the practice for a long time and have always felt well supported by the management. I also feel that the practice is run in a very patient-centred way."
- "Open door policy with manager. Constant training opportunities."
- "I feel our practice is above board with training and any queries. Very approachable because of this I feel we are a good team together."
- "I have been working at Mullan Gallagher for over 13 years. Thoroughly enjoy my job, work with an amazing team, have had fantastic team bonding days. Work is full of challenges that I really enjoy."
- "As a new member of staff I feel I have been very well supported by all other members of staff. There is a friendly welcoming atmosphere and it is evident that first class patient care is top priority within the practice."
- "Fantastic modern practice."
- "Warm, welcoming and friendly practice. A wonderful place to work."

#### 5.5.2 Complaints

It is not in the remit of RQIA to investigate complaints made by or on the behalf of individuals, as this is the responsibility of the providers. However, if there is considered to be a breach of regulation as stated in The Independent Health Care Regulations (Northern Ireland) 2005, RQIA has a responsibility to review the issues through inspection.

A complaints questionnaire was forwarded by RQIA to the practice for completion. The evidence provided in the returned questionnaire indicated that complaints have been managed in accordance with best practice.

#### 5.5.3 Patient Consultation

The need for consultation with patients is outlined in The Independent Health Care Regulations (Northern Ireland) 2005, Regulation 17 (3) and The Minimum Standards for Dental Care and Treatment 2011, Standard 9. A patient consultation questionnaire was forwarded by RQIA to the practice for completion. A copy of the most recent patient satisfaction report was submitted to RQIA prior to the inspection.

Review of the most recent patient satisfaction report demonstrated that the practice pro-actively seeks the views of patients about the quality of treatment and other services provided. Patient feedback whether constructive or critical, is used by the practice to improve, as appropriate.

#### 5.5.4 Registration Status

Mullan Gallagher Dental Group was initially registered with RQIA as a partnership. Mr Peter Mullan has now retired from the practice and Mrs Ciara Gallagher has taken over as the sole owner. As this represents a new entity, a new application for registration was required to be submitted to RQIA. The application was submitted to RQIA following the inspection on 19 November 2015. A new registration certificate will be issued on completion of the registration process. Mrs Deeny confirmed that she will remain as registered manager of the practice.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the practice. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person(s) from their responsibility for maintaining compliance with minimum standards and regulations.

# No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Mary Deeny	Date Completed	23/11/2015
Registered Person	Ciara Gallagher	Date Approved	23/11/2015
RQIA Inspector Assessing Response	Emily Campbell	Date Approved	23.11.15

Please provide any additional comments or observations you may wish to make below:

<sup>\*</sup>Please ensure this document is completed in full and returned to <u>independent.healthcare@rqia.org.uk</u> from the authorised email address\*