

General Dental Practice Inspection (Announced)

Aneurin Bevan University
Health Board, Smiles
Better (Private Practice)

Inspection date: 30 January
2017

Publication date: 2 May 2017

This publication and other HIW information can be provided in alternative formats or languages on request. There will be a short delay as alternative languages and formats are produced when requested to meet individual needs. Please contact us for assistance.

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

In writing:

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

Or via

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

Contents

1.	Introduction	2
2.	Context.....	3
3.	Summary.....	4
4.	Findings	5
	Quality of the patient experience	5
	Delivery of safe and effective care	8
	Quality of management and leadership	14
5.	Next Steps	16
6.	Methodology.....	17
	Appendix A	19

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 Better at 2-4 Baker Street, Abergavenny, NP7 5BB on 30 January 2017.

HIW explored how Smiles Better complied with the Private Dentistry (Wales) Regulations 2008 and the Private Dentistry (Wales) (Amendment) Regulations 2011 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 Better provides private only dental services and is based in Abergavenny.

The practice staff team includes five dentists, eight dental nurses, three hygienists, one therapist, two receptionists, one practice manager and one cleaner.

A range of private dental services are provided.

3. Summary

Overall, we found evidence that Smiles Better provided safe and effective care.

This is what we found the practice did well:

- Patients told us they were very happy with the service provided
- Clinical facilities were well-equipped, visibly clean and tidy
- Documentation and information was available showing that X-ray equipment was used safely
- Staff told us they felt supported by the senior practice team.

This is what we recommend the practice could improve:

- Recording of checks of decontamination equipment need to be made to fully comply with national guidance
- Checks on all emergency equipment need to be carried out to ensure equipment is available and safe to use in the event of a patient emergency (collapse)
- The practice need to ensure that all staff are compliant with guidelines in CPR training
- Records of immunisation for clinical staff need to be maintained by the practice
- The practice needs to register laser equipment for dental treatments with HIW to allow dentists to continue using it
- Dentists need to improve aspects of their record keeping.

4. Findings

Quality of the patient experience

We saw that patients were treated with dignity, respect and kindness by the practice team. Patients who provided comments indicated that they were very satisfied with the service offered by the practice.

Prior to the inspection, we invited the practice to distribute HIW questionnaires to patients to obtain views on the dental services provided. In total 26 were completed and returned to us. Patient comments included:

'A lovely practice, always accommodating. Friendly and professional. Always receive top treatments, would recommend 100%'

'Very, very happy, very nervous patient and always help me to get through the treatment needed'

'I have always been extremely satisfied with the service have received. I have felt personally appreciated and listened to'

All patients who returned a questionnaire indicated that they were very satisfied with the care and treatment provided to them.

Dignified care

We observed that engagement between staff and patients was friendly, respectful and professional.

Completed patient questionnaires showed that all patients were satisfied with the care they received. Patients told us that they had been made to feel welcome by the practice. Some patients added their own positive comments about the level of service received and the attitude and approach of the whole practice team.

The practice provided private dental treatments only. Information on dental treatment prices was not displayed for patients to see. Prices for dental treatments must be displayed so that patients have clear information about how much their treatment may cost. The practice agreed to implement this.

Improvement needed

The practice must prominently display a price list for private dental treatments.

A practice information leaflet providing general information about the practice was available in the reception area for patients to read and take away.

Timely care

The practice made efforts to ensure that patients were seen in a timely manner. The majority of patients who completed questionnaires told us that they had not experienced a delay in being seen by a dentist on the day of their appointment. Those who had, told us that any delay had been minimal and the practice would offer an explanation for the delay. We were told that patients would be informed about any delay to their appointments by the receptionist and alternative appointments offered if required.

An out of hours telephone number was available for patients to contact should they require urgent dental treatment. The telephone number was included within the patient information leaflet and on the answerphone message of the practice. We recommended that the practice may wish to consider including the telephone number on the practice website too. The majority of patients who returned questionnaires stated that they knew how to access the out of hours service.

Staying healthy

We saw that there was a variety of health promotion information available to patients within the practice to help promote oral health and hygiene.

The practice's website also provided additional advice in the form of 'frequently asked questions' regarding dental treatments for children, seniors and dental implants.

Without exception, all patients told us that they felt they had been given enough information about their dental treatment. It was positive to note that some patients provided additional comments in questionnaires describing being fully informed about their treatments.

Individual care

The practice had arrangements in place so that patients with mobility difficulties could access its services. The practice was located over two floors of a two storey building. We were told that patients who were unable to access the

surgeries on the first floor would be offered an appointment in the ground floor surgery.

We saw that the practice had a written complaints procedure. Information for patients on how to raise a concern (complaint) was displayed in the reception area. Information on how to obtain a copy of the complaints policy was also included in the practice information leaflet. We recommended that the complaints procedure be updated to include contact details for HIW. We also recommended that the complaints procedure be included on the practice's website, as required by the General Dental Council¹.

