

General Dental Practice Inspection (Announced)

**Abertawe Bro Morgannwg
University Health Board,**

22 Dental

11 March 2015

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1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection to 22 Dental practice at 22A, Caroline Street, Bridgend, CF31 1DQ within the area served by Abertawe Bro Morgannwg University Health Board on 11 March 2015

During the inspection we considered and reviewed the following areas:

- Patient experience
- Delivery of Standards for Health Services in Wales
- Management and leadership
- Quality of environment.

2. Methodology

HIW inspections of General Dental Practices seek to establish how well practices meet the standards in *Doing Well, Doing Better: Standards for Health Services in Wales*¹.

During the inspection we reviewed documentation and information from a number of sources including:

- Information held by HIW
- Interviews of staff including dentists and administrative staff
- Conversations with nursing staff
- Examination of a sample of patient dental records
- Examination of practice policies and procedures
- Examination of equipment and premises
- Information within the practice information leaflet and website

¹ Doing Well, Doing Better: Standards for Health Services in Wales came into force from 1st April 2010. The framework of standards sets out the requirements of what is expected of all health services in all settings in Wales. www.weds.wales.nhs.uk/opensoc/214438

- HIW patient questionnaires.

At the end of each inspection, we provide an overview of our main findings to representatives of the dental practice to ensure that they receive appropriate feedback.

Any urgent concerns that may arise from dental inspections are notified to the dental practice and to the health board via an immediate action letter. Any such findings will be detailed, along with any other recommendations made, within Appendix A of the inspection report.

Dental inspections capture a snapshot of the application of standards at the practice visited on the day of the inspection.

3. Context

22 Dental provides services to patients in the Bridgend area. The practice forms part of dental services provided within the geographical area known as Abertawe Bro Morgannwg University Health Board.

The practice has a staff team which includes two dentists, one hygienist, two nurses and a practice manager/receptionist. A range of services are provided.

22 Dental is a mixed practice providing both private and NHS dental services. In this respect, any dentist working at the practice who is also registered with HIW to provide private dentistry will also be subject to the provisions of The Private Dentistry (Wales) Regulations 2008 and the Private Dentistry (Wales) (Amendment) Regulations 2011.

4. Summary

HIW explored how 22 Dental met the standards of care in the *Doing Well, Doing Better: Standards for Health Services in Wales*.

Patients who provided comments indicated they were very satisfied with the service provided by the practice team. Patients also told us they had been provided with enough information about their treatment.

We found the practice team were committed to providing a high quality and safe service to patients.

The processes in respect of the safe use of X-ray equipment and effective decontamination of dental instruments were supported by comprehensive documentation. Staff also demonstrated a thorough understanding of safe systems of work in the areas we considered.

The sample of patient records we considered was very comprehensive and had been well maintained.

The practice had a manager who worked closely with the principal dentist and other team members. A range of relevant policies and procedures were in place with the intention of ensuring patients' safety. We found the practice to be well run.

The practice environment appeared well maintained and provided a comfortable area for patients whilst waiting to be seen by the dentist or hygienist. It was evident that the principal dentist was committed to developing the practice facilities. Some areas had been refurbished and we found these were decorated and furnished to a high standard.

5. Findings

Patient Experience

Patients who provided comments indicated they were very satisfied with the service provided by the practice team. Patients also told us they had been provided with enough information about their treatment.

The practice team presented as friendly and welcoming and we saw them being kind and polite to patients. Many of the patients attending seemed to know the staff well, which contributed to a friendly atmosphere within the practice.

We invited patients who were attending the practice on the day of our inspection to complete HIW questionnaires. In total five questionnaires were completed, mainly through face to face conversations with patients.

All patients who provided comments indicated they were very satisfied with the service they had received from the practice, were made to feel welcome by the practice team and had been given enough information about their treatment.

Comments included:

‘Good team. No problems.’

‘Extremely satisfied with the service received by this practice.’

‘They are excellent.’

Patients told us they had not experienced any significant delay in being seen on the day of their appointment. Staff described that a process was in place for informing patients should their dentist be running late or unexpectedly absent. This process was confirmed by one of the patients who provided comments.

Health promotion material was available within patient information files in both waiting rooms. In addition, the first floor waiting room also had a large screen monitor displaying health promotion material and an overview of the services provided. This meant patients had access to relevant information to help them care for their own oral hygiene and health.

