

**General Dental Practice
Inspection (Announced)**
Abertawe Bro Morgannwg
University Health Board,
S. Marsh & B. Lees Dental
Practice

25 February 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 to S. Marsh & B. Lees dental practice at 36, Victoria Gardens, Neath, SA11 3BH on 25 February 2016.

HIW explored how S. Marsh & B. Lees dental practice 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

S. Marsh & B. Lees dental practice provides services to patients in the Neath area. The practice forms part of dental services provided within the area served by Abertawe Bro Morgannwg University Health Board.

S. Marsh & B. Lees dental practice is a mixed practice providing both private and NHS dental services

The practice staff team includes three dentists, one dental hygienist, three qualified dental nurses, a practice manager (who is also a qualified dental nurse) and one receptionist. At the time of our inspection a trainee dental nurse was also working at the practice.

3. Summary

Overall, we found evidence that S. Marsh & B. Lees dental practice provides a good standard of dental care. Patients who completed HIW questionnaires stated that they were very satisfied with the service and care provided by the staff.

This is what we found the practice did well.

- Patients we spoke to were happy with the service provided.
- Staff we spoke to were happy in their roles and understood their responsibilities.
- The practice encouraged continued professional development (CPD) of their staff.
- There were arrangements in place for the safe use of X-rays.
- There were up to date policies and procedures to guide practice.
- All staff had up to date child and adult protection training.

This is what we recommend the practice could improve:

- Make arrangements to make sure the complaints procedure is accessible to as many patients as possible.
- The storage of dental instruments to reduce cross contamination.
- The checking of emergency drugs to ensure they are safe to use.
- The recording within patients' dental records.

4. Findings

Quality of the Patient Experience

We found evidence that this practice was committed to providing a positive experience for their patients. Comments within HIW patient questionnaires returned to us referred to friendly, caring and professional attitudes of all the practice staff. The care was given in a timely and dignified manner.

The practice had designed a concise and easy to read leaflet for patients, outlining the services provided and other relevant information patients may need. Although we saw notices displayed the complaints processes to be followed for private and NHS patients, information from returned questionnaires showed that more than half the patients did not know how to make a complaint. We have recommended the practice take steps to rectify this.

Prior to the inspection, we invited the practice to distribute HIW questionnaires to patients to obtain their views on the dental services provided. In total, 21 patients completed a HIW questionnaire. Patients who responded had been attending the practice for between ten years and fifty years. Patient comments included:

‘The dental service received over 22 years, has always been excellent.’

‘All the staff are friendly and professional and really help to make visiting the dentist as pleasant an experience as possible.’

‘An excellent service since 1974.’

‘The surgery just keeps getting better. Fantastic service by a fantastic team.’

Dignified care

We observed staff treating patients in a friendly yet professional manner. They had a pleasant rapport with patients in both face to face conversations and on the telephone. Patients told us that, if they wanted to talk in private, a room was made available. All stated that they were satisfied with the service they received. The patients we spoke to told us that they had always been treated in

a respectful and dignified manner, they had been made to feel welcome and that staff had taken time to explain things.

Timely care

Patients told us that they rarely experienced delays in being seen. Responses within questionnaires showed that the majority of patients knew how to contact out of hours dental services for urgent treatment. We saw a notice displaying the out of hours contact telephone number on the front door of the premises. The practice also had a supply of leaflets entitled 'A Guide to our Dental Surgery' which offered helpful advice for both new and existing patients in relation to what the practice was able to offer.

Staying healthy

We saw evidence from HIW questionnaires that patients had received enough information about their treatment and about good dental hygiene. We noticed a plentiful supply of health information leaflets. Several notice boards had information about good dental health and how to maintain this. Health promotion information assists in supporting patients to take responsibility for their own health and well being.

Individual care

Responses from HIW patient questionnaires showed that all of the patients felt they had been given enough advice about their individual treatment, they were very happy with the service they received and they had always been made to feel welcome. Patients told us that the staff had taken time to listen to them and offer advice about any concerns or questions they may have. Patients said that they enjoyed the friendly atmosphere at the practice.

