



The Regulation and
Quality Improvement
Authority

Announced Premises Inspection Report 18 November 2016



Catherine Street Dental Care

Type of Service: Independent Hospital (IH) - Dental Treatment

Address: 38 Catherine Street, Limavady, BT49 9DB

Tel No: 028 7776 5077

Inspector: P Cunningham

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of Catherine Street Dental Care took place on 18 November 2016 from 12:00 to 13:00hrs.

The inspection sought to assess progress with any issues raised during and since the last premises inspection and to determine if the private dental practice was delivering 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
Total number of requirements and recommendations made at this inspection	0	1

Details of the Quality Improvement Plan (QIP) within this report were discussed with Julie Mullan, Registered Manager and Derek Maguire, Registered Person as part of the inspection process. The timescales for completion commence from the date of inspection.

1.2 Actions/enforcement taken following the most recent premises inspection

This was the first premises inspection to this establishment.

2.0 Service Details

Registered organisation/registered provider: D J Maguire and Associates Ltd	Registered manager: Julie Mullan
Person in charge of the establishment at the time of inspection: Julie Mullan	Date manager registered: 10 August 2015
Categories of care: Independent Hospital (IH) – Dental Treatment	Number of registered places: Four

3.0 Methods/processes

During the inspection the inspector met with Julie Mullan, Registered Manager and Derek Maguire, Registered Person.

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 18 November 2016

The most recent inspection of the Private Dental Practice was an announced care inspection carried out on the same day as this inspection. This QIP will be validated by the specialist inspector at their next inspection.

4.2 Review of requirements and recommendations from the last premises inspection

This was the first premises inspection to this establishment.

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 an automatic fire alarm and detection system, emergency lights and first aid fire-fighting equipment. It is good to note that a fire risk assessment has been undertaken and the fire risk assessor is included on a recognised professional body register of fire risk assessors.

Measures are in place relating to the management of the dental unit water lines (DUWLs) and a legionella risk assessment is in place relating to the water systems in the building. The registered provider stated that a new heating and hot & cold water system is currently being installed in the premises and is due to be complete over coming weeks.

One issue was identified for attention during this premises inspection. This is detailed in the 'areas for improvement' section below.

Areas for improvement

The legionella risk assessment should be reviewed to reflect the new hot and cold water system. The system should be installed in accordance with current good practice, reference should be made to the guidance issued by The Health and Safety Executive Northern Ireland (HSENI) see <https://www.hseni.gov.uk/topics/legionella>

Number of requirements	0	Number of recommendations:	1
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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.

Number of requirements	0	Number of recommendations:	0
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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.

Number of requirements	0	Number of recommendations:	0
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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.

Number of requirements	0	Number of recommendations:	0
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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 Julie Mullan, Registered Manager and Derek Maguire, Registered Person, 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

No requirements were 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 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.

Quality Improvement Plan

Recommendations

<p>Recommendation 1</p> <p>Ref: Standard 13.2</p> <p>Stated: First time</p> <p>To be completed by: In line with the timescales associated with the new installation</p>	<p>The new hot and cold water system should be installed to comply with the provisions of the guidance issued by The Health & Safety Executive Northern Ireland, HSG 274 Part 2.</p> <p>On completion of the installation of the new system, the registered provider should carry out a review of the legionella risk assessment referring to the guidance which can be accessed freely at: http://www.hse.gov.uk/pUbns/books/hsg274.htm</p>
	<p>Response by registered provider detailing the actions taken: <i>work to be completed on 31st Dec 2016.</i></p>



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