A patient information leaflet was available for patients to take away. This contained relevant information about the services provided. It also referred to how patients could raise concerns (complaints). Information on the complaints procedure and how to make suggestions was also clearly displayed within the waiting rooms. This meant patients had easy access to information on how to raise concerns they may have and how to provide feedback.

Details of the NHS pricing bands for treatment were available along with information on patient eligibility for free treatment. Prices for private dental services were also available. This meant patients visiting the practice had access to information on how much they may have to pay for their dental treatment.

Delivery of Standards for Health Services in Wales

We found the practice team were committed to providing a high quality and safe service to patients.

The processes in respect of the safe use of X-ray equipment and effective decontamination of dental instruments were supported by comprehensive documentation. Staff also demonstrated a thorough understanding of safe systems of work in the areas we considered.

The sample of patient records we considered was very comprehensive and had been well maintained.

Radiographic Equipment/Documentation

We found arrangements were in place for the safe use of radiographic equipment. The radiation protection file was comprehensive and contained all the required information. Certificates were available in respect of maintenance checks of X-ray equipment and staff training records were present. The quality of X-rays had also been subject to regular and thorough audit as part of the quality assurance process. When asked, staff were fully aware of the precautions to take when X-rays were being used.

Resuscitation and First Aid / Emergency Drugs

The practice had procedures in place to deal with a range of patient emergencies. Staff had access to resuscitation equipment and emergency drugs in the event of a patient emergency (collapse) at the practice. These were stored securely when not being used. We saw certificates that indicated staff had received training on how to deal with medical emergencies and how to perform cardiopulmonary resuscitation (CPR). A system was described as being in place to identify and replace expired drugs and also check emergency equipment. Records we saw confirmed this process. Prescription pads were being kept safe from unauthorised access.

Handling, storage and disposal of hazardous and non hazardous waste

We saw contract documentation was in place for the disposal of hazardous waste. Waste produced by the practice was being stored securely whilst waiting to be collected and disposed of by the contractor. Suitable arrangements were in place for the disposal of amalgam (fillings).

Decontamination of instruments and compliance with Welsh Health Technical Memorandum 01-05

We considered the arrangements for the decontamination (cleaning and sterilisation) of instruments used at the practice and compliance with Welsh Health Technical Memorandum (WHTM) 01-05².

The practice had a separate decontamination room as recommended within Welsh Health Technical Memorandum (WHTM) 01-05. This, together with the use of appropriate control procedures should reduce the risk of cross contamination.

We saw an appropriate process was in place for the cleaning and sterilisation of instruments, including the transportation of instruments between the surgeries and the decontamination room. Log books, confirming daily equipment checks had been conducted, were available and up to date. The equipment being used for the cleaning and sterilisation of instruments was visibly in good condition. We saw that instruments were appropriately bagged and stamped with the date they were processed and the date they had to be used by, prior to being stored. This was in accordance with WHTM 01-05.

The principal dentist confirmed an infection control audit had been completed within the last year using a recognised tool specifically aligned to the WHTM 01-05 policy and guidance. We were told all staff had been involved. This allowed the dental team to self assess their practice against the policy and to develop an improvement plan as part of the continuous improvement process.

Hand washing facilities and disposable protective equipment were available to reduce the risk of cross infection and we observed staff using these.

Clinical Facilities

We looked at the clinical facilities of each of the surgeries used within the practice. We found these contained relevant equipment to ensure the safety of patients and staff. One surgery had been refurbished to a very high standard. The principal dentist explained other surgeries were due to be refurbished as part of the plan to develop the practice premises. Suitable arrangements were in place to protect patients' privacy when receiving treatment.

² The Welsh Health Technical Memorandum (WHTM 01-05) document provides professionals with guidance on decontamination in primary care practices and community dental practices

Patient Dental Records

The practice had implemented an electronic patient records system within the last year. Therefore at the time of our inspection both paper and electronic records were being used. The sample of records we considered was very comprehensive and demonstrated care had been planned and delivered in a manner to ensure patient safety and wellbeing.

Management and Leadership

The practice had a manager who worked closely with the principal dentist and other team members. A range of relevant policies and procedures were in place with the intention of ensuring patients' safety. We found the practice to be well run.

