

General Dental Practice Inspection (Announced)

**Aneurin Bevan University
Health Board**

Devon Place Dental

2 February 2015

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Copies of all reports, when published, will be available on our website or by contacting us:

In writing:

**Communications Manager
Healthcare Inspectorate Wales
Welsh Government
Rhydycar Business Park
Merthyr Tydfil
CF48 1UZ**

Or via

Phone: 0300 062 8163
Email: hiw@wales.gsi.gov.uk
Fax: 0300 062 8387
Website: www.hiw.org.uk

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1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection to Devon Place Dental at 52 Devon Place, Newport, NP20 4NU within the area served by Aneurin Bevan University Health Board on 2 February 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.

Devon Place Dental is a mixed practice providing both private and NHS dental services, 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 (amendment) Regulations 2011

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 medical records

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/opendoc/214438

- Examination of practice policies and procedures
- Examination of equipment and premises
- Information within the practice information leaflet and website
- 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 will be 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

Devon Place Dental provides services to approximately 4700 private and Denplan patients and approximately 800 NHS patients, in the city centre area of Newport. The practice forms part of dental services provided within the geographical area known as Aneurin Bevan University Health Board. The practice employs a staff team which includes five dentists, two dental hygienists, one dental therapist, one practice manager, two receptionists, four trained dental nurses and one dental nurse in training.

A range of services are provided. These include:

- Private dentistry
- NHS children's dentistry
- NHS emergency dentistry
- Private domiciliary dentistry
- Cosmetic dentistry
- Restorative dentistry
- Prosthetic dentistry
- Implants (Private only)
- Private Orthodontics
- Tooth grinding
- NHS domiciliary contract
- Anti-wrinkle treatments (botox injections and dermal fillers).

4. Summary

HIW explored how Devon Place Dental meets the standards of care in the Doing Well, Doing Better: Standards for Health Services in Wales.

Without exception patients told us they were extremely satisfied with the standard of treatment provided. Patients told us staff gave them detailed information about their treatment. Certain aspects of the practice website, provision of out of hours information and complaints procedure required improvements. Overall however, patient satisfaction was extremely high.

Overall, we found the practice was being run with the intention to provide a safe, high quality service to patients. Patient records were of a particularly high quality. Several improvements needed to be made to ensure the practice met all relevant standards.

The practice was well run and staff told us they were very well supported in their roles.

The practice premises provided a safe, accessible environment for patients to receive treatment.

5. Findings

Patient Experience

Without exception patients told us they were extremely satisfied with the standard of treatment provided. Patients told us staff gave them detailed information about their treatment. Certain aspects of the practice website, provision of out of hours information and complaints procedure required improvements. Overall however, patient satisfaction was extremely high.

We sent patient questionnaires to the practice and 28 patients had completed these prior to our inspection. We also spoke with three further patients on the day. The patients had been registered at the practice between six months to 45 years.

All patients told us they were satisfied with the care they had received at the practice and all patients said they were made to feel welcome by staff, apart from two patients who said “usually”. The majority of patients also told us they did not experience any delay in being seen by the dentist. A sample of patient comments included the following:

“Brilliant service. Recommended”

“Very professional and efficient practice with excellent customer care”

“Very friendly”

“I wonder how competitive prices are at this practice compared to other dental practices – however I have not had reason to change from this practice. I would ask if the practice could refrain from ‘gimmicks’ such as the newsletter and seasons greetings card to its customers – the saving could then be reflected in a reduction in prices”

“The practice is extremely well run, professional and friendly and keeps up with innovation in treatment. I regard it as excellent”

“The team make me feel very welcome there is a warm atmosphere as soon as you arrive”

“The practice is exceptionally clean and all your needs are provided for. Highly recommended”

“I always receive friendly, efficient, caring service. Nothing is too much trouble. I am confident that the treatment provided is of the highest standard”

“Excellent practice – always keeping me well informed at all times regarding treatment

“Lovely staff”.

When we asked patients about treatment information, all patients said the dental team explained the treatment they needed in enough detail. Two patients commented that they would like more information about treatment costs. We saw a price list had recently been added to the waiting room area for patient information. Patient comments included the following about treatment information;

“All the information I need to know”

“Yes – all procedures and treatments fully explained”

“Not the cost”

“Price list of individual treatment may be useful re: check up and hygienists”

“The dentist and hygienist always answers questions and tell you what they are going to do”.

