



The **Regulation** and  
**Quality Improvement**  
Authority

**Smith's Dental Surgery**  
**RQIA ID: 11691**  
**The Mews/Rokeby Green**  
**The Mall West**  
**Armagh**  
**BT61 9AT**

**Inspector: Philip Colgan**  
**Inspection ID: IN024004**

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**Tel:028 3752 6554**

**Announced Care Inspection  
of  
Smith's Dental Surgery**

**16 March 2016**

**The Regulation and Quality Improvement Authority**  
**9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT**  
**Tel: 028 9051 7500 Fax: 028 9051 7501 Web: [www.rqia.org.uk](http://www.rqia.org.uk)**

## 1. Summary of Inspection

An announced care inspection took place on 16 March 2016 from 08.45 to 10.00. On the day of the inspection the management of medical emergencies was generally found to be safe effective and compassionate. The management of recruitment and selection was found to be safe, effective and compassionate. An area for improvement was identified and is set out in the Quality Improvement Plan (QIP) within this report.

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

No actions were required to be taken following the last care inspection on 3 March 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
<b>Total number of requirements and recommendations made at this inspection</b>	0	1

The details of the QIP within this report were discussed with the Mr Peter Smith, registered person, as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Mr Peter Smith	<b>Registered Manager:</b> Mr Peter Smith
<b>Person in Charge of the Practice at the Time of Inspection:</b> Mr Peter Smith	<b>Date Manager Registered:</b> 13 March 2012
<b>Categories of Care:</b> Independent Hospital (IH) – Dental Treatment	<b>Number of Registered Dental Chairs:</b> 1

### **3. Inspection Focus**

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 Mr Peter Smith, registered person, and a dental nurse.

The following records were examined during the inspection: relevant policies and procedures, training records, job descriptions, contracts of employment and the process for obtaining and updating 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 3 March 2015. No requirements or recommendations were made during this inspection.

#### **5.2 Medical and other emergencies**

##### **Is Care Safe?**

Review of training records and discussion with the dental nurse 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 the dental nurse confirmed that she was 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, with the exception of an Automated External Defibrillator (AED). A recommendation was made.

A robust system is in place to ensure that emergency medicines and equipment do not exceed their expiry date. The format of buccal midazolam was not the format recommended by the Health and Social Care Board (HSCB). Mr Smith was advised that when replacing the expired buccal Midazolam it should be replaced with Buccolam pre-filled syringes as recommended by the HSCB.

There is an identified individual within the practice with responsibility for checking emergency medicines and equipment.

Discussion with the dental nurse 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 generally 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 the dental nurse demonstrated that she has a good understanding of the actions to be taken in the event of a medical emergency and the practice policies and procedures.

Discussion with the dental nurse confirmed that there have been no medical emergencies in the practice since the previous inspection.

On the day of the inspection the arrangements for managing a medical emergency were generally 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 the dental nurse 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**

The availability of an AED should be reviewed. Mr Smith should seek advice and guidance from his medico-legal advisor in this regard.

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>1</b>
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### 5.3 Recruitment and selection

#### Is Care Safe?

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

The practice has not employed any new staff since registration with RQIA and therefore no staff personnel files were reviewed. However, Mr Smith confirmed on discussion that the following information would be retained in the event of any new staff being recruited:

- 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
- criminal conviction declaration on application
- confirmation that the person is physically and mentally fit to fulfil their duties and
- evidence of professional indemnity insurance, where applicable

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.

Mr Smith 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.

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.

Induction programme templates are in place relevant to specific roles within the practice. Mr Smith and the dental nurse confirmed that an induction programme is in place, if new staff join the practice.

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

Discussion with the dental nurse confirmed that she is aware of her role and responsibilities.

The dental nurse confirmed that she has current GDC registration and that she adheres 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 the dental nurse demonstrated that she has a good knowledge and understanding of the GDC Standards for the Dental Team and the Scope of Practice.

Discussion with the dental nurse 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.

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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## **5.4 Additional Areas Examined**

### **5.4.1 Staff Consultation/Questionnaires**

During the course of the inspection, the inspector spoke with Mr Smith, registered person and a dental nurse. Questionnaires were also provided to staff prior to the inspection by the practice on behalf of the RQIA. Two were returned to RQIA within the timescale required.

Review of submitted questionnaires and discussion with the dental nurse evidenced that she was provided with a job description and contract of employment on commencing work in the practice. The dental nurse also confirmed that induction programmes are in place for new staff which includes the management of medical emergencies, and confirmed that annual training is provided on the management of medical emergencies.

### **5.4.2 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.

The returned questionnaire indicated that no complaints have been received for the period 1 January 2014 to 31 March 2015.

### 5.4.3 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.

## 6. Quality Improvement Plan

The issue identified during this inspection is detailed in the QIP. Details of this QIP were discussed with Mr Peter Smith, registered person, as part of the inspection process. The timescales commence from the date of inspection.

The registered person 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 person 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 your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

### 6.1 Statutory Requirements

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

### 6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The DHSSPS Minimum Standards for Dental Care and Treatment (2011). They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

### 6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered person/registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to [independent.healthcare@rqia.org.uk](mailto:independent.healthcare@rqia.org.uk) and assessed by the inspector.

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. It is expected that the requirements and recommendations set out in this report will provide the registered person(s) with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the practice.

<b>Quality Improvement Plan</b>			
<b>Recommendations</b>			
<b>Recommendation 1</b>  <b>Ref:</b> Standard 12.4  <b>Stated:</b> First time  <b>To be Completed by:</b> 25 May 2016	It is recommended that the availability of an automated external defibrillator (AED) should be reviewed. Mr Smith should seek advice and guidance from his medico-legal advisor in this regard.		
	<b>Response by Registered Person(s) Detailing the Actions Taken:</b>		
<b>Registered Manager Completing QIP</b>		<b>Date Completed</b>	
<b>Registered Person Approving QIP</b>		<b>Date Approved</b>	
<b>RQIA Inspector Assessing Response</b>		<b>Date Approved</b>	

*\*Please ensure this document is completed in full and returned to [independent.healthcare@rqia.org.uk](mailto:independent.healthcare@rqia.org.uk) from the authorised email address\**



## Quality Improvement Plan

Recommendations			
<b>Recommendation 1</b>	It is recommended that the availability of an automated external defibrillator (AED) should be reviewed. Mr Smith should seek advice and guidance from his medico-legal advisor in this regard.		
Ref: Standard 12.4			
Stated: First time	<b>Response by Registered Person(s) Detailing the Actions Taken:</b>		
To be Completed by: 25 May 2016	I have since purchased my own A.E.D from the "British Oxygen Company". P. Smith		
Registered Manager Completing QIP	P. Smith	Date Completed	26/4/16
Registered Person Approving QIP		Date Approved	
RQIA Inspector Assessing Response	LYNN LOWE	Date Approved	9/5/16.

\*Please ensure this document is completed in full and returned to [independent.healthcare@rqia.org.uk](mailto:independent.healthcare@rqia.org.uk) from the authorised email address\*

For P. SMITH'S DENTAL PRACTICE,  
MILL WEST,  
ARMAGH.