



The Regulation and
Quality Improvement
Authority



Health and Social
Care Board

Memorandum of Understanding between the Regulation and Quality Improvement Authority (RQIA) and the Health and Social Care Board (HSCB)

Relating to Regulation and Inspection of Dental Practices

May 2021 – March 2022

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Introduction

From April 2011, following an amendment to The Independent Health Care Regulations (Northern Ireland) 2005, establishments providing private dental care or treatment are subject to the requirements of The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 (the 2003 Order) and will be regulated as independent hospitals.

The registration process requires such dental practices to make a full application for registration and to undergo a pre-registration inspection.

Individuals who are responsible for carrying on dental practices in which no private dental care and treatment will be provided are required to submit a Certification of Exemption form. These practices will not be required to register with RQIA.

Following agreement with the DoH, and discussion between the HSCB and the RQIA, the HSCB ceased its dental inspection programme in 2011, and takes its assurance from the RQIA inspection programme.

RQIA, when regulating practices providing private dental treatment, will also inspect and report on the HSC elements of dental provision including those practices that are exempt from registration under the provisions of the Independent Health Care (NI) Regulations 2005.

RQIA will report to the HSCB any issues relating to:

- Identified risks to the health, safety and welfare of patients availing of HSC service provision
- Day-to-day management issues in dental practices that give cause for concern
- Any issues relating to professional regulation and/or professional conduct of professionals working within practices.

During the initial registration process, RQIA inspection staff and HSCB dental officers developed protocols in line with RQIA inspection methodology and participated in an inspection programme. This joint approach added specific dental expertise to the RQIA inspection process and developed HSCB dental officers' knowledge of regulation in line with the 2003 Order, its subordinate regulations and relevant minimum standards.

Role of HSCB

The role of HSCB is as set out in the Health and social Care (Reform) Act (NI) 2009:

- To arrange or commission a comprehensive range of modern and effective health and social services for the population of Northern Ireland
- To work with the health and social care (HSC) trusts that directly provide services to people to ensure that these meet their needs
- To deploy and manage its annual funding from the Northern Ireland Executive to ensure that all services are safe and sustainable.

In relation to General Dental Services (GDS) the HSCB has a responsibility, under its statutory duty of quality set out in the HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and detailed in the Minimum Standards for Dental Care and Treatment (2011), to ensure that the services and treatment provided by the General Dental Practitioners (GDPs) in all sites providing GDS across Northern Ireland are safe.

Role of RQIA

RQIA was established under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003. The Order also places a statutory duty of quality upon health and social care organisations, and requires DoH to develop standards against which the quality of services can be measured.

The Regulation and Quality Improvement Authority (RQIA) is the independent body responsible for monitoring and inspecting the quality, safety and availability of HSC services in Northern Ireland. RQIA ensures that HSC services and regulated services in Northern Ireland are accessible, well managed and meet the required standards. RQIA works to ensure that there is openness, clarity and accountability in the management and delivery of services.

In relation to private dental treatment; RQIA is responsible for the regulation, registration and inspection of practices as defined in the Independent Health Care Regulations (Northern Ireland) 2005. Inspections are conducted in line with the Fees and Frequencies Regulations (Northern Ireland) 2005.

Under Article 35 of the 2003 order RQIA has five specific functions:

- (a) Conducting reviews of, and making reports on, arrangements by statutory bodies for the purposes of monitoring and improving the quality of the health and personal social services for which they have responsibility
- (b) Carrying out investigations into, and making reports on, the management, provision and quality of health and personal social services for which statutory bodies have responsibility
- (c) Conducting reviews of, and making reports on, the management, provision or quality of, or access to or availability of, particular types of health and personal social services for which statutory bodies or service providers have responsibility
- (d) Carrying out inspections of statutory bodies and service providers, and persons who provide or are to provide services for which such bodies or providers have responsibility, and making reports on the inspections
- (e) Such functions of, or access to or availability of, services for which prescribed statutory bodies or prescribed service providers have responsibility.

