

General Dental Practice Inspection (Announced) Smiles Dental Centre

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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 Smiles Dental Centre at 29 High Street, Merthyr Tydfil, CF47 8DP on 9 August 2016.

HIW explored how Smiles Dental Centre 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

Smiles Dental Centre provides services to patients in the Merthyr Tydfil area of Rhondda Cynon Taf. The practice forms part of dental services provided within the area served by Cwm Taf health board.

Smiles Dental Centre is a mixed practice providing both private and NHS dental services.

The practice staff team includes one dentist, one locum dentist, one therapist, four dental nurses, reception and a practice manager. At the time of our visit there were two dentist vacancies.

Smiles Dental Centre is owned by Integrated Dental Holdings (IDH), who also own a significant number of other dental practices across the United Kingdom. All IDH owned practices are currently being re-branded as 'My Dentist'.

3. Summary

Overall, we found evidence that Smiles Dental Centre provides patients with safe and effective dental care and is well regarded by its patients.

This is what we found the practice did well:

- Patients stated they were happy with the service provided
- Staff we spoke to were happy in their roles, understood their responsibilities
- Clinical facilities are well-equipped, visibly clean and tidy
- There are arrangements in place for the safe use of x-rays
- Dental instruments are cleaned and sterilised appropriately

This is what we recommend the practice could improve:

- Regular and on-going maintenance of fire equipment
- Arrangements for peer review audits
- A formal system of annual appraisals for all dentists

4. Findings

Quality of the Patient Experience

We found evidence that the practice is committed to providing a positive experience for their patients. The feedback gained through our patient questionnaires was positive. The practice had a system for regularly seeking patient feedback as a way of assessing the quality of the service provided. We advised the practice display further health promotion information and consider how public facilities could be made more accessible for wheelchair users.

Prior to the inspection we asked the practice to distribute HIW questionnaires to patients, to obtain their views on the services provided. Nineteen were completed and returned. The majority of patients indicated that they were satisfied with the services received at the practice. Patient comments included:

“Very friendly helpful practice. Only wish all other dentists were more helpful as this one.”

“I’ve never experienced any problems at the practice and I’ve always received good treatment.”

“Staff are very informative, very friendly and make you feel at ease.”

“I have had a lot of treatment here and have always been happy with the result.”

Dignified care

We found the staff to be professional and friendly, and we overheard them being polite and courteous to patients via telephone calls. Feedback from the patients who completed the questionnaires was positive. The majority of patients told us that they were satisfied with the care and treatment they received at the practice and felt welcomed by staff. All the patients who completed a HIW questionnaire told us they had been given enough information about their dental treatment.

Timely care

We found that the practice made efforts to ensure patients were seen in a timely manner. The majority of patients who completed the HIW questionnaires told us they did not experience delay in being seen by the dentists. Staff told us

that if a dentist was running late they would make sure they kept patients informed and if required, alternative arrangements would be offered.

An emergency contact telephone number for patients' use was displayed adjacent to the entrance of the practice. The emergency number was also provided on the practice's answer phone message, so that patients could access emergency dental care when the practice is closed. The majority of patients told us they knew how to access out of hours dental care.

Staying healthy

All patients who completed the questionnaires told us they received enough information about their treatment.

We saw that the practice had a way of seeking patient feedback, with questionnaires situated in the waiting area. We saw a sample of completed feedback forms, which provided positive comments on the service. Staff told us that questionnaires were reviewed on a regular basis and that any suggestions/comments were discussed and considered at team meetings.

Some health promotion information was available in the waiting area. A range of patient information leaflets regarding different forms of treatments and looking after children's teeth were recognised as good practice. One poster displayed information about mouth cancer and some oral health leaflets were displayed. The practice should also consider how they could make information accessible to a wider range of patients, such as by providing information in other formats and languages, including Welsh. The need for this could be assessed through gaining patient feedback.

