

Announced Variation to Registration Care Inspection Report 12 September 2016



Quayside Dental & Implant Centre

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

Address: 87 Strand Road, Londonderry, BT48 7NW

Tel No: 028 7126 6000

Inspector: Norma Munn

1.0 Summary

An announced variation to registration inspection of Quayside Dental & Implant Centre took place on 12 September 2016 from 11.00 to 12.00. Mr Phil Cunningham, senior estates inspector, undertook an estates inspection on the same day. The report and findings of the estates inspection will be issued under separate cover.

Quayside Dental & Implant Centre was registered with RQIA as an Independent Hospital providing dental treatment with effect from 16 January 2012. An application for a variation of the registration of the practice was submitted to RQIA by Mr Peter Hughes, registered person. The application was to increase the number of registered dental chairs from four to five.

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

The variation to registration application was approved from both a care and estates perspective following this 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 and Department of Health, Social Services and Public Safety (DHSSPS) Minimum Standards for Dental Care and Treatment (2011).

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 Ms Pamela Devine, practice 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 care inspection

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

2.0 Service details

Registered organisation/registered provider: Mr Peter Hughes	Registered manager: Mr Peter Hughes
Person in charge of the establishment at the time of inspection: Mr Peter Hughes	Date manager registered: 16 January 2012
Categories of care: Independent Hospital (IH) – Dental Treatment	Number of registered places: 4 increasing to 5 following inspection

3.0 Methods/processes

The methods/process used in this inspection included the following:

- review of the submitted variation to registration application
- discussion with Mr Hughes, registered person and Ms Pamela Devine, practice manager
- discussion with staff
- assessment of the environment
- review of documentation required by legislation and good practice
- evaluation and feedback

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 26 May 2016

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

4.2 Review of requirements and recommendations from the last care inspection dated 26 May 2016

Last care inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 13 Stated: First time	The procedure for the decontamination of dental handpieces should be reviewed to ensure that they are decontaminated in keeping with manufacturer's instructions and Professional Estates Letter (PEL) (13) 13. Compatible handpieces should be processed in the washer disinfector.	Met
	Action taken as confirmed during the inspection: Ms Devine and staff confirmed that all compatible dental handpieces are processed in the washer disinfector and decontaminated in keeping with manufacturer's instructions.	
Recommendation 2 Ref: Standard 11 Stated: First time	Advice and guidance should be sought from an employment advisor in relation to the issue of contracts of employment/agreements for staff currently working in the practice who do not have these. Records of the advice and guidance should be retained for inspection.	Met
	Action taken as confirmed during the inspection: Mr Hughes and Ms Devine confirmed that contracts of employment/ agreements have been developed for the identified staff members and these are currently being finalised for issue. One of the agreements was reviewed during the inspection. Ms Devine confirmed that all new staff who are employed in the future will have contracts of employment/agreements issued.	

4.3 Inspection findings

4.3.1 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. Ms Devine has agreed to add the details of any new staff employed to the statement of purpose.

4.3.2 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.

4.3.3 Infection prevention and control/decontamination

The arrangements in regards to the newly established fifth dental surgery were reviewed. It was observed that 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 generally intact and easy to clean. One issue identified in relation to the joint between the new worktop and the upstand in the new surgery will be addressed by the estates inspector under separate cover.

Sharps boxes were safely positioned to prevent unauthorised access and had been signed and dated on assembly.

A dedicated hand washing basin is available in the dental surgery and adequate supplies of liquid soap, paper towels and disinfectant rub/gel were available. It was observed that laminated /wipe-clean posters promoting hand hygiene were on display.

Staff confirmed that the newly installed dental chair has an independent bottled-water system and that the dental unit water lines (DUWLs) will be appropriately managed.

Personal protective equipment (PPE) was readily available.

The clinical waste bin in the surgery was in keeping with best practice guidance. 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 two washer disinfectors and two steam sterilisers have been provided to meet the practice requirements. Ms Devine confirmed that the decontamination equipment will be sufficient to meet the needs of the five operational surgeries.

Review of documentation evidenced that equipment used in the decontamination process has been appropriately validated.

Review of equipment logbooks evidenced that periodic tests are undertaken and recorded in keeping with HTM 01-05.

4.3.4 Environment

A tour of the some of the premises was undertaken, including the newly established fifth dental surgery. The premises were maintained to a good standard of maintenance and décor. As discussed previously issues identified, by the estates inspector, will be addressed under separate cover.

4.3.5 Radiology

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

4.3.6 Recruitment of staff

Ms Devine confirmed that two dental nurses and a member of staff focussing specifically on decontamination have recently commenced work in the practice and an additional dental nurse and associate hygienist will be recruited in the future.

Review of the staff personnel files of the three new 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.

4.3.7 Conclusion

The variation to the registration in regards to the increase in dental chairs from four to five was approved, by both the care inspector and the estates inspector , following this inspection.

Areas for improvement

No areas for improvement were identified during the inspection.

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.



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