It is under these functions that RQIA is enabled to inspect the provision of health service dentistry.

Purpose of the MOU

This MOU establishes a framework for the working relationship between RQIA and HSCB.

It sets out each organisation's responsibilities, identifies areas of collaboration, and mechanisms for sharing information. The MoU is not enforceable by law; however, RQIA and HSCB agree to adhere to its principles and to show due regard for each other's activities. RQIA and HSCB acknowledge the responsibilities and functions of each other and will take account of these when working together. It also aims to:

- Provide clarity on the respective roles of HSCB and RQIA in respect of the inspection of dental practices
- Set out the areas in which RQIA and HSCB will work together
- Identify areas that will remain solely the remit of HSCB
- Identify areas that will remain solely the remit of RQIA
- Create a framework for sharing information and dealing with issues that may arise during the course of inspection.

This MOU does not place additional legal obligations on the organisations; nor does it imply any transfer of responsibility from one organisation to the other; nor sharing of statutory functions. In operating within the terms of this MOU, each organisation will continue to work within its respective statutory framework and functions at all times.

RQIA and HSCB will work together in the following areas:

1. Aligning approaches, including the collection, sharing and use of information
2. Ensuring that joint assurance is given for private and HSC general dental service provision consistent with the statutory roles and responsibilities of each organisation
3. Providing leadership and guidance to promote quality and safety across the general dental service sector.

Information sharing

Information needs to be exchanged between RQIA and the HSCB to ensure patient safety and continuous improvement in patient care.

Information may include:

From RQIA:

- Summary or composite inspection reports
- Serious requirements arising from inspection/enforcement activity
- Serious adverse incidents/ statutory notifications
- Complaints
- Enforcement activity
- Prosecution activity
- Referrals to the GDC
- Matters of concern relating to professional practice.

From HSCB:

- Significant Clinical/Professional concerns
- Serious adverse incidents
- Referrals to the GDC
- Complaints

This list is not exhaustive. Other issues may arise that will need to be included in the information flows between the two organisations.

Each organisation will involve the other as early as possible in the development of planned announcements and seek to give adequate warning, including the sharing of draft proposals and publications, which may affect both organisations.

The RQIA and HSCB will ensure wherever possible that each receives:

- Details of any planned publications with implications for each organisation approximately 48 hours before they are released to the media
- Details of any press releases with implications for each organisation approximately 24 hours before they are released to the media.

The RQIA and HSCB will respect confidentiality of any documents shared in advance of publication and will not act in any way that would cause the content of those documents to be made public ahead of the planned publication date.

Information governance

Both HSCB and RQIA will have regard to the requirements of the Data Protection Act 2018 and the UK General Data Protection Regulations (UK GDPR), Human Rights Act 1998 and the requirements of the Freedom of Information Act 2000.

Both the HSCB and RQIA will act in accordance with the Lord Chancellor's Code of Practice under Section 46 of the Freedom of Information Act 2000, with particular but not exclusive regard for section 13. Where a request for information is received, both HSCB and RQIA Information Governance Teams will work closely together to address the request.

Both the HSCB and the RQIA will ensure that information which would be designated as 'personal information' or 'special category information' is managed in line with the underpinning principles of the Data Protection Act 2018 and the UK General Data Protection Regulations (UK GDPR).

Joint staffing

Each year the HSCB will release dental officers to RQIA for the purpose of inspecting premises and giving professional advice in relation to the work programme. This will be reviewed annually at the end of March.

When HSCB officers work for RQIA, they will be regarded as RQIA officers and will be warranted in line with RQIA's remit under the 2003 Order. Day-to-day performance of the HSCB officers, whilst discharging the duties of RQIA, will be the responsibility of RQIA. Issues of performance will be communicated to the relevant officer in HSCB.

When working for RQIA, the dental officers will report directly to the relevant Assistant Director and will be accountable to the relevant director. The dental officers will be given an honorary contract relating to the work carried out for RQIA.