One quarter of the patients asked were not aware of how to access out of hours services. We checked the practice’s answerphone message outside of office hours and found that no out of hours information was recorded. The practice manager told us there were two phone lines and the out of hours information was only available on one line at present. The practice was planning to make the answerphone messages consistent across both lines.

Recommendation

The practice should ensure both telephone lines provide patients with the same, consistent information, specifically about out of hours care.

The practice operated a flexible appointments system, with both routine and emergency treatments being made available. On the day of the inspection we spoke with one patient who had arrived late but the practice had managed to fit them in after their appointment time. The practice was open seven days a week offering appointments 9am–1pm Saturday and 10am-2pm Sunday and was open until 6.30pm on Wednesdays. This meant patients could access appointments flexibly and patients who worked could access appointments

outside of their working hours. Patients were happy with appointment times and one person told us, “*always friendly and helpful if you need to rework appointments*”.

Although patients indicated that they were satisfied with services and had no complaints, approximately one third of the patients questioned did not know how to make a complaint, should the need arise. We saw that a summary of the complaints procedure was displayed behind the reception desk which wasn't particularly easy for patients to spot and did not specify how patients could make complaints or when they could expect a full response. The patient welcome pack was being reviewed to include complaints information but at the time of the inspection this was not yet included in the pack.

Recommendation

The practice should ensure complaints information is easily accessible, sufficiently detailed and clearly visible to patients.

We looked at the complaints policy in detail and found that it did not meet aspects of the ‘Putting Things Right’² requirements for NHS patients. Under these arrangements complaints should be acknowledged within two days, instead of the three days specified by the practice, with a response issued within 30 working days. The complaints policy did also not make clear the separate arrangements for complaints by private and NHS patients. For private patients, under the Private Dentistry (Wales) Regulations 2008, the complaint should be acknowledged in three working days, a written response provided in 10 working days and the contact details for Healthcare Inspectorate Wales should be provided. These details were not included in the practice’s complaints information. There was also a lack of information about how patients could access complaints advocacy through their Community Health Council.

Recommendation

The practice should ensure that the separate arrangements and timescales for NHS and private patients are fully outlined in complaints information. Complaints information should also include information about how to access advocacy through the Community Health Council.

² **Putting Things Right** aimed to make it easier for patients and carers to raise concerns. It introduced a single more integrated approach bringing together the management of complaints, incidents and claims, based on the principle of ‘investigate once, investigate well’.

We saw that patients were invited to give feedback to the practice through questionnaires and aspects of the practice had changed as a result.

There was a range of health promotional material available within clinical areas. We saw that the practice promoted good oral health, for example, dentists made referrals to 'stop smoking' schemes. Practice 'welcome packs' were kept behind the reception desk and were being updated. We suggested the practice should consider making some welcome packs available in waiting areas for easier patient access.

We checked the practice website prior to the inspection and found that aspects of it did not comply with the General Dental Council (GDC) 'Principles of Ethical Advertising' (March 2012). These guidelines specify that on dental practice websites the GDC contact details or a link to the GDC website should be included along with the complaints procedure and the date the website was last updated. We found that these aspects were missing from the practice website.

Recommendation

The practice should ensure the website complies with GDC 'Principles of Ethical Advertising' guidelines.

There was a low staff turnover and most of the staff had been working at the practice for many years. This meant patients received continuity in their care, receiving care from the same staff.

Delivery of Standards for Health Services in Wales

Overall, we found the practice was being run with the intention to provide a safe, high quality service to patients. Patient records were of a particularly high quality. Several improvements needed to be made to ensure the practice met all relevant standards.

We looked at a sample of patient records for the five dentists working at the practice, along with notes made by other members of the team. We found records to be of an excellent standard with the level of detail required for documentation of patient care.

We found suitable arrangements were in place for the safe use of radiographic equipment. All mandatory documentation, including safety checks, maintenance, testing and staff training were available and up-to-date.

Staff had access to resuscitation equipment and drugs in the event of a patient emergency (collapse) at the practice. The records we saw showed all staff except for one staff member had up to date training in cardiopulmonary resuscitation (CPR).

Recommendation

The practice should ensure all dental practitioners and dental healthcare staff update their knowledge and skills in resuscitation at least annually in line with Resuscitation Council guidelines.

