

Rosconnor Clinic Derry RQIA ID: 12081 LisLinn Healthy Living Centre Central Drive, Creggan Derry BT48 9QG

Inspector: Emily Campbell Inspection ID: IN023629 Tel: 028 2766 2145

Announced Care Inspection of Rosconnor Clinic Derry

17 February 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

1. Summary of Inspection

An announced care inspection took place on 17 February 2016 from 14.05 to 15.05. On the day of the inspection the management of medical emergencies was found to be safe, effective and compassionate.

Rosconnor Clinic operates two practices. Rosconnor Clinic, Derry, is a satellite practice of Rosconnor Clinic, Ballymoney. The management for both practices is operated from the Ballymoney practice including staff recruitment and appointment scheduling. All personnel records are retained in the Ballymoney practice and for this purpose recruitment and selection practices were not reviewed during this inspection in Rosconnor Clinic, Derry. Staff spoken with however, confirmed that they had been issued with job descriptions, contracts of employment/agreement and that they received induction training on commencement of employment.

The outcome of the inspection found no areas of concern.

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

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last care inspection on 12 February 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
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 can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person: Mr Jason Henry	Registered Manager: Ms Alison Bassett
Person in Charge of the Practice at the Time of Inspection: Mr Jason Henry	Date Manager Registered: 21 January 2013
Categories of Care Independent Hospital (IH) – Dental Treatment	Number of Registered Dental Chairs: 3

3. Inspection Focus

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

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 Henry, registered person, Ms Bassett, registered manager and four dental nurses.

The following records were examined during the inspection: relevant policies and procedures, training records and the arrangements for reviewing patient medical histories. Staff personnel files, job descriptions and contracts of employment were reviewed at the inspection in Rosconnor Clinic, Ballymoney, carried out on the morning of this inspection.

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the practice was an announced variation to registration estates inspection dated 5 June 2015. The completed QIP was returned and approved by the estates inspector.

The application of variation was to increase the number of registered chairs from two to three. Registration of the third dental chair was approved on 2 December 2015.

5.2 Review of Requirements and Recommendations from the last Care Inspection dated 12 February 2015

Last Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 30 (h). Stated: First time	An application for variation for the third dental chair should be submitted to RQIA. This additional dental chair should not be used for private dental treatment until the registration process for this additional chair has been completed. Action taken as confirmed during the inspection : An application of variation was submitted to RQIA in respect of the registration of a third dental chair and registration was approved on 2 December 2015. Mr Henry confirmed that the third chair had not been used to provide private dental treatment in the interim period.	Met

5.3 Medical and other emergencies

Is Care Safe?

Review of training records and discussion with Mr Henry, Ms Bassett and staff 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 Mr Henry, Ms Bassett and staff confirmed that they were 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. A robust system is in place to ensure that emergency medicines and equipment do not exceed their expiry date. There is an identified individual within the practice with responsibility for checking emergency medicines and equipment.

Discussion with Mr Henry and staff and review of documentation demonstrated that recording and reviewing patients' medical histories is given high priority in this practice. This is a referral only practice and details of the patient's medical history details forms part of the referral process. The medical history is reviewed and is taken into consideration when deciding the specific times during the day when appointments are scheduled as a risk management measure. This is good practice. On the day of the inspection the arrangements for managing a medical emergency were 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 Mr Henry, Ms Bassett and staff demonstrated that they have a good understanding of the actions to be taken in the event of a medical emergency and the practice policies and procedures.

Discussion with Mr Henry, Ms Bassett and staff 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 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 Mr Henry, Ms Bassett and staff 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

No areas for improvement were identified during the inspection.

Number of Requirements:	0	Number of Recommendations:	0
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5.4 Recruitment and selection

Rosconnor Clinic operates two practices. Rosconnor Clinic, Derry, is a satellite practice of Rosconnor Clinic, Ballymoney. The management for both practices is operated from the Ballymoney practice including staff recruitment and appointment scheduling. Whilst staff are generally based in one of the practice, there are occasions when staff work across the two practices.

All personnel records are retained in the Ballymoney practice and for this purpose recruitment and selection practices were not reviewed during this inspection in Rosconnor Clinic, Derry. Staff spoken with however, confirmed that they had been issued with job descriptions, contracts of employment/agreement and that they received induction training on commencement of employment. Review of personnel records undertaken during the inspection of Rosconnor Clinic, Ballymoney, on the morning of this inspection, resulted in one requirement and one recommendation being made to ensure the management of recruitment and selection is safe, effective and compassionate.

5.5 Additional Areas Examined

5.5.1 Staff Consultation/Questionnaires

During the course of the inspection, the inspector spoke with Mr Henry, registered person, Ms Bassett, registered manager, and four dental nurses. Questionnaires were also provided to staff prior to the inspection by the practice on behalf of the RQIA. Five were returned to RQIA within the timescale required.

Review of submitted questionnaires and discussion with staff evidenced that they were provided with a job description and contract of employment/agreement on commencing work in the practice. Staff also confirmed that induction programmes are in place for new staff which includes the management of medical emergencies. Staff confirmed that annual training is provided on the management of medical emergencies.

5.5.2 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.

A complaints questionnaire was forwarded by RQIA to the practice for completion. The evidence provided in the returned questionnaire indicated that complaints have been managed in accordance with best practice.

5.5.3 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.

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.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.					
Registered Manager	Alison Bassett	Date Completed	29/03/16		
Registered Person	Jason Henry	Date Approved	29/03/16		
RQIA Inspector Assessing Response	Emily Campbell	Date Approved	21.4.16		

Please provide any additional comments or observations you may wish to make below: Appreciate RQIA's help and guidance and feel the process helps us deliver a better business and healthcare service.

Please ensure this document is completed in full and returned to <u>independent.healthcare@rgia.org.uk</u> from the authorised email address