

Inspection Report

3 July 2025



Family Dental Care

Type of service: Independent Hospital (IH) – Dental Treatment
Address: 5 Queen Street, Ballymoney, BT53 6HZ
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www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>, [The Independent Health Care Regulations \(Northern Ireland\) 2005](#) and the [Minimum Standards for Dental Care and Treatment \(March 2011\)](#)

1.0 Service information

Organisation/Registered Provider: Dental World 1 Limited	Registered Manager: Ms Alison Rea
Responsible Individual: Ms Monica Shah	Date registered: 6 June 2023
Person in charge at the time of inspection: Ms Alison Rea	Number of registered places: Three
Categories of care: Independent Hospital (IH) – Dental Treatment	
Brief description of how the service operates: Family Dental Care is registered with the Regulation and Quality Improvement Authority (RQIA) as an independent hospital (IH) with a dental treatment category of care. The practice has three registered dental surgeries and provides general dental services, private and health service treatment and does not offer conscious sedation. Dental World 1 Limited is the registered provider for eight dental practices registered with RQIA. Ms Monica Shah is the responsible individual for Dental World 1 Limited.	

2.0 Inspection summary

On 3 July 2025 an unannounced inspection to this practice took place from 10.00am to 12.00pm which was undertaken jointly by an RQIA inspector and a dental advisor from the Strategic Planning and Performance Group (SPPG).

Prior to the inspection, RQIA received information that raised concerns in relation to the following matters; new dental nurse with insufficient knowledge of dental instruments and infection prevention and control matters; an insufficient supply of dental instruments; faulty dental instruments and x-ray equipment not working.

This information shared with RQIA formed the main focus of the inspection.

As a result of this inspection, one area for improvement has been identified against the regulations to ensure any staff member assigned to work in Family Dental Care is included in the staff register. Details of the area for improvement are included in the below Quality Improvement Plan (QIP).

We concluded that Family Dental Care is going through a period of transition in developing their clinical team and new staff members joining the practice. This will require ongoing supervision and support from management. This matter was discussed with the regional manager for Dental World 1.

No immediate concerns were identified regarding the delivery of front line patient care.

3.0 How we inspect

RQIA is required to inspect registered services in accordance with legislation. To do this, we gather and review the information we hold about the service, examine a variety of relevant records, meet and talk with staff and management and observe practices on the day of the inspection.

The information obtained is then considered before a determination is made on whether the practice is operating in accordance with the relevant legislation and minimum standards.

Examples of good practice are acknowledged and any areas for improvement are discussed with the person in charge and detailed in the quality improvement plan (QIP).

4.0 What people told us about the care and treatment?

As this was an unannounced inspection posters were not issued to the practice prior to the inspection inviting patients and staff to complete an electronic questionnaire.

We spoke to staff on the day of inspection and no issues were raised in respect of patient care.

5.0 The inspection

5.1 What action has been taken to meet any areas for improvement identified at or since last inspection?

The last inspection to Family Dental Care was undertaken on 25 March 2025; no areas for improvement were identified.

5.2 Inspection findings

5.2.1 How does this service ensure that staff are appropriately trained to fulfil the duties of their role?

Dental practices are required to maintain a staff register. A staff register was in place which included all the required information. It was evidenced that four new staff members had been recruited since the previous RQIA inspection on 25 March 2025.

A review of the four newly recruited staff member's personnel files evidenced that all relevant recruitment records had been sought; reviewed and stored as required.

The Family Dental Care clinical staff team consisted of dentists, dental therapists, and trainee dental nurses. Ms Rae informed us that the dental practice had been actively recruiting and continues to develop the clinical team.

The staff register reflected that there were two trainee dental nurses, one of whom was on a period of planned leave. No qualified dental nurses were included in the staff register, meaning, in total there was one new trainee dental nurse working in the practice. This area was discussed with Ms Rae who informed us that as a qualified dental nurse, she herself works in the dental surgeries as and when required. Ms Rae also confirmed that she was the identified General Dental Council (GDC) registrant in place to provide supervision of the trainee nurses in accordance with the GDC guidelines. However, Ms Rae informed us that she was leaving Family Dental Care on 4 July 2025 and new supervision arrangements would be put in place to support the trainee nurses.

It was confirmed that all trainee dental nurses are enrolled on the Smart Dental Academy Level 3 Extended Diploma in Dental Nursing. The minimum length of the diploma is 18 months. A review of the existing trainee dental nurse's completed training log evidenced that the trainee had commenced their training. It was confirmed that an assessor from Smart Dental Academy is involved with trainee nurses and will carry out assessment to assess level of competencies. Ms Rae informed us the assessor was due to visit the following week in this regard.

A record of the rostered shifts (staff rota) for each employee and record of hours worked by each person was in place. This record included staff names which were not recorded in the Family Dental Care staff register. This was discussed with Ms Rae who advised that dental nurses (including trainee dental nurses) who work in other dental practices that are owned and managed by Dental World 1 Limited are assigned to work in Family Dental Care when required. Ms Rae was advised that any person working in Family Dental Care should be recorded in the staff register. An area for improvement has been made in this regard.

Discussion with Ms Rae and a review of records confirmed that staff providing services in the practice are either directly employed by the practice and have a contract of employment or have an associate agreement in place. Records reviewed confirmed that contracts of employment and job descriptions had been provided to all staff named on the staff register.