Wheelchair users were able to access the practice via a concrete ramp at the rear of the practice. The practice had two ground floor surgeries which could be accessed by people who use wheelchairs. Whenever possible, for patients with mobility difficulties, the practice reserved a parking space and patients found this to be very helpful.

We saw a complaints policy displayed in the reception area. The procedure for making a complaint was also stated in the 'Practice Guide' leaflet. However, despite these measures, we identified from the questionnaires that more than half the patients stated they did not know how to make a complaint.

Improvement needed.

The practice should consider ways in which patients can be made more aware of the procedure for making a complaint.

Delivery of Safe and Effective Care

We found the practice, overall, to be focussed on providing safe care for patients. This was evidenced in appropriate policies and procedures for taking of X-rays, use of personal protective clothing and safe removal of all waste products.

All staff had undertaken child and adult protection training and all were up to date with cardio-pulmonary resuscitation (CPR) training.

There were however issues with poorly fitting drawers and flooring in two of the surgeries, posing a potential infection control risk. We also saw two drugs that were out of date. There were also issues relating to the storage, packaging and dating of instruments.

Safe care

We found that the practice took steps to help ensure the health, safety and well-being of staff and patients. We saw that testing of portable appliance testing (PAT) had been undertaken to ensure the safe use of these electrical appliances at the practice. Contracts were in place for the safe removal of both hazardous (clinical) and non-hazardous (household) waste products. We looked at the accident book kept by the practice and saw that no entries were recorded. We asked staff about this and they told us that they made every effort to ensure patients safety and that accounted for nil entries. We noted that a risk assessment had been conducted and policies were in place for manual handling and for use of personal protective clothing (such as aprons, disposable and heavy duty gloves and eye protection).

Overall, the practice was fairly well maintained and the dental surgery on the upper floor had been renovated to a very high standard. The staff explained that similar improvements were planned for the remaining two, ground floor surgeries, which were in need of modernisation and redecoration. Floors in both of these surgeries needed to be sealed. In surgery 2, gaps behind cabinets were difficult to access for cleaning purposes. In surgery 3, poorly fitting top drawers posed an infection risk as access for cleaning these areas was difficult.

Improvement needed.

Floors to be sealed and gaps in drawers and behind cabinets to be repaired.

We noted that the upstairs de-contamination room did not have a hand wash sink. Staff used the hand wash sink in the next door surgery. A hand wash sink

is recommended with the Welsh Health Technical Memorandum (WHTM) 01-05¹ guidance and this should be addressed as soon as practically possible.

Improvement needed:

Installation of a hand wash sink in the upstairs decontamination room.

We saw that dental instruments were stored loosely in drawers thereby increasing the risk of cross contamination. These needed to be packaged, sealed and dated as set out within WHTM 01-05. In accordance with HIW's process, we requested an immediate improvement plan from the practice on the action taken to ensure dental instruments are stored correctly.

Improvement Needed (Requiring Immediate Improvement Plan)

The practice needs to review how it stores sterilised instruments as we found that they were not stored in sealed and dated packaging.

The practice provided an immediate improvement plan and we are assured that suitable arrangements have been put in place to address the improvement needed.

We found a lack of facilities for safe disposal of sanitary items in the toilets at the practice.

Improvement needed:

The practice to provide appropriate sanitary disposal in toilets.

We saw that the practice had a policy in place to respond to a patient emergency (collapse). All clinical staff had received training in cardio-pulmonary resuscitation (CPR) and the practice had a named first aider. We saw that drugs and prescription pads were stored in a locked and secure place and that all emergency drugs were held in accordance with local requirements. However, we saw that two drugs were 'out of date'. There was no system in place for checking the 'use by' dates of drugs. We could not, therefore, be assured that this situation would not arise again. Good medicines management can help to reduce the likelihood of medicine errors and hence patient harm. In accordance with HIW's process, we requested an immediate improvement plan

¹ [The Welsh Health Technical Memorandum \(WHTM 01-05\) \(Revision 1\)](#) document provides professionals with guidance on decontamination in primary care practices and community dental practices.

from the practice on the action taken to ensure medicines are checked and replaced as necessary.

Improvement Needed (Requiring Immediate Improvement Plan)

A safe system for ensuring staff are alerted to the expiry date of drugs to be implemented.

