

Inspection Report

26 November 2025



Newcastle Family Dental Care

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

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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 [Minimum Standards for Dental Care and Treatment \(March 2011\)](#)

1.0 Service information

Organisation/Registered Provider: DJ Maguire and Associates Ltd	Acting Registered Manager: Mr David Knowles
Responsible Individual: Mr Derek Maguire	Date registered: N/A
Person in charge at the time of inspection: Mr Derek Maguire	Number of registered places: Two increasing to three following this inspection
Categories of care: Independent Hospital (IH) – Dental Treatment	
Brief description of the service Newcastle 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 two dental chairs providing private dental care and treatment with conscious sedation. A variation to the registration application was submitted to RQIA prior to the inspection to increase the number of dental chairs from two to three.	

2.0 Inspection summary

This was an announced variation to registration inspection, undertaken by a care inspector on 26 November 2025 from 10.30am to 12.30pm.

A desktop review of the premises sections of the variation to the registration application was also undertaken by the RQIA estates inspector, who has confirmed approval of the application from an estates perspective.

The 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 to increase the number of dental chairs from two to three.

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

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.

Before the inspection a range of information relevant to the registration application was reviewed. This included the following records:

- the variation to registration application
- the proposed statement of purpose
- the proposed patient guide
- the floor plans of the premises

During the inspection a tour of the premises was undertaken and the inspector met with Mr Maguire and the operations director.

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

4.0 The inspection

4.1 What has this practice done to meet any areas for improvement identified at or since last inspection?

The last inspection to Newcastle Family Dental Care was undertaken on 21 May 2024; no areas for improvement were identified.

4.2 Inspection findings

4.2.1 Is the statement of purpose in keeping with Regulation 7, Schedule 1 of The Independent Health Care Regulations (Northern Ireland) 2005?

A review of the proposed statement of purpose identified that it fully reflected the key areas and themes specified in Regulation 7, Schedule 1 of The Independent Health Care Regulations (Northern Ireland) 2005. Mr Maguire is aware that the statement of purpose should be reviewed and updated as and when necessary.

4.2.2 Is the patient guide in keeping with Regulation 8, Schedule 1 of The Independent Health Care Regulations (Northern Ireland) 2005?

A review of the proposed patient guide identified that it fully reflected the key areas and themes specified in Regulation 8 of The Independent Health Care Regulations (Northern Ireland) 2005. Mr Maguire is aware that the patient guide should be reviewed and updated as and when necessary.

4.2.3 Have any new staff been recruited to work in the additional dental surgery in accordance with relevant legislation?

Dental practices are required to maintain a staff register. A staff register was in place which was noted to be up to date and included all the required information.

A review of the staff register evidenced that two new staff had been recruited since the previous inspection. A review of one personnel file of a newly recruited staff member evidenced that relevant recruitment records had been sought; reviewed and stored as required under Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005, as amended.

The operations director oversees the recruitment and selection of the dental team and approves all staff appointments with the support of Mr Maguire. Discussion with the operations directors confirmed that she had a clear understanding of the legislation and best practice guidance.

The recruitment of the dental team complies with the legislation and best practice guidance to ensure suitably skilled and qualified staff work in the practice.

4.2.4 Does the dental team adhere to infection prevention and control (IPC) best practice guidance?

The IPC arrangements were reviewed in relation to the new dental surgery to evidence that the risk of infection transmission to patients, visitors and staff was minimised.

The new surgery was tidy, uncluttered and easy to clean work surfaces were in place. The flooring was impervious and coved where it meets the walls. All fittings and kicker boards of cabinetry were seen to be finished to a high standard. All areas of the practice observed were equipped to meet the needs of patients.

The operations director confirmed that the newly installed dental chair had an independent bottled-water system and that the dental unit water lines (DUWLs) are appropriately managed in keeping with manufacturer's instructions.

Appropriate arrangements are in place in the practice for the storage and collection of general and clinical waste, including sharps waste. A dedicated hand washing basin was in place with hand hygiene signage displayed.

It was noted that liquid hand soap, wall mounted disposable hand towel dispensers and clinical waste bins were provided in keeping with best practice guidance.

It was determined that the dental team is adhering to best practice guidance to minimise the risk of infection transmission to patients, visitors and staff.

4.2.5 Does the dental team meet current best practice guidance for the decontamination of reusable dental instruments?

There was a designated decontamination area separate from patient treatment areas and dedicated to the decontamination process. The design and layout of this room complied with best practice guidance. Equipment and instruments provided were sufficient to meet the requirements of the practice and the additional dental surgeries.

The records showed the equipment for cleaning and sterilising instruments was inspected, validated, maintained and used in line with the manufacturers' guidance. Review of equipment logbooks demonstrated that all required tests to check the efficiency of the machines had been undertaken.

Decontamination arrangements demonstrated that the dental team are adhering to current best practice guidance on the decontamination of dental instruments.

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

The arrangements concerning radiology and radiation safety for any new equipment obtained since the last inspection were reviewed to ensure that appropriate safeguards were in place to protect patients; visitors and staff from the ionising radiation produced by taking an x-ray.

The appointed 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.

The operations director confirmed that new intra-oral equipment had been installed in the new surgery. A critical examination and acceptance test report for the new intra-oral x-ray was undertaken during March 2025.

A radiation protection advisor (RPA), medical physics expert (MPE) and radiation protection supervisor (RPS) have been appointed in line with legislation.

The critical examination and acceptance test report, generated by the RPA during March 2025, evidenced that the x-ray equipment had been examined and any recommendations made had been actioned.

A dedicated radiation protection file containing the relevant local rules, employer's procedures and other additional information was retained. The equipment inventory had been updated to include all x-ray equipment in place.

A review of the file confirmed that the Employer had entitled the newly recruited dental staff to undertake specific roles and responsibilities associated with radiology and ensured that these staff had completed appropriate training.

A copy of the local rules was on display near each new x-ray machine observed and appropriate staff had signed to confirm that they had read and understood these.

The radiology and radiation safety arrangements evidenced that robust procedures are in place to ensure that appropriate x-rays are taken safely.

5.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mr Maguire, Responsible Individual, and the operations director as part of the inspection process and can be found in the main body of the report.



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