

REGULATION AND QUALITY IMPROVEMENT AUTHORITY

9th Floor Riverside Tower 5 Lanyon Place Belfast BT1 3BT

Tel: (028) 9051 7500 Fax: (028) 9051 7501

Estates Inspection Report

- In respect of -

Variation Application

- for -

Addition of One Dental Chair

- at -

Rosconnor Clinic Derry Dental Practice

- on -

05 June 2015

Inspection ref: IN022951

1.0 General Information

Name of Establishment:	Rosconnor Clinic Derry
Address of Establishment:	LisLinn Healthy Living Centre, Central Drive, Creggan, DERRY, BT48 9QG
Telephone Number:	028 2766 2145
Responsible Person / Person-in-Control:	Mr Jason Henry
Manager:	Mr Jason Henry
Estates Officer:	Phil Cunningham
Date of Inspection:	05 June 2015

2.0 Introduction

This inspection was carried out to the proposed additional dental chair and to the refurbished decontamination room at Rosconnor Clinic Derry to assess compliance with The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Independent Health Care Regulations (Northern Ireland) 2005 and the Minimum Care Standards for Dental Care and Treatment with particular attention to:

Standard 14 – your care environment.

3.0 General

The premises being used for the purposes of Rosconnor Clinic Derry is a number of rooms in a modern purpose built community healthy living centre.

The dental practice is located on the ground floor with good access arrangements. On the day of inspection the inspector met with the Manager, Mr Jason Henry.

The newly refurbished surgery and the adjacent decontamination rooms were inspected and these appeared to be finished to a satisfactory standard.

A recent water leak on the floor above the newly refurbished surgery has left water staining on the ceiling. The manager outlined that this is to be repainted over coming days.

Fire Safety

On the day of inspection there was no fire risk assessment presented although the manager stated that this was in place for the complete building. Records of the maintenance of the fire safety systems i.e. fire alarm and detection system and emergency lighting system were not presented. It is understood that these fall under the remit of the landlord. He agreed to forward details of the above items to RQIA.

The manager stated that staff fire safety refresher training was due to take place during next week.

Health and Safety

The water safety/legionellae risk assessment was not presented although the manager stated that this was in place and described the procedures for management of the water system to the dental chairs which appeared to be in line with current good practice. He agreed to forward details of the last assessment review to RQIA.

A number of issues were identified for action during this Estates inspection. Reference should be made to the Quality Improvement Plan for the specific details.

4.0 Quality Improvement Plan

The issues contained in the Quality Improvement Plan appended to this report were discussed with Mr Jason Henry as part of the inspection process.

The timescales commence from the date of inspection.

Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Independent Health Care Regulations (Northern Ireland) 2005 and must be met.

The Responsible Person / Person-in-Control is required to record comments on the Quality Improvement Plan.

5.0 Enquiries

Enquiries relating to this report should be addressed to:

**Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST BT1 3BT**

A handwritten signature in blue ink, appearing to read 'P. C. Cunningham', is centered on the page.

**Phil Cunningham
Senior Estates Officer**

Date



The **Regulation** and
Quality Improvement
Authority

Estates Inspection

Quality Improvement Plan

- for -

Rosconnor Clinic Derry Dental Practice I.D. 12081

- on -

05 June 2015

NOTES:

The issues contained in the Quality Improvement Plan appended to this report were discussed with Mr Jason Henry as part of the inspection process.

The timescales commence from the date of inspection.

The Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Independent Health Care Regulations (Northern Ireland) 2005 and must be met.

The Responsible Person / Person-in-Control is required to record comments on the Quality Improvement Plan

The quality improvement plan is to be completed by the registered provider and registered manager and returned to estates@rqia.org.uk.

Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:

NAME OF MANAGER COMPLETING QIP	
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	

ITEM	STANDARD REF/ REGULATION	REQUIREMENTS ACTION TO BE TAKEN BY REGISTERED PROVIDER/ MANAGER	TIMESCALE	DETAILS OF ACTION TAKEN BY REGISTERED PERSON (S)
<p><u>General</u></p> <p>The following items should be noted for action in relation to Standard 14 – your care environment.</p>				
1.	Standard 14.2	Carry out decorative repairs to the ceiling in the new surgery.	As soon as practically possible	
2.	Standard 14.7	Forward copy of the most recent water safety/legionellae risk assessment to RQIA.	Prior to approval of additional chair	
3.	Standard 14.7	Forward copy of the most recent fire risk assessment review to RQIA	Prior to approval of additional chair	
4.	Standard 14.4	Forward confirmation details that the fire alarm and detection system and the emergency lighting installation have been maintained in line with current British Standards.	Prior to approval of additional chair	