The practice provided an immediate improvement plan and we are assured that suitable arrangements have been put in place to address the improvement needed.

From seeing policies and contracts relating to the maintenance and safe use of radiographic equipment, we were satisfied that the practice had a safe system in place for the use of X-rays. We noted that all three dentists, the dental hygienist and two of the dental nurses assisting with radiological treatments were trained in accordance with the Ionising Radiation (Medical Exposure) Regulations 2000.

We found the practice had taken steps to promote and protect the welfare and safety of children and adults who may be vulnerable or at risk. There were safeguarding policies for the protection of children and vulnerable adults in place and we saw evidence that all staff had received training in this regard.

Effective care

We found the practice sought to continuously improve the service provided. The practice had engaged in some relevant audits, including infection control, risk assessment in the workplace, Control of Substances Hazardous to Health (COSHH) and the records maintained of patients' medical and social histories. We were told that both dentists audited each other's work. However, given our findings around infection control and records, the practice should review its system of audit to ensure areas for improvement are suitably identified.

Improvement needed

The practice should assure itself that the system for audit is sufficiently robust to identify areas for improvement.

We found that the practice staff studied on-line courses as a means of continuing their professional development and we commended them for this.

The staff told us that the long standing working relationships amongst the staff enabled discussions to take place informally over lunch periods to discuss any issues that may arise or any suggestions for improvements in practice. We discussed with staff the advantages of having regular staff meetings and the

benefits of recording minutes of issues discussed. This suggestion was received in a positive manner and staff said they were confident that formalising meetings would be achievable.

The practice manager had been enrolled on a practice management course to develop management skills. We saw that in the last year, many of the practice's policies and procedures had been revised to take account of changing guidance and legislation. This we believed was an effective means for promoting best practice for the benefit of both patients and staff

We looked in detail at a sample of five patient records for each dentist. Overall, health care advice and treatment was recorded. There were, however, some omissions in patients' notes that needed to be included. These concerned the updating of medical histories, the need to record findings from extra-oral examinations, recording smoking cessation advice offered, oral cancer risks and, for children, the need to record when a fluoride varnish was applied to protect teeth from decay.

Improvement needed:

The dentists working at the practice must make suitable arrangements to ensure patient dental records completed by them are maintained in accordance with professional standards for record keeping.

Quality of Management and Leadership

We found evidence of effective management and leadership at this practice. Staff were very happy in their roles and had been employed at the practice for many years. The change of role for one of the experienced dental nurses to that of practice manager was felt to be very advantageous to the day to day running of the practice.

The practice had been located in the same building in Victoria Gardens for more than forty years. Whilst limited by its layout and structure, efforts had been made wherever possible to provide comfortable, safe and pleasant facilities.

The day to day management of the practice was the responsibility of an experienced dental nurse who had taken up the position of practice manager. We noted the positive steps being taken by the manager to progress staff development, such as each dental nurse having an individual continuing professional development (CPD) file. The availability of 'in house' courses and computerised learning packages were a popular means of staff maintaining their professional development. The practice manager told us she felt well supported by all the practice staff.

When we asked to see specific policies, we noted a structured and orderly presentation of these. Some of these required further development and we were satisfied that arrangements were in place for this to be done. We saw documentation relating to induction programmes for new staff and the means by which they were made aware of practice policies and procedures.

We confirmed that relevant staff were registered with the General Dental Council (GDC) and had indemnity insurance in place. In accordance with the private dentistry regulations, all dentists providing private treatment were registered with HIW. Their registration certificates were available within the practice. We saw that information was available confirming that all clinical staff had been immunised against Hepatitis B.

We found the practice to have good leadership and clear lines of accountability. Since all of the staff had worked together for many years there was a good rapport amongst them. They were confident in raising any issues or concerns directly with the senior dentist and/or amongst themselves. Evidence of the good rapport amongst the staff was also stated in conversations we had with patients and we commended the staff on their professional yet friendly manner.

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 S. Marsh & B. Lees 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 2008² and the Private Dentistry (Wales) (Amendment) Regulations 2011³. 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

² <http://www.legislation.gov.uk/wsi/2008/1976/contents/made>

³ <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: S. Marsh & B. Lees Dental Practice.