The dental team take part in ongoing training to update their knowledge and skills, relevant to their role. Induction programmes relevant to roles and responsibilities were in place, each new staff member is required to complete their specific induction programme when they join the practice. A review of two new staff member's induction records evidenced that a structured and detailed programme of induction was ongoing and was seen to be active. The induction programme also includes an appraisal process to be undertaken at specified times with learning outcomes documented.

An electronic system was in place to monitor all aspects of ongoing professional development and a record was retained of all training and professional development activities.

A review of records confirmed that all current staff had undertaken training in management of medical emergencies, infection prevention and control, safeguarding adults and children at risk of harm, fire safety, and radiation safety, in keeping with [RQIA training guidance](#) and legislation. In addition, staff also complete other additional areas of compulsory training in accordance with the Dental World 1 training policy. These areas include the use of personal protection equipment (PPE), waste management, blood borne virus exposure, and legionella awareness.

Compliance of staff training is monitored in house by the registered manager and regionally by the compliance lead, Dental World 1 Limited.

Following the inspection RQIA corresponded with the regional manager, Dental World 1 Limited, to enquire of the proposed future arrangements for an identified GDC registrant to be in place to supervise trainee dental nurses working in Family Dental Care. We were informed that an experienced dental nurse from another Dental World 1 Limited practice will be assigned as a clinical lead nurse for Family Dental Care. This plan is in place and is being actioned July/August 2025 and will support the new registered manager. In addition, an experienced qualified dental nurse has been recruited who will be in place starting in August 2025.

It is recognised that Family Dental Care is going through a period of change with a new clinical team being embedded in to the practice.

It was demonstrated that arrangements are in place to ensure the dental team are appropriately trained to carry out their duties.

5.2.2 How does this service ensure arrangements are in place to ensure dental surgeries are fully equipped to meet the needs of patients and staff

Family Dental Care has three dental surgeries. We were informed that due to recruitment challenges all three surgeries had not been operational until recently, and as the staff team had grown the dental surgeries were brought into operation.

Ms Rae stated that prior to a dental surgery becoming operational the surgery would be fully stocked and equipped with a full range of dental instruments and other items. A final check of the surgery was completed to ensure all the equipment in place was working in keeping with best practice guidance.

A review of each of the three dental surgeries confirmed that a sufficient range of dental instruments were in place in sufficient quantities in each surgery to meet the needs of the practice.

A record was maintained of the repair of dental handpieces, this included the date each item was sent for repair and the date of return. This informed staff of the number and type of dental handpieces that may be out of circulation at any given time.

The management of dental unit waterlines was discussed and no issues were found.

It was determined that each of the dental surgeries was fully equipped to meet the needs of the dental practice.

5.2.3 How does the dental team ensure that appropriate radiographs (x-rays) are taken safely?

Each dental surgery has an intra-oral x-ray machine.

The arrangements regarding radiology and radiation safety were reviewed during the most recent RQIA inspection undertaken on 25 March 2025 and no issues were identified.

The appointed radiation protection advisor (RPA) must undertake a critical examination and acceptance test of all new x-ray equipment; thereafter the RPA must complete a quality assurance test every three years as specified within the legislation. Ms Rae confirmed that no new radiology equipment had been installed since the previous RQIA inspection and a quality assurance visit was not due to be undertaken therefore the radiation safety file was not reviewed as part of this inspection.

Mrs Rae informed us that since the previous RQIA inspection a software fault had occurred which had affected each intra-oral x-ray machine. The fault prevented an x-ray image being processed. Ms Rae stated the issue had been reported to the service engineer who, over a short period of time, identified a software incompatibility issue affecting all three intra-oral x-ray machines. Ms Rae was asked to provide a timeline report to demonstrate how this matter had been managed. Following the inspection, a timeline report, supported by service engineer report documentation was received by RQIA. A review of this information demonstrated that the x-ray equipment fault had been reported in a timely manner and prompt actions had been undertaken by service engineers to repair the problem.

It was confirmed that due to the software fault a small number of patients were required to have repeat x-ray undertaken. This is a notifiable event under the [IR\(ME\)R \(Northern Ireland\) 2018](#) regulations and should have been notified to RQIA. Ms Rae was receptive to this advice and following the inspection a statutory notification was received by RQIA in this regard.

Ms Rae confirmed that no further faults were encountered with the any of the x-ray equipment in place.

5.2.8 Are complaints and incidents being effectively managed?

The arrangements for the management of complaints and incidents were reviewed during the last RQIA inspection. It was confirmed that no complaints had been received in the interim period.

6.0 Quality Improvement Plan/Areas for Improvement

One new area for improvement have been identified where action is required to ensure compliance with [The Independent Health Care Regulations \(Northern Ireland\) 2005](#)

	Regulations	Standards
Total number of Areas for Improvement	1	0

The area for improvement and details of the QIP were discussed with Ms Rae, Registered Manager as part of the inspection process. The timescale for completion commences from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Independent Health Care Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 21 (1) (b) Schedule 3 Part 2 (6)	The responsible individual shall ensure that any person working in Family Dental Care is included in the staff register. Ref: 5.2.1
Stated: First time To be completed by: 3 July 2025	Response by registered person detailing the actions taken: Qualified Dental Nurse recruitment underway with a qualified lead nurse overseeing the clinics currently

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