We saw that emergency drugs were held in accordance with legal requirements. Staff told us they carried out periodic checks of expiry dates but this relied upon staff remembering to do so.

Recommendation

The practice should ensure there is a formalised system in place to replace expired drugs to ensure checks are carried out regularly.

We found that midazolam was not being disposed of in an appropriate manner.

Recommendation

The practice should ensure that staff dispose of midazolam safely and appropriately.

Contract documentation was in place for the disposal of hazardous waste. We saw hazardous waste was stored securely. Gas cylinders and chemicals were

stored securely. A mercury spillage kit was available so that mercury spillages could be appropriately handled.

We considered the arrangements for the decontamination of instruments used at the practice and found these were best practice in most cases. We saw that appropriate procedures were in place to sterilise instruments. We saw that daily tests took place on equipment used for the decontamination of instruments such as the autoclave and these were recorded in line with WHTM 01-05 requirements.

There was a clear and detailed infection prevention and control policy in place but we saw that this did not include a 'written assessment of the improvements needed to progress towards meeting the requirements for best practice' (WHTM 01-05).

Recommendation

The practice should produce a written assessment of the improvements needed to progress towards meeting the requirements for best practice together with an implementation plan in accordance with WHTM 01-05.

We saw there were appropriate and designated hand washing sinks in all surgeries and the decontamination room to reduce the risk of cross infection.

We found that sterilised instruments were date stamped to show when they were sterilised and their expiry date and those checked were within date.

Staff were carrying out routine audits of infection control requirements and had recently implemented an electronic system in order to capture this more easily.

The practice used an extractor fan as their ventilation system within the decontamination room and we saw that this was positioned so that the airflow was from dirty to clean. We brought this to the immediate attention of the principle dentist who ceased the use of the fan with immediate effect and was making arrangements to change the airflow as soon as possible.

Recommendation

The practice should ensure a safe and appropriate ventilation system is in place in the decontamination room as soon as possible, in line with WHTM 01-05 requirements.

We looked at the clinical facilities of each surgery within the practice and these contained relevant equipment for the safety of patients and staff. We saw that the isolation switch for the x-ray was within the controlled zone. This meant that

if there was a cause for concern with x-ray equipment and staff needed to use the isolation switch, they would have to enter the controlled zone to access it.

Recommendation

The isolation switch should be repositioned outside of the controlled zone.

There was a gas supply at the premises and we saw that the practice kept gas safety records and appropriate inspections had been carried out.

We found that patient records were kept in locked cupboards behind the reception desk. This meant patient information was stored securely.

Management and Leadership

The practice was well run and staff told us they were very well supported in their roles.

The practice consisted of five dentists. The principle dentist had been at the practice since 2007. Most of the staff team had been working at the practice for many years.

The principle dentist took overall responsibility for managing the practice along with the practice manager and assistance from members of the team. The practice manager had recently taken on finance as part of their practice management role.

We found that some staff took on multiple roles in the running of the practice. For example, we spoke with one dental nurse who was also trained to help with reception duties. This meant that there were contingency plans in place in the event of staff absence to ensure the smooth running of the practice.

Staff were able to access relevant policies within the practice to check their understanding and ensure they were taking correct action. We saw that not all policies had a review date on them so we could not be assured these were reviewed and updated on an ongoing basis.

Recommendation

The practice should ensure all policies are reviewed and updated on a regular basis so that staff have access to information that is accurate and up to date.

We looked at a sample of staff training records. These confirmed staff had access to a range of training opportunities relevant to their role. The practice did not keep a 'continuing professional development' record of their dental professionals and told us individual staff took responsibility for monitoring their own CPD. We suggested that the practice could keep a central record to monitor progress and see more easily who may require support with CPD.

We read team meeting minutes and saw that relevant topics were discussed with contributions from team members. This meant meetings were used to communicate changes to practice and to encourage team communication.

We saw notes that confirmed staff had access to annual appraisals. Staff told us they used these meetings to discuss ongoing training requirements, performance issues and support in their roles. All staff also told us they felt very

comfortable approaching the principle dentist outside of formal meetings and that she was available and accessible in an informal way. Staff told us they felt very well supported in their roles.

Given the number of recommendations identified during this inspection, consideration should be given to ensuring that there are more effective and proactive arrangements in place at the practice to monitor compliance with relevant regulations and standards. Whilst no specific recommendation has been made in this regard, the expectation is that there will be evidence of a notable improvement in this respect at the time of the next inspection.

