

# Announced Premises Inspection Report 26 September 2016



## Rosconnor Clinic

**Type of Service: Independent Hospital (IH) - Dental Treatment**  
**Address: 21 Portrush Road, Ballymoney, BT53 6BX**  
**Tel No: 028 2766 2145**  
**Inspector: P Cunningham**

[www.rqia.org.uk](http://www.rqia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An announced premises inspection of Rosconnor Clinic took place on 26 September 2016 from 14:30 to 16:00hrs.

The inspection sought to determine if the premises was supporting the delivery of safe, effective and compassionate care and if the service was well led.

### Is care safe?

On the day of the inspection the premises supported the delivery of safe care. However some issues were identified for attention by the registered provider. Refer to section 4.3.

### Is care effective?

On the day of the inspection the premises supported the delivery of effective care.

### Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care.

### Is the service well led?

On the day of the inspection the management of the premises was considered to be well led.

This inspection was underpinned by The Independent Health Care Regulations (Northern Ireland) 2005 and the Minimum Standards for Dental Care and Treatment.

## 1.1 Inspection outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	<b>0</b>	<b>3</b>

Details of the Quality Improvement Plan (QIP) within this report were discussed with Marie Donnelly, Practice Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

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

## 1.2 Actions/enforcement taken following the most recent premises inspection

This was the first premises inspection of the practice.

## 2.0 Service Details

<b>Registered person:</b> Mark Hamburger (registration pending at time of inspection)	<b>Registered manager:</b> Jason Henry
<b>Person in charge of the establishment at the time of inspection:</b> Jason Henry	<b>Date manager registered:</b> 17 August 2012
<b>Categories of care:</b> Not applicable	<b>Number of registered places:</b> 2

## 3.0 Methods/processes

During the inspection the inspector met with Marie Donnelly and Jason Henry.

The following records were examined during the inspection: Copies of service records and in-house log books relating to the maintenance and upkeep of the building and engineering services, legionellae risk assessment, fire risk assessment.

## 4.0 The Inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 26 September 2016

The most recent inspection of the Private Dental Practice was an announced pre-registration care inspection which was carried out on the same day as this inspection. The completed QIP will be validated by the specialist inspector when returned and at their next inspection.

### 4.2 Review of requirements and recommendations from the last premises inspection

This was the first premises inspection of the practice.

### 4.3 Is care safe?

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this premises inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments.

Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this premises inspection.

A range of fire protection measures are in place for the premises. This includes a fire detection and alarm system, emergency lighting, first aid fire-fighting equipment, structural fire separation and protection to the means of escape.

A number of issues were however identified for attention during this premises inspection. These are detailed in the 'areas for improvement' section below.

### Areas for improvement

1. The fire risk assessment carried out in July 2014 highlighted a number of items requiring attention in the action plan of the assessment report. Several of the items remain outstanding and the registered manager stated that these were to be addressed as part of planned building works which have begun to extend the premises. This includes upgrading of the roller shutter separating the reception from the main entrance hall and circulation space. The manager stated that the assessment is to be reviewed on completion of the above mentioned extension works.  
See recommendation 1 in the attached QIP.
2. The control measures for the control of legionella in the premises' domestic plumbing system have been identified in the legionella risk assessment report. The assessment is to be reviewed on completion of the above mentioned extension works. The practice manager stated that ongoing measures such as flushing of seldom used outlets is ongoing although full records are not retained.  
See recommendation 2 in the attached QIP.
3. While a range of fire safety measures are in place, the inspector recommends that practice fire drill should be carried out in the premises periodically so that all staff have participated in one annually.  
See recommendation 3 in the attached QIP.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>3</b>
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#### 4.4 Is care effective?

There are arrangements in place for routine premises management and upkeep as well as timely breakdown/repair maintenance.

This supports the delivery of effective care.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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**4.5 Is care compassionate?**

The areas of the premises reviewed during this premises inspection were well presented, comfortable, clean, free from malodours and adequately lit

This supports the delivery of compassionate care.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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**4.6 Is the service well led?**

Premises related policies and documentation are retained in a manner which is accessible to relevant people.

The registered person has dealt appropriately with previous RQIA QIP items and other relevant issues relating to the premises and has been adequately supported and resourced by the registered responsible person.

There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate.

This supports a well led service.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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## 5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Marie Donnelly as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/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 provider 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 the Private Dental Practice. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises, RQIA would apply standards current at the time of that application.

## 5.1 Statutory requirements

There were no requirements made as a result of this inspection.

## 5.2 Recommendations

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

## 5.3 Actions taken by the Registered Provider

The QIP should be completed and detail the actions taken to meet the legislative requirements stated. The registered provider should confirm that these actions have been completed and return completed QIP to [Estates.Mailbox@rqia.org.uk](mailto:Estates.Mailbox@rqia.org.uk) for assessment by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

<b>Quality Improvement Plan</b>	
<b>Recommendations</b>	
<b>Recommendation 1</b> Ref: Standard 14.2 Stated: First time To be completed In line with the current/ongoing building works	<p>The registered provider should ensure that the remedial actions listed in the fire risk assessment are addressed and that the fire risk assessment is reviewed accordingly.</p> <p><b>Response by registered provider detailing the actions taken:</b>            In regards to the Fire Risk Assessment an upgraded roller shutter will be installed at reception in line with the current/ongoing building works. A new Fire Risk Assessment will also be carried out on completion of the current building work</p>
<b>Recommendation 2</b> Ref: Standard 14.2 Stated: First time To be completed: A) On an ongoing basis B) In line with the current/ongoing building works	<p>A) The registered provider should record the control measures carried out in support of the legionella control scheme.</p> <p>B) The legionella risk assessment should be reviewed on completion of the ongoing building works to include alterations to the building's domestic plumbing and water storage system.</p> <p><b>Response by registered provider detailing the actions taken:</b>            In regards to Legionella a new Risk assessment will be carried out on completion of the current building works. Procedures will be put into place to record the flushing of seldom used water outlets</p>
<b>Recommendation 3</b> Ref: Standard 12.5 Stated: First time To be completed by: 22 November 2016	<p>The registered provider should ensure that a practice fire evacuation is carried out in the premises and this is repeated periodically so that all staff participate at least annually.</p> <p><b>Response by registered provider detailing the actions taken:</b>            An unannounced fire evacuation will take place before 22<sup>nd</sup> Novemeber 2016 and repeated periodically</p>

*\*Please ensure this document is completed in full and returned to [Estates.Mailbox@rqia.org.uk](mailto:Estates.Mailbox@rqia.org.uk) from the authorised email address\**



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