

**General Dental Practice  
Inspection (Announced)**  
Aneurin Bevan University  
Health Board, Abersychan  
Dental Surgery

16th March 2016

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## 1. Introduction

Healthcare Inspectorate Wales (HIW) is the independent inspectorate and regulator of all health care in Wales.

HIW's primary focus is on:

- Making a contribution to improving the safety and quality of healthcare services in Wales
- Improving citizens' experience of healthcare in Wales whether as a patient, service user, carer, relative or employee
- Strengthening the voice of patients and the public in the way health services are reviewed
- Ensuring that timely, useful, accessible and relevant information about the safety and quality of healthcare in Wales is made available to all.

HIW completed an inspection of Abersychan Dental Surgery at [10, Broad Street, Abersychan, Pontypool, Torfaen, NP4 7BQ on 16th March 2016.

HIW explored how [Abersychan Dental Surgery met the standards of care set out in the Health and Care Standards (April 2015) and other relevant legislation and guidance.

Dental inspections are announced and we consider and review the following areas:

- Quality of the Patient experience - We speak to patients (adults and children), their relatives, representatives and/or advocates to ensure that the patients' perspective is at the centre of our approach to how we inspect.
- Delivery of Safe and Effective Care - We consider the extent to which services provide high quality, safe and reliable care centred on the person.
- Quality of Management and leadership - We consider how services are managed and led and whether the culture is conducive to providing safe and effective care. We also consider how services review and monitor their own performance against relevant standards and guidance.

More details about our methodology can be found in section 6 of this report.

## 2. Context

[Abersychan Dental Surgery provides services to patients in the Pontypool area of Torfaen. The practice forms part of dental services provided within the area served by Aneurin Bevan University Health Board.

Abersychan Dental Surgery is a mixed practice providing both private and NHS dental services

The practice staff team includes; three dentists, two hygienists, three dental nurses, three receptionists and a practice manager.

A range of NHS and private dental services are provided.

### 3. Summary

Overall, we found evidence that Abersychan Dental Surgery had very good arrangements in place to protect staff and patients from preventable healthcare associated infections.

This is what we found the practice did well:

- Patients we spoke to were happy and confident with the service provided
- Staff we spoke to were happy in their roles and understood their responsibilities.
- Management arrangements were well organised
- Staff had attended relevant training and appraisal systems were good.
- Policies and procedures were up to date and well organised.
- Clinical facilities are well-equipped, visibly clean and tidy
- Decontamination was carried out effectively
- X-ray equipment was well maintained and used safely.

This is what we recommend the practice could improve:

- Some logbooks could contain more detailed information
- Recording of patient notes was good but there were still some areas for improvement.

## 4. Findings

### *Quality of the Patient Experience*

**We found evidence to demonstrate that the practice is committed to providing a positive experience for their patients. The feedback we gained through the HIW patient questionnaire was positive. The practice had a good system for regularly seeking and reviewing patient feedback as a way of assessing the quality of the service provided. All patients we spoke to on the day of the inspection indicated that the practice team had made them feel welcome and they were happy with the care they received.**

Prior to the inspection, we invited the practice to distribute HIW questionnaires to patients to obtain views on the dental services provided. Patient comments included:

*"First class treatment, first class staff."*

*"Always helpful, pleasant and willing to do their best at all times"*

*"Very friendly dentist who put me at ease, as I'm frightened of the dentist".*

#### Dignified care

We observed staff speaking to patients in a friendly, dignified and professional way. All patients told us that they were satisfied with the care and treatment they received and felt welcomed by staff.

A leaflet describing the practice was available for patients and the practice had an informative website. This meant that patients had access, in a variety of formats, to relevant information. Price lists for treatment were displayed in the waiting areas.

#### Timely care

The practice tries to ensure that care is provided in a timely way. The feedback from questionnaires showed that the majority of patients did not experience delay in being seen by the dentists. Those that had experienced delay said this had not been for long. We were told that there was a flexible appointment system in place that allowed patients to book appointments both in advance and on an emergency basis. Staff described the process for informing patients

should their dentist be running late or unexpectedly absent on the day of their appointment.

The majority of patients told us they knew how to access out of hours dental care. We saw a sign near the entrance of the practice with details of the emergency contact telephone number so that patients could access emergency dental care when the practice was closed. We confirmed that the answer-phone message contained suitable information.

### Staying healthy

We found evidence to indicate that patients are empowered and supported to take responsibility for their own health and wellbeing and that the practice recognises the need for health promotion to support the well-being of their patients. There was a variety of leaflets and posters promoting oral health and general well being. There was plenty of literature on caring for children's teeth. Questionnaires and conversations with patients also indicated that they felt they were getting sufficient information.