Quality of Environment

The practice premises provided a safe, accessible environment for patients to receive treatment.

The practice was situated in the city centre of Newport. There were no car parking facilities and there were restrictions on the roads outside the practice, making parking difficult for patients. There was a one hour waiting area and a disabled bay available for disabled patients to park on Devon Place. The practice had been in communication with the council about parking difficulties and had also implemented weekend appointments when there were less parking restrictions. There was a pay and display car park available on Faulkner road around a 10 minute walk away.

The practice consisted of four surgeries (all on the ground floor) and a reception, waiting area and disabled accessible toilet on the ground floor. The toilet was visibly clean and contained suitable hand washing equipment to prevent cross infection.

Our observations indicated the size of the waiting room was appropriate given the number of surgeries and patients attending. The area was clean, tidy, well maintained, well lit and ventilated. There was an area with toys where children could play. There was a television and radio in the waiting area to keep patients' entertained. Fire exits were clearly signposted.

There were steps leading up to the main entrance of the practice. Patients with mobility difficulties were able to access the premises by a back entrance on street level and there was a ramp available for ease of access. Although the corridors appeared narrow, staff assured us patients with wheelchairs had been able to access the premises.

6. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan in respect of patient experience, delivery of standards and leadership and management. The details of this can be seen within Appendix A of this report.

The improvement plan should clearly state when and how the findings identified at Devon Place Dental will be addressed, including timescales.

The improvement plan, once agreed, will be published on HIW's website and will be evaluated as part of the ongoing dental inspection process.

Appendix A

General Dental Practice: Improvement Plan

Practice: Devon Place Dental

Date of Inspection: 2 February 2015

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
Patient Experience				
Page 7	The practice should ensure both telephone lines provide patients with the same, consistent information, specifically about out of hours care.	Number 252238 will soon have an answerphone message with respect to out of hours care.	Jan Lear	1 month
Page 8	The practice should ensure complaints information is easily accessible, sufficiently detailed and clearly visible to patients.	Already ordered and displayed leaflets with respect to complaints. Done also on website.	Jan Lear	Achieved
Page 8	The practice should ensure that the separate arrangements and timescales for NHS and private patients are fully outlined in complaints information. Complaints	New complaints procedure written to include this plus details of access to CHC.	R Gill-Randall	Done

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
	information should also include information about how to access advocacy through the Community Health Council.			
Page 9	The practice should ensure the website complies with GDC 'Principles of Ethical Advertising' guidelines.	Already carried out. GDC details – on website.	R Gill-Randall	1 month
Delivery of Standards for Health Services in Wales				
Page 10	The practice should ensure all dental practitioners and dental healthcare staff update their knowledge and skills in resuscitation at least annually in line with Resuscitation Council guidelines.	Our only non compliant person has since booked up for this course.		Achieved
Page 10	The practice should ensure there is a formalised system in place to replace expired drugs to ensure checks are carried out regularly.	Each month the drugs in the fridge plus the emergency drugs in practice plus in the car are checked and signed off.	R Gill-Randall	Achieved
Page 10	The practice should ensure that staff dispose of midazolam safely and appropriately.	Cat litter with batch and expiry date in house for disposal.	R Gill-Randall	Achieved
Page 11	The practice should produce a written assessment of the improvements needed to progress towards meeting the requirements for best practice together with an	Written and forwarded to Inspection Manager via email just after the inspection.	R Gill-Randall	Achieved

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
	implementation plan in accordance with WHTM 01-05.			
Page 11	The practice should ensure a safe and appropriate ventilation system is in place in the decontamination room as soon as possible, in line with WHTM 01-05 requirements.	This will be in place via window fan over clean area plus the fan re-commissioned over dirty area i.e. n=2 fans for each area.	R Gill-Randall	1 month
Page 12	The isolation switch should be repositioned outside of the controlled zone.	This has been done and is in place in accordance with guidelines.	R Gill-Randall	Achieved
Management and Leadership				
Page 13	The practice should ensure all policies are reviewed and updated on a regular basis so that staff have access to information that is accurate and up to date.	This is also in place.	R Gill-Randall	Achieved
Quality of Environment				
	None			

Practice Representative:

Name (print): DR RACHAEL GILL-RANDALL

Title: Practice Owner and Principle Dental Surgeon

Date: 09/03/15