

Announced Premises Inspection Report 29 September 2016



O'Hagan & Murray Ltd Dental Surgery

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

Address: 22 Church Square, Rathfriland, BT34 5PT

Tel No: 028 4063 8733

Inspector: K. Monaghan

www.rgia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of O'Hagan & Murray Ltd Dental Surgery in Rathfriland took place on 29 September 2016 from 10:30hrs to 11:30hrs.

The inspection sought to assess 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.

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	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Mrs. Jayne Walsh, Registered Manager, 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.

1.2 Actions/enforcement taken following the most recent premises inspection

This was the first routine premises inspection to this dental practice. Action/enforcement taken following the most recent premises inspection is not therefore relevant.

2.0 Service Details

Registered organisation/registered provider: O'Hagan & Murray Ltd / Mr. Seamus O'Hagan	Registered manager: Mrs. Jayne Walsh
Person in charge of the establishment at the time of inspection: Mrs. Jayne Walsh, Registered Manager	Date manager registered: 08 January 2013
Categories of care: Independent Hospital (IH) - Dental Treatment	Number of registered places: One

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 Mrs. Jayne Walsh, Registered 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 17 February 2016

The most recent inspection of this Private Dental Practice was an announced care inspection IN023931 on 17 February 2016. No requirements or recommendations were made during this inspection. The report for this inspection was returned to RQIA on 21 March 2016 and approved by the care inspector on the same day.

4.2 Review of requirements and recommendations from the last premises inspection

As this was the first routine premises inspection, a review of the requirements and recommendations from the last 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, emergency lighting and first aid fire-fighting equipment.

Comments

1. A comprehensive fire risk assessment for the premises was carried out by a fire safety consultant on 06 January 2012. The report for this fire risk assessment included a number of recommendations which had been actioned and signed off. This fire risk assessment is also reviewed annually with the most recent review having been completed in June 2016.
2. The first aid fire-fighting equipment was serviced on 15 April 2016 and the emergency lights were inspected and tested on 21 September 2016. Mrs. Walsh also confirmed that arrangements had been made with the electrician to install a new key switch to make it easier to complete the monthly function checks to the emergency lights. In addition the smoke alarms are tested on a Friday and monthly checks are carried out to the emergency lights and the first aid fire-fighting equipment.
3. The electrical equipment was inspected and tested on 21 September 2016. The fixed wiring installation was also inspected and tested on 25 October 2012 with a satisfactory outcome. Mrs. Walsh confirmed that she had spoken to the electrician in relation to the date for the next inspection and test and that this was confirmed as October 2017.
4. The most recent statutory examinations of the pressure vessels under the Pressure Safety Regulations were carried out on 25 April 2016. The reports for these examinations which indicated satisfactory outcomes were available for review during this premises inspection. This equipment was also serviced on 20 January 2016 by a specialist company.

Comments continued

5. A risk assessment had been carried out in relation to legionella bacteria in the water system. A written scheme of control had been drawn up along with a schematic drawing for the water system in the premises. The dental water line is disinfected using a proprietary system. Water samples were tested for legionella bacteria in February 2015 with satisfactory results and weekly dip slides are completed. There is also a reverse osmosis water purification system in place and this was serviced including a filter change in February 2016. The water outlets are run each morning and the water temperatures are checked monthly. Mrs. Walsh agreed to note the temperatures in the record for these monthly water checks.
6. The dental practice is equipped with a medical gas pipeline system for nitrous oxide and oxygen. The gas cylinders are replaced every four to six weeks and the system was serviced on 09 February 2016.

Number of requirements	0	Number of recommendations:	0
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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 the relevant 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

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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.



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](https://twitter.com/RQIANews)