### Individual care

The practice had an up to date Equality and Diversity policy and in addition, the discussions we had with staff on the day of inspection indicated to us that the practice had recognised the diversity of its patient population and had considered its responsibilities under equality and human rights legislation.

Access to the practice is generally suitable for wheelchair users and patients with mobility difficulties. Wheelchair users can be seen in the ground floor surgery. There is no accessible patient toilet, but we were told that staff make patients aware of this. We also saw that patient information leaflets were available at the reception desk.

We saw evidence that the practice had a good system for seeking patient feedback through Denplan Excel. Patient questionnaires were conducted regularly and the results were analysed effectively.

The practice had a procedure in place for all patients to raise concerns (complaints), whether they were private or NHS patients. We found the procedure was compliant with both the arrangements for raising concerns about NHS treatment (known as 'Putting Things Right') and The Private Dentistry Wales 2008 Regulations.

We saw evidence that written complaints and verbal/informal complaints were recorded appropriately. The practice had complaints procedures displayed in



the waiting rooms for all patients both NHS and private, and leaflets were readily available.

## *Delivery of Safe and Effective Care*

**We found evidence to support the conclusion that patients are provided with safe and effective dental care. We were satisfied with the arrangements in place to protect patients and staff from preventable healthcare associated infections. We were satisfied that radiographic equipment was used safely, checked and maintained appropriately. We looked at patient records and found that overall they were sufficiently detailed.**

### Safe care

We found evidence to indicate the practice has taken steps to ensure the health, safety and welfare of staff and patients. We saw that the testing of portable appliances (PAT) had been undertaken to ensure the safe use of small electrical appliances. Fire extinguishers were placed strategically and had been serviced regularly. A safety inspection certificate was available for the compressor used at the practice.

The practice was quite well maintained, clean and tidy with no obvious hazards. Each of the clinical facilities within the practice was clean and furnished to facilitate effective cleaning. The building was well lit, appropriately heated and provided toilet and hand washing facilities. Cleaning checklists were available; we suggested these were extended to include more detail of areas cleaned and signatures of cleaning staff.

Contract documentation was in place for the disposal of non hazardous and hazardous waste. Clinical waste including extracted teeth with amalgam was stored and disposed of appropriately.

We were satisfied with the arrangements to protect staff and patients from preventable healthcare associated infections at this dental practice. This is because we saw the following evidence of effective infection prevention and control measures:

- Records of checking equipment had been maintained and audits of infection control requirements had been carried out. We suggested the practice use the recommended WHTM 01-05 audit.
- The equipment used for the cleaning and sterilisation of instruments was visibly in good condition. We saw certificates which showed the equipment had been tested to ensure it was working correctly.

- There was a large selection of instruments available and all were stored and dated appropriately so that staff knew they were safe to use for patient treatments.
- Personal protective equipment (PPE) such as disposable gloves, aprons and eye protection were available. There was a sink dedicated for hand washing.

The owners of the practice told us that plans to have a totally separate decontamination/sterilisation room were under development.

We saw adequate records relating to Hepatitis B immunisation status for all clinical staff working at the practice demonstrating that the practice was taking steps to protect patients and staff from infection.

### ***Improvement needed***

***We recommend that the practice use the recommended WHTM 01-05 audit.***

Resuscitation equipment and emergency drugs were available at the practice and were kept appropriately in accordance with the guidelines of the Resuscitation Council (UK). Logbooks for emergency drugs and equipment contained sufficient detail.

We saw records that indicated staff had received training on how to deal with medical emergencies and how to perform cardiopulmonary resuscitation (CPR). Staff interviewed were aware of their roles during a medical emergency. The staff had appropriate First Aid Training and there was a named first aider.

We found the practice had taken steps to promote and protect the welfare and safety of children and vulnerable adults. We saw a policy for the protection of children and one for the protection of vulnerable adults (POVA). All staff had received training for the protection of children and all had undertaken POVA training. Pre employment checks were in place for all employees and the three dentists had DBS checks in line with the regulations for private dentistry.

We were assured that the equipment and process for taking radiographs (x-rays) at this practice were safe. X-Rays were processed digitally. We saw documentation to indicate that x-ray machines had been regularly serviced and maintained to ensure they were safe for use. Working instructions and identification of controlled areas were displayed for staff and patient safety. In addition to this, evidence was seen to confirm that all staff involved in taking radiographs had completed training to meet standards for personnel who carry out these procedures. This is in accordance with the requirements of the

General Dental Council (GDC) and Ionising Radiation (Medical Exposure) Regulations 2000.

