

**THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY
(RQIA)**

NOTICE OF DECISION

Name of Registered Establishment Ballymena Dental Care	NOD Ref: NOD/IHC-DT/11379/2014-2015/01
Name of Registered Person: Mr Robert A McMitchell, Dental World Limited	Issue Date: 25 June 2014
<p>The Regulation and Quality Improvement Authority gives notice of decision to refuse the application for registration of Ballymena Dental Care.</p> <p>The relevant parts of the Order are as follows:</p> <p>The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003</p> <p>Article 14 (2) If the Regulation and Improvement Authority is satisfied that –</p> <p>(a) the requirements of regulations under Article 23; and</p> <p>(b) the requirements of any other statutory provision which appears to the Regulation and Improvement Authority to be relevant,</p> <p>are being and will continue to be complied with (so far as applicable) in relation to the establishment or agency, it shall grant the application; otherwise it shall refuse it.</p> <p>Article 23 (2) Regulations may -</p> <p>(d) make provision for securing the welfare of persons accommodated in an establishment or provided with services by an establishment, an independent agency or a domiciliary care agency.</p>	
<p>The reasons for serving this notice of decision are:</p> <p>An application to register Ballymena Dental Care, to provide private dental care and treatment, was received by RQIA on 13 May 2011. Following a lengthy application process, due to a delay in the application process for a registered manager for the service; a pre-registration inspection was carried out to the premises on 17 January 2014. As a result of this inspection 13 requirements were made under The Independent Health Care Regulations (Northern Ireland) 2005. Requirements included the following matters: the establishment of a fully functioning dedicated decontamination room, implementation of a validated washer disinfector within the decontamination process, validation of decontamination equipment, recording of cycle parameters of the steriliser, examination of pressure vessels, fire and legionella risk management, emergency medication management, and radiology and radiation protection arrangements.</p>	

In addition, 10 recommendations based on The Minimum Standards for Dental Care and Treatment (2011) were made in relation to other matters. These included further decontamination arrangements, safeguarding training, training records, quality assurance monitoring, and emergency medication monitoring.

RQIA issued a quality improvement plan (QIP) outlining the matters to be addressed and the timeframe for completion.

A pre-registration follow-up inspection was undertaken on 8 May 2014. Of the 13 requirements made only three had been met, five requirements had only been partially met and the remaining five had not been met. This is of concern to RQIA; the following issues were identified:

- Five requirements were in relation to decontamination arrangements in the practice. Since the previous inspection a new room (previously surgery 6) has been identified for the decontamination of dental instruments. The decontamination room was not satisfactory in respect of the environment and a number of issues were identified. The room was not fully operational, a washer disinfectant had not been installed and implemented within the decontamination process, and the paper printout facility to record the cycle parameters for steriliser was faulty.
- The manager confirmed that the compressor and statim steriliser have not been examined under the written scheme of examination of pressure systems.
- Copies of the fire risk assessment and the legionella risk assessment were retained at the practice. However the recommendations made as a result of these assessments have not been implemented. A fire management policy had been developed, however, this was a generic policy used in the Dental World Ltd. Group and has not been localised to reflect the specific arrangements in Ballymena Dental Care.
- Review of the emergency medications evidenced that ampoules of midazolam had not been removed from the emergency medication box and the inspectors observed that ampoules of Anexate were also retained in the emergency medication box. Neither of these medications should be retained in this manner. The inspectors also observed that although in date epipens in junior and adult doses were retained the expired doses of this medication had not been removed. This is concerning as it could result in an expired medication being administered in the event of a medical emergency.
- There was no evidence that a thorough review of the radiation protection file had been undertaken. Since the previous inspection a new organisation has been appointed as the radiation protection advisor (RPA) for the practice. An online radiation protection file has been developed using a partner of this organisation. The arrangements currently in place for radiology and radiation protection are not satisfactory.

A number of issues were identified in relation to the new arrangements in the practice. These included reference to the wrong legislation, incomplete information in the online radiation protection file, local rules had not been localised to reflect the specific arrangements for each x-ray unit and were not signed by staff. There was no evidence to support that the recommendations made by the engineer on 11 April 2014 had been implemented. In addition the inventory of x-ray equipment was not fully completed, there was lack of detail regarding staff entitlement and there were no training records retained or quality assurance processes. An audit of justification and clinical evaluation recording had not been undertaken.

Employer's procedures were limited and did not reflect all of the relevant necessary components.

In addition to the requirements above the following recommendations have yet to be fully met. The following issues were identified:

- Four recommendations related to decontamination and infection prevention and control arrangements. A steriliser logbook had been established for the steriliser which facilitated the recording of the required information. However, review of the steriliser logbook evidenced that it had only been initiated from 29 April 2014. By the date of this inspection only two automatic control test entries had been recorded and there was no record confirming that the reservoir water change had been undertaken on two days of the first week's entries. Entries in the logbook were recorded in pencil; this is not in keeping with good record keeping practice.

The sink used for manual cleaning did not have a plug, the brush for cleaning instruments was dry, there was no thermometer for testing the water temperature and there was no detergent or measuring jug available in the decontamination room. As the required equipment was not available in the decontamination room, the inspectors were unable to verify the compliance level of this recommendation. During the inspection a dental nurse was bringing a jug and bottle of detergent into the decontamination room. These matters indicated to the inspectors that manual cleaning is not undertaken in the decontamination room but elsewhere in the practice. The Infection Prevention Society (IPS) HTM 01-05 audit tool has been completed, however this had not been signed or dated.

- A sample of policies and procedures were reviewed and it was noted that not all identified the dates of implementation and planned review.
- Safeguarding training has not been provided for all staff in keeping with standard 15 of the Minimum Standards for Dental Care and Treatment.
- Training records are not retained and quality assurance processes have not been implemented.

Due to the significant matters identified RQIA are unable to complete the registration process and have decided to refuse the application for registration of Ballymena Dental Care.

Under Article 22 of the 2003 Order the registered person may, within 28 days of the service of this notice of decision, make an appeal to the Care Tribunal concerning any matter which the registered person wishes to dispute.

Signed.....   for Chief Executive

This notice of decision is served under Article 20 of The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

It should be noted that failure to comply with some regulations is considered to be an offence and RQIA has the power under regulations to prosecute for specified offences.