Individual care

The practice had a complaints policy and procedure in place. However the procedure for private dental complaints needs to be updated to reflect the timescales as listed in the Private Dentistry (Wales) Regulations 2008. A complaints poster was displayed in the waiting area and staff told us that all complaints, including concerns are logged onto an electronic system so that they can be dealt with and any emerging themes can be addressed.

Improvement needed

The timescales for responding to private dental complaints needs to be updated to reflect the timescales listed in the Private Dentistry (Wales) Regulations 2008.

The majority of patients who completed HIW questionnaires told us that they knew how to make a complaint about the dental services they receive.

The practice layout was adaptable for people with mobility difficulties, with ramps used to provide access from the outside into the waiting area/reception and to access two of the three surgeries. The public toilet was unsuitable for wheelchair users and we advised the practice to consider how facilities can be made accessible by everyone.

The reception/waiting area was open plan. Staff told us that private conversations would take place in a room to ensure privacy, dignity and confidentiality is maintained. Reception staff told us that they ask for information from patients as opposed to stating personal information when using the telephone to ensure privacy and confidentiality is preserved.

Delivery of Safe and Effective Care

Overall, we found evidence 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 x-ray equipment was used appropriately and safely.

We identified some environmental improvements that the practice were aware of and had plans to fix these. In addition, we recommended that the practice formalise arrangements for regular peer review audits.

Safe care

Clinical facilities

We found the practice had taken steps to help ensure the health, safety and welfare of staff and patients. We saw that the testing of portable appliances (PAT) had been undertaken to help ensure the safe use of small electrical appliances within the practice.

The practice was visibly well maintained and fire extinguishers were placed strategically. The maintenance labels on the fire extinguishers were dated 2014. The practice was asked to address this issue urgently and at the time of our visit had made arrangements for this to be completed.

Improvement needed

The practice must ensure that fire equipment is maintained appropriately and that on-going programme of maintenance is in place.

The practice had arrangements in place for the disposal of non hazardous and hazardous waste. During our visit we identified that one lock on one of the bins was not working. The practice took immediate action and the lock was fixed.

We found that all surgeries were clean, tidy and well organised. The flooring in one of the surgeries needs replacing due to a new dental chair being installed. The practice had plans in place for this to be completed before the surgery was used by patients. We noticed that the upholstery on one of the chairs used by dental staff in one of the surgeries had ripped, but we were told that replacement chairs had already been ordered.

Infection control

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 evidence that there were infection prevention and control measures in place based on the Welsh Health Technical Memorandum 01-05¹ (WHTM 01-05) guidelines. Examples included the following:

- A dedicated room for the cleaning and sterilisation of dental instruments
- Availability and use of personal protective equipment (PPE) such as disposable gloves, aprons and eye protection
- Dedicated hand washing sink
- The equipment used for the cleaning and sterilisation of instruments was visibly in good condition
- Logbooks for checking sterilisation equipment had been maintained, including daily testing. Records for each sterilisation cycle were kept electronically and backed-up
- Instruments were stored appropriately and dated.

We saw evidence that infection control audits had been completed, as recommended by the Wales specific WHTM 01-05 guidelines, but we advised the practice to ensure that an action plan was created to address any areas highlighted by the audit.

Emergency drugs and resuscitation equipment

The practice had appropriate procedures in place to deal with (patient) emergencies; resuscitation equipment being available for use. We saw records to show that staff had received training on how to deal with medical emergencies and how to perform cardiopulmonary resuscitation (CPR).

Emergency drugs kept at the practice were seen to be stored appropriately for ease of access in an emergency situation. There were suitable arrangements in place to ensure that expired drugs were promptly replaced. The practice had named persons as their appointed first aiders.

¹ <http://www.wales.nhs.uk/sites3/docopen.cfm?orgid=254&id=232444>

Safeguarding

We found the practice had taken steps to promote and protect the welfare and safety of children and adults who become vulnerable or at risk. There were safeguarding policies for the protection of children and vulnerable adults. All clinical staff had completed training in the protection of children and vulnerable adults.