### Effective care

Patients benefit from a practice that seeks to continuously improve the service provided and monitors its progress. Clinical staff regularly attends locally organised peer review meetings. They also take part in good practice schemes run by the British Dental Association (BDA).

Annual quality assurance audit logs for X-Rays were seen. We were told that infection control audits were undertaken routinely.

### Patient records

We looked in detail at a small sample of patient records for all of the dentists at the practice and we found that record keeping was of a very good standard overall. Most of the dentists maintained very good patient notes, with treatment plans and consents in place. We recommend that more detail is added to patient records regarding the reasons for NICE recall and ensure that extra oral examinations are noted.

### ***Improvement needed***

***The practice should ensure more detail is added to patient records regarding the reasons for NICE recall and ensure that extra oral examinations are noted.***

## *Quality of Management and Leadership*

**We found that the practice had very clear lines of accountability and management. The principal dentists and the practice manager shared the management role. There were good lines of communication between staff members with appropriate delegation of tasks. Staff we spoke to were committed to providing high quality care to patients. Policies and procedures were regularly reviewed and well organised.**

The day to day management of the practice was the responsibility of the principal dentists and the practice manager. The practice had a dedicated staff team. The staff worked well together, had good internal communication and showed commitment to caring for patients. We saw a staff team who were happy, confident and competent in carrying out their roles.

We saw training records to show that staff were able to access training relevant to their role and for their continuing professional development (CPD).

Communication between staff at the practice was good. Staff told us that formal staff meetings took place every three months. In addition, everyone interviewed said they felt able to talk to the dentists and practice manager at anytime to discuss concerns and training needs. We saw evidence of learning through staff meetings where protocols had been discussed and improvements suggested. Formal appraisals were conducted with all of the staff annually and there was evidence of good induction training for new staff.

We confirmed that all relevant staff were registered with the General Dental Council. In accordance with the Private Dentistry (Wales) Regulations, all dentists providing private treatment were registered with HIW and their registration certificates were displayed at the practice. Appropriate indemnity insurance was seen.

We looked at the policies and procedures at the practice and saw evidence that they had been reviewed regularly and were clearly organised.

## 5. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan (Appendix A) to address the key findings from the inspection.

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

The action(s) taken by the practice in response to the issues identified within the improvement plan need to be specific, measureable, achievable, realistic and timed. Overall, the plan should be detailed enough to provide HIW with sufficient assurance concerning the matters therein.

Where actions within the practice improvement plan remain outstanding and/or in progress, the practice should provide HIW with updates to confirm when these have been addressed.

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

## 6. Methodology

The new Health and Care Standards (see figure 1) are at the core of HIW's approach to inspections of the NHS in Wales. The seven themes are intended to work together. Collectively they describe how a service provides high quality, safe and reliable care centred on the person. The standards are key to the judgements that we make about the quality, safety and effectiveness of services provided to patients.

**Figure 1: Health and Care Standards**



Any dentist working at the practice who is registered with HIW to provide private dentistry will also be subject to the provisions of the Private Dentistry (Wales) Regulations 2008<sup>1</sup> and the Private Dentistry (Wales) (Amendment) Regulations 2011<sup>2</sup>. Where appropriate we consider how the practice meets these regulations, as well as the Ionising Radiation Regulations 1999, the Ionising Radiation (Medical Exposure) Regulations 2000 and any other relevant

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<sup>1</sup> <http://www.legislation.gov.uk/wsi/2008/1976/contents/made>

<sup>2</sup> <http://www.legislation.gov.uk/wsi/2011/2686/contents/made>

professional standards and guidance such as the GDC Standards for the Dental Team.

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 (where applicable)
- 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.



## Appendix A

**General Dental Practice: Improvement Plan**

**Practice: Abersychan Dental Surgery**

**Date of Inspection: 16th March 2016**

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
<b>Quality of the Patient Experience</b>					
	No improvements identified				
<b>Delivery of Safe and Effective Care</b>					
9	We recommend that the practice use the recommended WHTM 01-05 audit	Health & Care standard 3.3	We have studied the audit, and agree it is a similar standard to our current one, will will use it at our next audit	Deb. Nash	October 2016
10	The practice should ensure more detail is added to patient records regarding the reasons for NICE recall and ensure that any extra oral	Health & Care standard 2.1, 3.5 GDC	This was actioned immediately by all clinicians	Andrew Jones	immediate

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
	examinations are noted.	standards 4.1			
Quality of Management and Leadership					
	No improvements identified				

**Practice Representative:**

**Name (print):** .....Andrew Jones.....

**Title:** .....Dentist.....

**Date:** .....27/04/16.....