A practice manager was responsible for the day to day running of the practice and worked closely with the principal dentist and other members of the practice team. As part of the role, the practice manager also covered receptionist duties.

Staff told us practice meetings were held monthly and we saw notes from recent meetings to support this. Staff indicated the small size of the team facilitated effective communication.

We found the practice to be well run with a range of policies and clinical procedures in place with the intention of providing safe care and treatment to patients. Additional guidance to support the practice's policies and procedures was also available.

Policies in place included those in respect of safeguarding vulnerable adults and children. These had contact details of local safeguarding teams. This meant the practice team were able to seek external advice in relation to patient safeguarding issues that may arise.

A number of written risk assessments had been completed in relation to health and safety matters in the workplace. These had been reviewed within the last year. This meant potential hazards had been considered and action taken where necessary to reduce the risk of injury to staff and patients.

The practice manager and principal dentist confirmed all clinical staff were registered with the General Dental Council and had indemnity insurance cover in place. Dentists working at the practice were registered with Healthcare Inspectorate Wales to provide private dental services. Their registration certificates were up to date and prominently displayed as required by the Private Dentistry (Wales) Regulations 2008.

The practice manager and principal dentist confirmed staff had been vaccinated against the Hepatitis B virus. The sample of staff records we saw supported this.

Staff told us they felt well supported in their roles and communication within the team was good. Evidence of training attended was available within the sample of staff records we considered. This meant staff were supported to meet continuing professional development (CPD) requirements so they had appropriate skills and up-to-date training.

The practice had a written whistleblowing procedure. Staff we spoke to confirmed they would feel comfortable raising work related concerns directly with the principal dentist prior to, and therefore potentially instead of, escalating their concerns externally.

The practice provided both NHS and private dental services and had a procedure in place for patients to raise concerns (complaints). The contact details of Healthcare Inspectorate Wales needed to be included to fully comply with the regulations for private dentistry. This was brought to the attention of the principal dentist who agreed to update the procedure with this information.

Quality of Environment

The practice environment appeared well maintained and provided a comfortable area for patients whilst waiting to be seen by the dentist or hygienist.

It was evident that the principal dentist was committed to developing the practice facilities. Some areas had been refurbished and we found these were decorated and furnished to a high standard.

22 Dental provides services from premises located in the town centre of Bridgend.

The practice was clearly signposted making it easy to find from the high street. Whilst no designated car parking was provided, parking was available in public car parks serving the town centre.

The practice was located on the first floor of the building and arranged over two floors. Access to the practice was by means of internal stairs. This meant the practice was not accessible by people with significant mobility problems or by patients who use wheelchairs. Handrails were present to assist those patients who could manage stairs.

The opening hours of the practice were clearly displayed on the entrance door of the practice. The emergency number was also clearly displayed. This meant that patients attending the practice when it was closed were directed to a number they could call for advice when needing emergency dental treatment. We were told this number was also obtainable from the practice's answerphone message.

There were three surgeries in use, two located on the first floor and one on the second floor. The reception area was located on the first floor and there were waiting areas on both the first and second floors. During a tour of the practice we saw these areas were clean and tidy with suitable lighting, heating and ventilation. The waiting rooms provided comfortable areas for patients to wait whilst waiting to be seen by the dentist or hygienist.

The practice had toilet facilities for staff and patients to use. Both facilities were visibly clean and hygienic and contained suitable hand washing equipment to prevent cross infection.

The practice building appeared satisfactorily maintained both internally and externally. It was evident that the principal dentist was committed to developing the practice facilities as far as possible. Areas that had already been upgraded were decorated and furnished to a high standard.

Arrangements were in place so that confidential conversations and telephone calls could be conducted in private. Locked storage was also available to ensure the safety of paper records.

Security precautions were in place to prevent unauthorised access to the building.

Relevant safety signs were displayed to alert staff and patients to potential hazards such as hot surfaces and low ceiling height above the stairs. Fire exits were clearly signposted and instructions to follow in the event of a fire were displayed for patients and staff to see. Maintenance labels indicated fire extinguishers had been checked within the last 12 months. We also saw records demonstrating fire alarms were tested weekly and that regular fire drills were conducted. This meant the practice was taking action to ensure the safety of patients and staff in the event of a fire.

6. **Next Steps**

This inspection has not resulted in the need for the dental practice to complete an improvement plan.