

**General Dental Practice
Inspection (Announced)**
Betsi Cadwaladr University
Health Board,
Valley Dental Care, Valley

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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 Valley Dental Care at 2 Boston Terrace, Valley, Anglesey, LL65 3DU on 22 November 2016.

HIW explored how Valley Dental Care, Valley 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

Valley Dental Care, Valley has provided services to patients in Anglesey since they took over in 2009. The practice forms part of the dental services provided within the area served by Betsi Cadwaladr University Health Board.

Valley Dental Care, Valley is a mixed practice providing both private and NHS dental services.

The practice staff team includes two dentists, one therapist, one hygienist, four dental nurses and two receptionists.

3. Summary

Overall, we found evidence that Valley Dental Care, Valley provides patients with high quality, safe and effective dental care and is well regarded by its patients.

This is what we found the practice did well:

- We found evidence that this is a very well run service with effective systems to support overall practice management and leadership.
- The staff team appeared happy in their roles and were competent in carrying out their responsibilities.
- A range of relevant policies and procedures were in place.
- There were excellent infection control and decontamination procedures.
- Clinical facilities were well-equipped, visibly clean and tidy.
- Appropriate arrangements were in place for the safe use of x-rays.

This is what we recommend the practice could improve:

- Increase the detail recorded within patients records.
- Introduce a central log to record patients' informal concerns.
- All clinicians to use "Safer Sharps" to reduce the risk of needle stick injuries.
- The name and qualifications of all dental practitioners should be displayed.

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 from the patient questionnaires was positive and confirmed that patients were very happy with the service they receive.

Prior to the inspection, we invited the practice to distribute HIW questionnaires to patients to obtain views on the dental services provided. Twenty were completed and returned to us. Patient comments included:

'Staff are very approachable and knowledgeable, I wouldn't go anywhere else'

'Good with children'

'Very friendly staff and excellent dentist'

'Staff very helpful and explaining what is happening with my treatment. If anything wrong, the staff will phone to make an appointment'

Dignified care

We observed the warm, friendly and professional approach adopted by all staff at the practice towards patients. Of the twenty questionnaires completed, nineteen patients confirmed they were satisfied with the care and treatment they had received (one response did not provide any information).

The practice has arrangements to protect patients' privacy, including areas for patients to have private conversations with staff and when dealing with patients' telephone messages.

Timely care

The practice tries to ensure that dental care is provided in a timely way and of the completed questionnaires only two patients indicated that they had ever experienced any minor delays, and that these had not been an issue.

Seven patients told us that they did not know how to access out of hours care. There was a sign on the outside entrance of the premises giving the emergency contact details and this was also provided on the practice's answer phone. Contact details are also provided within the patient information leaflet. We

suggested to the practice that they consider other ways of ensuring all patients are made aware of the out of hours contact details in case of an emergency.

Staying healthy

All patients who completed our questionnaires stated that they had received enough information about their treatment. A television screen in the waiting area showed information to patients about the practice and dental health. Health promotion material leaflets were also given to patients by the dentists during their appointment. A television screen in each surgery enabled the dentist to show patients a video or pictograms of oral health treatment ensuring patients were provided with enough information about their treatment. Price lists were also clearly on display at the reception desk / waiting area.

Over 80% of patients told us that their language needs were met and we observed reception staff communicating with patients bilingually.

Individual care

Responses from patients' questionnaires showed us that all of the patients felt they were given enough advice about their individual treatment and were very happy with the service they received and were always made to feel welcome.

The practice is located over two floors and wheelchair users can access the ground floor level of the practice. The reception, waiting area and two dental surgeries are accessible for wheelchair users. An assistance buzzer is also made available at the entrance and we observed this being used by a patient visiting the practice. As soon as the alarm sounded, a member of staff immediately assisted the patient into the practice.

There was one unisex toilet accessible for wheelchair users at ground floor for use by patients and one toilet on the first floor for staff. Both facilities were clearly signposted and visibly clean. However, no sanitary disposal bin was in place for the staff toilet and we also advised the practice that any other bins in these areas should be foot pedal operated. It was also noted that paper hand towels should be stored in appropriate hand towel dispensers.

Improvement needed

The practice was advised to ensure a sanitary disposal bin was provided in the staff toilet and replace bins with foot pedal operated bins.

