

Announced Enforcement Compliance Inspection Report 22 November 2016



Cushendall Dental Surgery

Type of Service: Independent Hospital (IH) - Dental Treatment
**Address: c/o Glens Of Antrim Medical Centre, 2 Gortaclee Road,
Cushendall, BT44 0TE**
Tel No: 028 2177 1242
Inspector: Emily Campbell

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced inspection of Cushendall Dental Surgery took place on 22 November 2016 from 14:20 to 15:45. The inspection was not carried out at the dental practice and was undertaken at a mutually agreed location.

The purpose of the inspection was to assess the level of compliance achieved in relation to a failure to comply (FTC) notice, FTC/IHC-DT/11702/2016-17/01, issued on 8 September 2016. The date for compliance with the notice issued on 8 September 2016 was 10 November 2016.

Mr Killough, registered person, contacted RQIA on 1 and 8 November 2016 and requested an extension to the date for compliance. The failure to comply notice was subsequently extended to 2 December 2016. The areas for improvement and compliance with the regulation were in relation to recruitment and selection of staff.

Mr Killough contacted RQIA on 22 November 2016, to advise that compliance had been achieved and requested the compliance inspection be undertaken on an earlier date. The compliance inspection was carried out on the same day.

FTC Ref: FTC/IHC-DT/11702/2016-17/01

The inspection on 22 November 2016 identified that the necessary improvements in relation to three of the four actions outlined in the failure to comply notice had been achieved. The fourth action related to ensuring that staff were recruited and employed in accordance with statutory legislation and mandatory requirements. Specifically, the employment history of one staff member was not available. On 30 November 2016, RQIA received the evidence confirming that an employment history for the identified staff member had been obtained at which time RQIA were satisfied that full compliance had been achieved with the above failure to comply notice.

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 the Department of Health, Social Services and Public Safety (DHSSPS) Minimum Standards for Dental Care and Treatment (2011).

While we assess the quality of services provided against regulations and associated DHSSPS care standards, we do not assess the quality of dentistry provided by individual dentists.

1.1 Inspection outcome

As indicated above, evidence was available to validate full compliance with the above failure to comply notice.

As a result of the findings of this inspection a confirmation of compliance letter was issued.

*All enforcement notices for registered agencies/services are published on RQIA's website at: <https://www.rgia.org.uk/inspections/enforcement-activity/current-enforcement-activity/>

1.2 Actions/enforcement taken following the most recent care inspection

Following an announced care inspection on 24 August 2016 a failure to comply notice was issued to Cushendall Dental Surgery on 8 September 2016 relating to practice associated with the recruitment and selection of staff.

The date for compliance with the notice was 10 November 2016; this was subsequently extended to 2 December 2016.

2.0 Service details

Registered organisation/ registered provider: Mr Seamus Killough	Registered manager: Mr Seamus Killough
Person in charge of the service at the time of inspection: Mr Seamus Killough	Date manager registered: 9 April 2013
Categories of care: Independent Hospital (IH) – Dental Treatment	Number of registered places: 2

3.0 Methods/processes

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

- discussion with Mr Seamus Killough, registered person
- discussion with a dental nurse
- review of relevant records
- evaluation and feedback

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 24 August 2016

The requirements and recommendations made during the most recent inspection were not reviewed during this announced enforcement compliance inspection. These will be reviewed during the next announced care inspection.

4.2 Inspection findings

FTC Ref: FTC/IHC-DT/11702/2016-17/01

The Independent Health Care Regulations (Northern Ireland) 2005

Regulation 19 (2)

A person is not fit to work in or for the purposes of an establishment, or for the purposes of an agency unless –

(d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 2.

SCHEDULE 2

INFORMATION REQUIRED IN RESPECT OF PERSONS SEEKING TO CARRY ON, MANAGE OR WORK AT AN ESTABLISHMENT OR AGENCY

(2) Either –

(a) Where a certificate is required for a purpose relating to registration under Part 111 of the Order, or the position falls within section 115 (3) or (4) of the Police Act 1997

(a), an enhanced criminal record certificate issued under section 115 of that Act.

The inspection findings of the actions specified in the FTC notice are as follows:

The registered person must ensure that at all times staff are recruited and employed in accordance with statutory legislation and mandatory requirements. This includes the receipt of a satisfactory Access NI enhanced disclosure check prior to commencement of employment.

Mr Killough confirmed that one new member of staff had been recruited since the previous inspection on 24 August 2016. The personnel files for the new staff member and the staff member identified during the previous inspection were reviewed. Review of the files and discussion with Mr Killough and the dental nurse confirmed that in general staff had been recruited and employed in accordance with statutory legislation and mandatory requirements, however, the employment history of one staff member was not available. Mr Killough confirmed that this was retained at the dental practice. On 30 November 2016, RQIA received evidence confirming that a full employment history for the identified staff member had been obtained.

It was evidenced that enhanced AccessNI checks had been received in respect of both staff.

Discussion with Mr Killough evidenced that he understands his role and responsibilities in relation to recruitment and selection of staff. Mr Killough confirmed that should new staff be recruited in the future that they will be recruited in accordance with statutory legislation and mandatory requirements to include that an enhanced AccessNI check will be obtained prior to any new staff, including self-employed staff, commencing work in the practice.

The registered person must ensure that the staff recruitment policy and procedure makes reference to the need to obtain all the required information as listed within Regulation 19 (2) and Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005.

Review of the recruitment policy evidenced that an appendix had been included which listed all of the information to be sought and obtained as outlined in Regulation 19 (2) and Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005.

The registered person must implement robust monitoring systems to ensure that the recruitment process is compliant with statutory legislation and mandatory requirements.

Review of documentation evidenced that a checklist of all of the required information as outlined in Regulation 19 (2) and Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 had been developed for use in the event of new staff being recruited.

The registered person must ensure that all staff involved in the recruitment process receive training or refresher training in safeguarding of children and adults.

Review of records evidenced that Mr Killough had completed training through various aspects self-directed learning in respect of safeguarding children and adults since the previous inspection. Mr Killough demonstrated a clear understanding of the correlation between safeguarding children and adults at risk of harm and ensuring appropriate safeguards are in place in relation to the recruitment and selection process.

Mr Killough confirmed that he has overall responsibility for the recruitment of staff and that he is supported by a second staff member during the interview process. This staff member is currently on planned leave and therefore was not available to undertake refresher training in safeguarding of children and adults. Mr Killough confirmed that the practice will come under new ownership at the start of January 2017 and no new staff will be recruited in the interim period.

Conclusion

Evidence was available to validate compliance with the requirements of this failure to comply notice.

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