Date of Inspection: 25 February 2016.

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
Quality of the Patient Experience					
7	The practice should consider ways in which patients can be made more aware of the procedure for making a complaint.	Health & Care Standards Standard 6.3	Our complaints procedure has been discussed at a recent practice meeting. All staff understand the complaints procedure and patient information regarding complaints is now in a prominent position on reception.	S Marsh	Completed
Delivery of Safe and Effective Care					
8	Floors to be sealed and gaps in drawers and behind cabinets to be repaired. [WHTM 01-05 Paragraphs 6.46 – 6.49]	Private Dentistry (Wales) Regulations 2008	Silicone sealant has been used to seal gaps between skirting boards and floor surfaces. We have received a professional quote for the cabinetry work and will be completed ASAP	S Marsh	1 Month

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
		Regulation 14(6) Health & Care Standards Standard 2.4			
9	Installation of a hand wash sink in the upstairs decontamination room. [WHTM 01-05 Paragraph 5.7]	Private Dentistry (Wales) Regulations 2008 Regulation 14(6) Health & Care Standards Standard 2.4	The upstairs decontamination room was professionally designed by a local company- Cotrells. I have approached the designer and asked for an explanation as to why the design did not fulfil WHTM 01 05 requirements. I am awaiting a response. In the meantime we are using the hand wash sink in the adjoining room.	S Marsh	Ongoing
9	Improvement Needed (Requiring Immediate Improvement Plan)	Private Dentistry (Wales)	Staff re-training has been completed with regard to reminding all members of staff about our policy	S Marsh	Completed

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
	<p>The practice needs to review how it stores sterilised instruments as we found that they were not stored in sealed and dated packaging.</p> <p>[WHTM 01-05 Paragraphs 2.4(j) and 4.26]</p>	<p>Regulations 2008</p> <p>Regulation 14(4)</p> <p>Health & Care Standards</p> <p>Standard 2.4</p>	<p>for decontamination procedures, bagging and dating of all instruments to ensure we are in line with WHTM 01-05. We have a cross infection course for all staff members in May.</p>		
9	<p>The practice to provide appropriate sanitary disposal in toilets.</p> <p>[Workplace (Health, Safety and Welfare) Regulations 1992]</p>	<p>Health & Care Standards</p> <p>Standard 2.4</p>	<p>We are arranging for a sanitary disposal bin to be installed in the downstairs toilet.</p>	S Marsh	1 Month
10	<p>Improvement Needed (Requiring Immediate Improvement Plan)</p> <p>A safe system for ensuring staff are alerted to the expiry date of drugs to be implemented.</p> <p>[General Dental Council Standards for the Dental Team, Standard 1.5.3]</p>	<p>Health & Care Standards</p> <p>Standard 2.6</p>	<p>Our emergency drugs have all been checked and updated accordingly. Procedures have been put in place to ensure that out of date emergency drugs doesn't occur again.</p>	S Marsh	Completed

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
10	The practice should assure itself that the system for audit is sufficiently robust to identify areas for improvement.	Private Dentistry (Wales) Regulations 2008 Regulation 14(2) Health & Care Standards Standard 3.3	We have approached the local deanery are in the process of completing a cross infection audit. Once completed we plan to carry out an antibiotic prescribing audit.	S Marsh	4 Months Ongoing
11	The dentists working at the practice must make suitable arrangements to ensure patient dental records completed by them are maintained in accordance with professional standards for record keeping. [General Dental Council Standards for the Dental Team, Standard 4]	Health & Care Standards Standard 3.5	All clinicians in the practice have reviewed the GDC guidelines and have used the MFGDP Record Keeping guide to make appropriate changes. We have looked particularly at information regarding patients who smoke and the recording of cessation advice and the risks of smoking to oral health. We have started to scan letters/referrals so they can be	S Marsh	Completed

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
			<p>attached to the patient's file.</p> <p>We have reviewed our note keeping with regard to achieving consent from patients and recording it appropriately in the notes.</p>		
Quality of Management and Leadership					
-	No improvement plan required.				

Practice Representative:

Name (print):STEVEN MARSH.....

Title:S Marsh & B Lees.....

Date:16/06/2016.....