We were told there were arrangements in place for staff to raise any concerns. The practice told us that pre-employment checks of any new members of staff are carried out before they join the practice, including Disclosure and Barring Service (DBS) clearance.

Radiographic equipment

The practice had digital x-ray equipment and the arrangements in place for the use of x-ray equipment were in-keeping with existing standards and regulations.

Staff involved in taking radiographs had completed the required training in accordance with the requirements of the General Dental Council² and Ionising Radiation (Medical Exposure) Regulations (IR(ME)R) 2000. On the day of our visit there was one certificate for one dentist unavailable. The practice did send a copy of the certificate to HIW the next day, however a copy of the certificate should have been available on file. There are plans to recruit new staff to the practice and we reminded the practice manager/compliance team to ensure that any new dentists have received appropriate training in IR(ME)R before taking x-rays and copies of certificates are obtained, including for any locum dentists and temporary staff.

Improvement needed

In accordance with IR(ME)R Regulations, anyone taking x-rays must have up to date training and records of this training must be maintained, including for any locum dentists and temporary staff.

We observed that the radiation protection file was completed as required. On examination of the patient's records we found that there was sufficient information recorded to justify why certain dental x-ray views had been taken. The practice had a suitable quality assurance system in place to ensure that the image quality of patient x-rays were graded and recorded. This meant that the

² General Dental Council - <http://www.gdc-uk.org/Pages/default.aspx>

dentist was able to ensure that good, clear x-rays supported decisions about patient care and treatment.

Effective care

We looked in detail at a sample of ten patient records at the practice. Overall, we found that the records were appropriate and sufficiently detailed with information about each patient's treatment.

We found evidence that patients were provided with sufficient information about their treatment in order that they could make an informed decision about their care.

Patients benefit from a practice that seeks to continuously improve the service provided. A new programme of compliance tools has been rolled out to all IDH practices, which includes a number of audits that all practices need to complete. The new system will allow the compliance team to monitor all of their practices performances and compliance information.

We found that some audits were conducted at the practice including infection control audits. A previous audit was completed in February 2016 but was in an older format which was less detailed. A Wales Deanery audit had been printed from the website and completed in the last week. This audit provided more detail, however it was not dated. All future audits must be dated to keep a record of when they were completed. We also advise the practice to sign up for the full deanery audit to maintain good practice.

We were told that the dentists had access to an area manager to provide any clinical support as required and to conduct one-to-one meetings and personal development plans (PDP).

We were told there were no formal arrangements for staff to conduct regular peer review audits together. We advised the practice that learning from peer review and audits helps to ensure the quality of care provided.

Improvement needed

The practice should formalise quality assurance arrangements, including regular peer review audits, as a way of increasing learning, share best practice and helping to ensure the quality of the care provided.

Quality of Management and Leadership

We found evidence of effective management and leadership at this practice. Staff we spoke to were happy in their roles, understood their responsibilities and felt supported. A range of relevant policies and procedures were in place.

The practice had been acquired by Integrated Dental Holdings (IDH) in April 2015 and we were told of the improvements that had been made to the environment/facilities and also to the management arrangements. The day to day management of the practice is the responsibility of the practice manager. At the time of our visit there were plans for a new practice manager to take over from the previous manager and we recommend that this report is shared with them.

We saw a staff team at work who seemed happy and competent in carrying out their roles. We found there were systems in place to ensure any new staff received an induction and that they are made aware of policies and procedures.

We saw evidence that staff had completed relevant training to their role and for their continuing professional development (CPD). We were told that staff (nursing and reception) received annual appraisals. There was no formal appraisal system in place for dentists despite dentists receiving one-to-one meetings. We recommend that an annual appraisal system be introduced for all dentists.

Improvement needed

An annual appraisal system for all dentists needs to be introduced.

We confirmed that all relevant staff was registered with the General Dental Council. In accordance with the private dentistry regulations, all dentists providing private treatment were registered with HIW and their registration certificates were available within the practice.