This agreement may be terminated by either RQIA or HSCB, giving a period of four weeks' notice.

Inspection of wholly HSC premises

Article 41 of The Health and Personal Social Services (Quality Improvement and Regulation) (Northern Ireland) Order 2003, confers powers to RQIA to require information from inspections relating to Boards and HSC Trusts. This allows a person authorised by RQIA to enter and inspect premises which are used by a HSC body or service provider.

In line with article 41, RQIA as well as registering and inspecting private dental practices, will also inspect dental practices that provide a wholly HSC service (i.e. those which do not provide any private care). Under the amended Independent Health Care Regulations (Northern Ireland) 2005, these services do not require to be registered with RQIA. As such they will be inspected by an HSCB dental adviser in line with the current RQIA inspection methodology and tools. In the case of wholly HSC Dental services, the HSCB will report on the outcomes of these inspections and will issue the report to the dental practitioner.

The HSCB will continue to send alerts that relate to the practice of dentistry to all individual dental practitioners via GDS email correspondence. To prevent duplication of information, RQIA will send alerts to all wholly private dental practices not on the GDS email correspondence list.

HSCB will continue to carry out probity checks and monitoring of treatment through the Referral Dental Service. RQIA will have no input into these processes. However, any relevant information emanating from HSCB inspections will be shared with RQIA as appropriate. This information will be used to provide background intelligence to inform risk assessment in respect of individual dental practices. Where RQIA has concerns regarding dental care and treatment, support will be requested from an HSCB dental advisor to undertake a joint inspection of the dental practice. RQIA will report on the findings of the inspection and share these with HSCB before issuing the report to the dental practice.

RQIA will not be responsible for inspecting the prison dental service clinics; this function is undertaken by HSCB dental advisers.

Inspection new dental practices

New dental practices will normally be inspected by the HSCB in the first instance and information on the location of the new practice shared with RQIA. The practice will be informed by the HSCB dental adviser that if they want to carry out any private work then they should register with RQIA. RQIA will process registration applications received for new dental practices and undertake a pre-registration inspection to ensure that the practice is compliant with the legislation, minimum standards and best practice guidance before approving registration.

Escalation of issues

In the event that, during the course of inspection and/or review activities, a member of staff of RQIA becomes aware of any issue which presents an immediate risk to a service user and has the potential to cause significant harm, the staff member will bring this to the attention of the appropriate person in line with the RQIA enforcement policy.

These concerns will also be passed on to the HSCB as soon as possible, within two working days.

Any other issues which would present a lesser risk to patient safety will also be brought to the attention of the HSCB within an appropriate timescale, dependent on the outcome of any follow up visit(s).

If, during the course of any of their activities, a HSCB Officer becomes aware of any issues that may present a risk to patient safety, this information will be brought to the attention of the RQIA as soon as possible, within two working days.

Feedback and milestone meetings

To ensure quality monitoring, development of the arrangement and to ensure timely response to any common issues that arise, there should be feedback from both RQIA and the HSCB at milestone meetings. These should take place at least quarterly.

This MOU will need to be reviewed in light of the planned closure of the HSCB on 31 March 2021.

Operational contacts:

Jo Browne, Senior Inspector Independent Health Care Team: jo.browne@rqia.org.uk
(for operational/regulation issues)

David McCann, Assistant Director Improvement: david.mccann@rqia.org.uk
(for operational/regulation issues)

Jonathan Montgomery, HSCB Dental Advisor: jonathan.montgomery@hscni.net

Signed

Emer Hopkins, Interim Director Improvement, RQIA

A handwritten signature in black ink, appearing to read 'Emer Hopkins', written over a horizontal line.

Date 28/05/2021

Louise McMahon, Director of Integrated Care, HSCB

A handwritten signature in black ink, appearing to read 'Louise McMahon', written in a cursive style.

Date 06/09/2021