

The Regulation and  
Quality Improvement  
Authority

Inspector: Raymond Sayers  
Inspection ID: IN024158

Clogher Valley Dental Care  
(Fivemiletown)  
RQIA ID: 11438  
86 Main Street  
Fivemiletown

Tel: 028 89521177

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**Announced Estates Inspection  
of  
Clogher Valley Dental Care (Fivemiletown)**

**04 March 2016**

**The Regulation and Quality Improvement Authority  
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT  
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: [www.rqia.org.uk](http://www.rqia.org.uk)**

## 1. Summary of Inspection

An announced estates inspection took place on 04 March 2016 from 2.00pm to 3.00pm. On the day of the inspection the premises supported the delivery of safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Minimum Standards for Dental Care and Treatment, March 2011.

### 1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those items detailed in the previous QIP there were no further actions required to be taken following the last inspection.

### 1.2 Actions/Enforcement Resulting from this Inspection

Enforcement action did not result from the findings of this inspection.

### 1.3 Inspection Outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	0	2

The details of the QIP within this report were discussed with Mr Richard Graham (Registered Person) as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Clogher Valley Dental Care (Fivemiletown)/ Mr Richard Graham	<b>Registered Manager:</b> Mrs Claudette Graham
<b>Person in Charge of the Premises at the Time of Inspection:</b> Mr Richard Graham	<b>Date Manager Registered:</b> 18 February 2014
<b>Categories of Care:</b> Independent Hospital – Dental Treatment	<b>Number of Registered Chairs:</b> 2

## 3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards have been met:

### Standard 13: Prevention and Control of infection

### Standard 14: Your care environment

## 4. Methods/Process

Specific methods/processes used in this inspection include the following:

There were no records/documents examined prior to the inspection.

During the inspection the inspector met with Mr Richard Graham.

The following records were examined during the inspection: Copies of building services maintenance certificates, building engineering services user log books, legionellae risk assessment and fire risk assessment.

## 5. The Inspection

### 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the premises was an announced care inspection, IN022599, dated 21 August 2015. The completed QIP was returned and reviewed by the dental care inspector in October 2015.

Matters to be reviewed:

#### Recommendation 1

"It is recommended that advice and guidance should be sought from the Department of Health, Social Services and Public Safety (DDHSSPS) sustainable Development Engineering Branch (SDEB) regarding the use of a disinfection procedure for the management of dental unit water lines (DUWLs)".

## 5.2 Review of Requirements and Recommendations from the last Estates Inspection

Not applicable; this is the first estates inspection conducted on the premises.

## 5.3 Standard 13: Prevention and Control of infection

### Is Care Safe? (Quality of Life)

A range of documents relating to the safe operation of the premises, installations and engineering services was presented for review during this Estates inspection. This supports the delivery of safe care.

An issue was identified for attention during this Estates inspection, and is detailed in the 'areas for improvement' section below.

### Is Care Effective? (Quality of Management)

A range of accommodation, facilities and support services is provided in the premises. This supports the delivery of effective care.

There were no issues identified for attention during this inspection.

### Is Care Compassionate? (Quality of Care)

The accommodation reviewed during this Estates inspection was well maintained and in good decorative condition, this supports the delivery of compassionate care.

There were no issues identified for attention during this inspection.

### Areas for Improvement

1. The DUWLs are not subjected to a disinfection procedure in compliance with HTM01 05; the registered person indicated that manufacturer's instructions are complied with, and that the DUWLs are flushed with water before each work session, and between patients. Refer to Quality Improvement Plan, Recommendation 1.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>1</b>
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## 5.4 Standard 14: Your Care Environment

### Is Care Safe? (Quality of Life)

A range of documents related to the maintenance of the premises was presented for review during this Estates inspection. The documents included inspection and test reports for various elements of the engineering services, plus risk assessments. This supports the delivery of safe care.

Issues were identified for attention during this Estates inspection, and are detailed in the 'areas for improvement' section below.

**Is Care Effective? (Quality of Management)**

The dependency and needs of the patients are considered as part of the risk assessment processes; this is reflected in the management of the premises and supports the delivery of effective care.

A number of issues were identified for attention during this Estates inspection, and are detailed in the 'areas for improvement' section below.

**Is Care Compassionate? (Quality of Care)**

There are health and safety procedures and control measures in place, supporting the delivery of compassionate care.

There were no issues identified for attention during this Estates inspection.

**Areas for Improvement**

1. The building control completion certificate for the lift installation and building improvement works was not available for examination.  
Refer to Quality Improvement Plan, Recommendation 2.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>1</b>
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**5.5 Additional Areas Examined**

None.

## 6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr Richard Graham (Registered Person) as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

### 6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Independent Health Care Regulations (Northern Ireland) 2005.

### 6.2 Recommendations



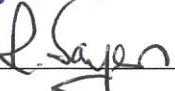
This section outlines the recommended actions based on research, recognised sources and the Minimum Standards for Dental Care and Treatment, March 2011. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

### 6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to **Regulation and Quality Improvement Authority, Hilltop, Tyrone and Fermanagh Hospital, Omagh, BT79 0NS** and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the practice. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the practice.

## Quality Improvement Plan

Recommendations			
<b>Recommendation 1</b>  <b>Ref:</b> Standard 13  <b>Stated:</b> First time  <b>To be Completed by:</b> <b>06 May 2016</b>	Submit verification that DUWLs have been subjected to a robust infection control risk assessment, and that procedures/controls are implemented to safe guard patients against the risk of infection. The infection control risk assessment and action plan must be either in accordance with HTM01 05, or with manufacturer`s instructions.	<b>Response by Registered Manager Detailing the Actions Taken:</b> <i>I DO NOT ACCEPT THIS RECOMMENDATION. IN THE QUALITY IMPROVEMENT PLAN DATED 22/10/15 WE WERE GIVEN A RECOMMENDATION REGARDING THE MANAGEMENT OF DUWLs. THIS RECOMMENDATION WAS FULFILLED. IT IS INAPPROPRIATE FOR RQIA TO COME UP WITH A FURTHER RECOMMENDATION REGARDING DUWLs.</i>	
<b>Recommendation 2</b>  <b>Ref:</b> Standard 14  <b>Stated:</b> First time  <b>To be Completed by:</b> <b>01 August 2016</b>	Submit a copy of the local authority building control department completion certificate for the lift installation and building improvement works.	<b>Response by Registered Manager Detailing the Actions Taken:</b> <i>WE HAVE NO CONTROL OVER THE OFFICERS AT BUILDING CONTROL. WHEN WE HAVE THESE A COPY WILL BE SENT TO RQIA.</i>	
<b>Registered Manager Completing QIP</b>		<b>Date Completed</b>	18/4/16
<b>Registered Person Approving QIP</b>		<b>Date Approved</b>	18/4/16
<b>RQIA Inspector Assessing Response</b>		<b>Date Approved #</b>	27/4/16

\*Please ensure the QIP is completed in full and returned to:

Regulation and Quality Improvement Authority, Hilltop, Tyrone and Fermanagh Hospital, Omagh, BT79 0NS  
from the authorised email address\*

*# additional clarification and evaluation required on some items.*