

Announced Variation to Registration Care Inspection Report 24 January 2020



Great James St Dental

Type of Service: Independent Hospital (IH) – Dental Treatment

Address: 16 Great James Street, Derry, BT48 7DA

Tel No: 028 7136 1940

Inspector: Philip Colgan

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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 service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a registered dental practice with three registered places. An application to vary the registration of the practice to increase the number of dental chairs from three to four has been submitted to RQIA. Additional information in this regard can be found in Section 5.0 of this report.

3.0 Service details

Applicant Organisation/Registered Provider: Miss Meabh Owens	Registered Manager: Miss Meabh Owens
Person in charge of the establishment at the time of inspection: Miss Meabh Owens	Date manager registered: 03 May 2013
Categories of care: Independent Hospital (IH) – Dental Treatment	Number of registered places: 3 increasing to 4 following this inspection

4.0 Action/enforcement taken following the most recent inspection dated 3 September 2019

The most recent inspection of the establishment was an announced care inspection and variation to registration. No areas for improvement were made during this inspection.

4.1 Review of areas for improvement from the last care inspection dated 3 September 2019

There were no areas for improvement made as a result of the last care inspection.

5.0 Inspection

An announced variation to registration inspection took place on 24 January 2020 from 08.45 to 09.40.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, 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 Department of Health (DOH) Minimum Standards for Dental Care and Treatment (2011) and the Minimum Care Standards for Healthcare Establishments (July 2014).

This practice was initially registered with the Regulation and Quality Improvement Authority (RQIA) on 3 March 2013. This application was to increase the number of registered dental chairs from three to four.

This inspection sought to review the readiness of the practice for the provision of private dental care and treatment associated with the variation to registration application.

Following this inspection Mr Raymond Sayers, RQIA premises inspector, conducted a desk top review of the application to vary the registration of the practice. Mr Sayers has contacted Miss Owens and requested specific documents in relation to the premises to be submitted for review.

During the inspection the inspector met with Miss Meabh Owens, registered person. A tour of some of the premises was also undertaken.

Miss Owens confirmed that one new staff member had been recruited since the previous inspection.

There were examples of good practice found in relation to infection prevention and control and decontamination, maintenance of the environment and staff recruitment.

No areas requiring improvement were identified during this inspection.

The variation to registration to increase the number of registered dental chairs from three to four was approved from a care perspective following this inspection.

The findings of the inspection were provided to Miss Owens at the conclusion of the inspection.

5.1 Inspection findings

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. The document had been updated to reflect the proposed additional dental chair and new staff recruited.

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. The document had been updated to reflect the proposed additional dental chair and new staff recruited.

Recruitment of staff

Discussion with staff and review of the submitted variation to registration application confirmed that due to the development of the new dental surgery, one new staff member has been recruited since the previous inspection. It was confirmed that this staff member had their up to date Hepatitis B vaccinations and records were retained in the practice.

All the relevant information as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 has been sought and retained for the new member of staff.

Environment

The new surgery is on the first floor of the dental practice. Review of the surgery evidenced that works have been completed to a high standard of maintenance and décor. New fixtures included new cabinetry, a dental chair and x-ray equipment.

The fire and legionella risk assessments had been reviewed and updated in respect of the new surgery. It was also confirmed that a fire drill had been carried out to include the new dental surgery.

Infection prevention and control/decontamination

The arrangements in regards to the newly established dental surgery were reviewed. 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 intact and easy to clean.

Dedicated hand washing basins are 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.

Personal protective equipment (PPE) was readily available.

The clinical waste bin in the surgery was pedal operated 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 newly installed dental chair has an independent bottled-water system and that the dental unit water lines (DUWLs) will be managed in keeping with the manufacturer's instructions.

It was confirmed that there are sufficient dental instruments to meet the demands of the new dental surgery and that additional instruments will be provided should this need be identified in the future.

A decontamination room, separate from patient treatment areas and dedicated to the decontamination process, is available. Appropriate equipment, including a washer disinfectant, and two steam sterilisers, has been provided to meet the practice requirements.

A review of documentation evidenced that equipment used in the decontamination process has been appropriately validated. A review of equipment logbooks evidenced that periodic tests are undertaken and recorded in keeping with Health Technical Memorandum (HTM) 01-05 Decontamination in Primary Care Dental Practices.

It was confirmed that the practice continues to audit compliance with HTM 01-05 using the Infection Prevention Society (IPS) audit tool.

A range of policies and procedures was in place in relation to decontamination and infection prevention and control.

Radiology

A new intra-oral x-ray machine has been installed in the new surgery.

A dedicated radiation protection file containing the relevant local rules, employer's procedures and other additional information was retained; the file had been signed by all staff, including new staff, to confirm they had read the contents.

A review of the file confirmed that staff have been authorised by the radiation protection supervisor (RPS) for their relevant duties and have received local training in relation to these duties. It was evidenced that all measures are taken to optimise dose exposure. This included the use of rectangular collimation and x-ray audits, in respect of the intra-oral x-ray machines.

A critical examination of the new x-ray unit was undertaken by the appointed radiation protection advisor (RPA) and no recommendations had been made by the RPA.

The local rules were on display and were signed by staff to confirm they have read and understood these.

6.0 Conclusion

The variation to the registration to the increase in dental chairs from three to four was approved, by the care inspector, following this inspection.

6.1 Areas for improvement

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a quality improvement plan (QIP) is not required or included as part of this inspection report.



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