We saw records relating to hepatitis B immunisation status for all clinical staff working at the practice. However, not all the records included immunity status. During the visit we discussed the importance of ensuring staff are sufficiently protected against hepatitis B and recommended that this is followed up.

Improvement needed

The practice needs to assure themselves that the immunity status of all their staff is sufficient, specifically against hepatitis B.

We looked at the policies and procedures in place and found there were arrangements for regular review. The practice's policies are available to staff electronically and in hard-copy format and are updated centrally by the management team. We were assured that any changes to policies were communicated to staff.

We were told that staff meetings were held monthly and that they were recorded. Some records we reviewed were unclear about the content of discussions and it was recommended that meetings are recorded clearly so they can be shared with any absent members of staff.

Improvement needed

The practice needs to ensure that the notes of staff meetings capture all the discussions and actions clearly.

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 Smiles Dental Centre 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 2008³ and the Private Dentistry (Wales) (Amendment) Regulations 2011⁴. 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

³ <http://www.legislation.gov.uk/wsi/2008/1976/contents/made>

⁴ <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: Dental Smile Centre

Date of Inspection: 9 August 2016

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
Quality of the Patient Experience					
6	The timescales for responding to private dental complaints needs to be updated to reflect the timescales listed in the Private Dentistry (Wales) Regulations 2008.	Regulation 16 (3) & (4)	The Poster had an error in the time scale needed for Private Dentistry. This was amended the following day and has been reprinted and displayed with the correct timescale.	Head Office/ Regulatory Officer	Completed 10.8.2016
Delivery of Safe and Effective Care					
8	The practice must ensure that fire equipment is maintained appropriately and that on-going programme of maintenance is in place.	Standard 2.1	The Equipment has now been tested and added to a contract to ensure this is undertaken annually. The Practice Manager also has a new computer programme that will remind a month prior to the date required that this needs servicing.	Practice Manager/ Support Cente - Facilities	Completed
10	In accordance with IR(ME)R Regulations, anyone taking x-rays must have up to date training and records of this training must be	Regulation 11 (1) (2) (4) & (5)	The Locum was able to produce his up-to-date certificate on the 10.8.16 - day following inspection. All Locum and		

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
	maintained, including for any locum dentists and temporary staff.	The Ionising Radiation (Medical Exposures) Regulations 2000	Temporary staff have to now provide a folder of all up to date evidence of mandatory training before commencing work. Resposnsible – Practice Manager & Regulatory Officer. Time scale - September 2016		
11	The practice should formalise quality assurance arrangements, including regular peer review audits, as a way of increasing learning, share best practice and helping to ensure the quality of the care provided.	Standard 3.1	Peer Review Meetings will start once the new Dentists have been put in place and will be done monthly with their mentor.	Practice Manager	October 2016
Quality of Management and Leadership					
12	An annual appraisal system for all dentists needs to be introduced	Standard 7.1 General Dental Council	All Dentists will be visited by the area clinical support manager to carry these out along with Personnel Development plans	Practice Manager/ Clinical Support Manager	October 2016

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
		Standards 6.6			
12	The practice needs to assure themselves that the immunity status of all their staff is sufficient, specifically against Hepatitis B	Standard 1.1 General Dental Council Standards 9.2	The practice is now aware of local occupational health to support and carry out any necessary immunisations, boosters and blood tests. This is also reflected in the policy available to staff.	Practice Manager	October 2016
13	The practice needs to ensure that the notes of staff meetings capture all the discussions and actions clearly.	Standard 7.1 General Dental Council Standards 6.6	We have discussed to the importance of more detail in practice meeting notes and the importance of reflecting on lessons learnt and any actions taken in improving the service. The practice will also reflect on the previous meeting notes moving forward to ensure all actions have been covered.	Practice Manager	October 2016

Practice Representative:

Name (print):Lisa O’Leary.....

Title:Regulatory Officer.....

Date: ..26.08.2016.....