The practice to install appropriate dispensers to store hand paper towels where these are used.

We saw that the practice had a complaints procedure in place which was clearly displayed at the reception desk and waiting room. The procedure for making a complaint was also set out in the 'Patient Information' leaflet. However, despite these measures, we identified from the questionnaires that more than half the patients did not know how to make a complaint. We suggested that the practice consider other ways of ensuring all patients are aware of how to make a complaint.

We saw evidence that the practice has a system in place to log formal complaints and concerns. At the point of inspection no formal complaints had been received at the practice. The practice informed us that any informal concerns were captured within individual patients' records and dealt with accordingly. We advised the practice to record informal concerns in a central log to enable any common themes to be identified.

Improvement needed

A central log to be put in place to record patients informal concerns.

Delivery of Safe and Effective Care

We found that the practice was being run with the intention of meeting the relevant standards to ensure the health, safety and welfare of staff and patients. The practice has a high standard of infection control and decontamination processes. The surgeries are large, modern and well equipped.

Safe care

We found that the practice was being run with the intention of meeting the relevant standards to ensure the health, safety and welfare of staff and patients. The practice provided a clean environment. The surgeries were large, modern and well equipped.

We looked at the clinical facilities in the surgeries and found that they contained relevant equipment for the safety of patients and the dental team. We noted that the surgeries were visibly clean and in excellent condition. We did note that the practice had a safer sharps system in place to reduce the risk of any needle stick injuries; not all clinicians use it, therefore we recommend that all clinicians used this system.

Improvement needed

All clinicians to use the practice Safer Sharps system

We noted that portable appliance testing (PAT) had been completed on all electrical equipment ensuring all small appliances were safe to use. Fire extinguishers were in place throughout the building and we saw evidence of a current fire equipment maintenance contact. Directions for the emergency exits were clearly visible and the Health and Safety poster was on display.

We found that all chemicals were kept securely and none were left in public areas. There was a file available containing a number of data sheets relating to Control of Substances Hazardous to Health (COSHH) and relevant risk assessments in place which had been recently reviewed.

General health and safety risk assessments were seen on the day, and these had been recently reviewed.

We saw evidence that suitable arrangements were in place for the safe use of radiographic (X-ray) equipment and we saw evidence of up-to-date ionising radiation training for the dental surgeons.

There were acceptable arrangements for protecting patients and staff when the X-ray equipment was in use. We found evidence of safety checks, equipment maintenance and testing on the x-ray equipment.

No image quality audits had yet been undertaken; however we were informed by the practice that these are planned and booked for January 2017 and the information gathering exercise for the audit has already taken place. We advised the practice to ensure these are undertaken every 6 months.

The practice had procedures in place showing how to respond to patient medical emergencies. We saw records that indicated that the team had received all relevant training. The emergency drugs were stored securely and in a location making them immediately available in the event of a medical emergency (patient collapse) at the practice. We saw evidence that an effective system was in place to check the equipment and emergency drugs to ensure they remained in date and ready for use. We noted that some emergency drugs were not available in the kit held by the practice. We brought this to the attention of staff and these were immediately ordered on the day of our visit for delivery the next day.

The practice had excellent dedicated facilities for the cleaning and sterilisation (decontamination) of dental instruments as recommended by the Welsh Health Technical Memorandum (WHTM) 01-05. The area was visibly clean and uncluttered. We were satisfied that there were appropriate and well established procedures in place to minimise the risk of cross infection to protect both patients and staff. We suggested to the practice that they could consider adjusting the hand washing sink tap so that the water does not discharge directly into the drainage hole.

We could see that the practice had a system in place to manage waste appropriately and safely. Contract documentation was in place for the disposal of hazardous (clinical) and non-hazardous (household) waste. We also saw that the waste had been segregated into the designated coloured bags / containers in accordance with the current method of disposal.

We found that the practice had a safeguarding policy in place to protect children and vulnerable adults and all clinical staff had completed the training in the protection of both children and vulnerable adults.

Effective care

It was evident that the practice is seeking to continuously improve the service provided. We were able to see that some relevant audits had been completed or arranged by the practice.

A sample of 12 patients records was reviewed, this included records completed by both dentists and the therapist. Overall, there was evidence that the practice as a whole is keeping good clinical records, however, we noted that more detail needed to be recorded in respect of the care and treatment being provided and recommended by the dentists.

We discussed the improvements needed which included the need for the dentists to countersign the patients initial medical form, ensure that all treatment options are recorded ensuring a valid consent is obtained and always record the justification, clinical findings and grading of x-rays.

Improvement needed

Ensure that the patients' initial medical history form is countersigned by the dentists.

Ensure that patient records include all treatment options and justification for treatment, clinical finding and grading of x-rays.

The dentists and therapist document that cancer screening and smoking cessation advice is given and oral health advice is given to patients during their appointment.

Quality of Management and Leadership

We found evidence that this is a very well run service with effective systems to support overall practice management and leadership. A range of relevant policies and procedures were in place. The staff team appeared happy in their roles and were competent in carrying out their responsibilities.

Valley Dental Care, Valley has provided services to patients in Anglesey since it was taken over in 2009 by the current owner and has undergone a significant programme of investment and refurbishment since 2009.

We found the practice to have good leadership and clear lines of accountability. Since most of the staff had worked together for many years there was a good rapport amongst them. They told us that they were confident in raising any issues or concerns directly with the senior dentist or with each other.

We saw completed staff induction folders and these were well planned. All staff had been given access to policies and procedures.

We also saw that all staff had accessed a wide variety of training; meeting CPD requirements and we saw evidence of monthly team meetings and annual staff appraisals.

We confirmed that all relevant staff had a valid Disclosure and Barring Service (DBS) check and were registered with the General Dental Council. The dentists' HIW certificates were on display as required by the Private Dentistry (Wales) Regulation 2008 and we saw confirmation of indemnity cover.

We found that the practice displayed its emergency contact details and the practice opening times on the outside entrance of the premises; however we found that the practice did not display the name and qualifications of all its dental practitioners.

Improvement needed

The name and qualifications of all dental practitioners should be displayed.

We saw records relating to Hepatitis B immunisation status for all clinical staff working in the practice.

We looked at the policies and procedures in place and we found that they were thorough and saw evidence that they reflected actual practice, had been regularly reviewed and contained review dates and were version controlled.

4. 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 Valley Dental Care, Valley 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.

5. 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 2008¹ and the Private Dentistry (Wales) (Amendment) Regulations 2011². 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

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

² <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: Valley Dental Care, Valley

Date of Inspection: 22 November 2016

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
Quality of the Patient Experience					
Page 6	The practice was advised to ensure a sanitary disposal bin was provided in the staff toilet and replace bins with foot pedal operated bins	The Environmental Protection (Duty of Care) Regulations 1991 Hazardous Waste Regulations 2005 (Wales)	Additional Sanitary bin in place for staff toilet. General waste bins have been replaced with foot operated bins.	Sam	Completed 16/12/16

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
Page 6	The practice to install appropriate dispensers to store paper HAND towel where these are used.	Health and Care Standard 2.1	Hand towel dispensers are now installed.	Sam	Completed 16/12/16
Page 7	A central log to be put in place to record patients informal concerns.	Health and Care Standard 6.3	A central log for informal complaints is now in place. This is reviewed at every monthly staff meeting.	Sam	Completed 19/12/16
Page 8	All clinicians to use the practice Safer Sharps system	Health and Safety (Sharp Instruments in Healthcare) Regulations 2013	We are now using two safer sharps systems : 1) Ultra Safe 2) Conta guard	Sam	Completed 14/12/16
Delivery of Safe and Effective Care					
Page 10	Ensure that the patients' initial medical history form is countersigned by the dentists. Ensure that patient records include all treatment options and justification for	Health and Care Standards 3.3 Private Dentistry (Wales)	All medical History forms are now countersigned by the dentist. Templates on the software have been revised to ensure all clinicians are recording all treatment options	Sam	Completed 19/12/16

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
	treatment, clinical finding and grading of x-rays.	Regulations 2008, Sec 14 (2)	and justifications for treatment and clinical findings and grading.		
Quality of Management and Leadership					
Page 11	The name and qualifications of all dental practitioners should be displayed.	GDC Standards 6.6	New sign by the front door with both practitioner's names and qualifications displayed on.	Sam	Completed 22/12/16

Practice Representative:

Name (print): Samantha Jones

Title: Lead Nurse

Date: 22/12/16