Improvement needed

The practice's complaints procedure must include the contact details for Healthcare Inspectorate Wales.

The complaints procedure must be included on the practice website.

We were told that patients were able to provide feedback verbally but the practice did not have a system in place for actively obtaining regular patient feedback about the care and treatment provided to them. Staff agreed to implement this.

Improvement needed

The practice should implement a system for actively obtaining regular patient feedback about the service provided.

¹ <http://www.gdc-uk.org/Dentalprofessionals/Standards/Documents/Ethical%20advertising%20statement%20Jan%202012.pdf>

Delivery of safe and effective care

We found the practice provided safe and effective care. The practice premises were visibly well maintained both internally and externally.

We saw that improvements needed to be made in the recording of checks on the sterilisation equipment.

We saw that checks on emergency drugs and equipment, whilst being carried out, needed to be done more regularly.

We found that improvements needed to be made to ensure all staff receive Cardiopulmonary Resuscitation (CPR) training on a regular basis in line with relevant guidance.

Documentation and information was available to demonstrate that X-ray and decontamination equipment was being used safely.

Safe care

We found that the practice had arrangements in place to protect the safety and well being of staff and people visiting the practice.

The building appeared to be well maintained internally and externally. During a tour of the building, we saw that all areas were clean, tidy and free from obvious hazards.

We saw that fire safety equipment was available at different locations around the practice. We also saw evidence that the practice had a contract in place for servicing of the equipment to help ensure it was working properly.

A contract was in place for the safe transfer and disposal of hazardous (clinical) waste. We saw hazardous waste was being stored securely whilst waiting to be collected by the contractor company. Amalgam separator equipment was installed so amalgam (a form of dental substance containing mercury) particles from dental fillings could be removed from waste water before being disposed of safely. Arrangements with the local council were in place for the disposal of non hazardous (household) waste.

We looked at all clinical facilities (surgeries) within the practice. These were clean and tidy and generally furnished to facilitate effective cleaning. We saw that the floors in the surgeries needed sealing to allow for effective cleaning to reduce cross infection. We were told that there were plans to refurbish one of the dental surgeries in 2017, to maintain standards within the practice.

Improvement needed

The practice must ensure the floors are sealed between the cabinets and the existing flooring (or make other suitable arrangements) to prevent water, dust and debris from accumulating in the surgeries identified.

A separate decontamination room was set up and generally met the principles set out within the Welsh Health Technical Memorandum (WHTM) 01-05 (Revision 1)² guidance document. There were three separate sinks in the decontamination room. The practice used one sink for ionised water, one for cleaning of instruments and one for hand washing. We recommended that the practice use two separate sinks for cleaning of instruments as recommended by WHTM 01-05. The practice agreed to implement this change with immediate effect and we saw that the sink used for hand washing was moved, allowing the use of two sinks for decontamination purposes only.

Decontamination equipment appeared in good condition on inspection. Two autoclaves³ were in use and we saw inspection certification showing they were safe to use. We saw, and were told, that tests had been done to show that cleaning and sterilisation equipment remained safe to use as recommended by WHTM 01-05. The practice did not maintain records of the start of day tests carried out on the autoclave equipment; neither did they retain the outcome of the testing of the ultrasonic bath equipment. We recommended that the practice should consider implementing a recognised logbook to ensure that all relevant information is recorded.

Improvement needed

The practice must make suitable arrangements to ensure staff comply with guidance set out within the WHTM 01-05 (Revision 1) guidance document in respect of:

- ***Performing tests and procedures on autoclave and ultrasonic bath equipment***

² [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.

³ An autoclave machine is a pressure chamber used to sterilize equipment and supplies by subjecting them to high pressure saturated steam.

- ***Maintaining records of tests of equipment***

A decontamination process was demonstrated by staff and we saw certificates showing staff had attended training on how to decontaminate instruments. Instruments were being stored in sealed bags to prevent cross contamination. Whilst the dates of processing (cleaning and sterilising) had been written on packaging we recommended that the dates by which instruments must be used or reprocessed, also be added to fully comply with WHTM 01-05.

Improvement needed

The practice should record the date by which instruments should be used or reprocessed, on the packaging of decontaminated instruments.

We saw that the practice had conducted an audit of the decontamination arrangements. We recommended that the practice consider using the audit tool specifically aligned to WHTM 01-05 in the future, as part of their quality improvement activity. Staff agreed to consider using this tool.

We saw that one dentist had been using a laser to perform some dental treatment. At the time of our inspection, we confirmed that the practice was not registered with HIW for the use of a laser. We therefore instructed the practice that the laser must not be used until such time as an application to register with HIW had been successfully determined. The practice provided a verbal and written assurance that the laser would not be used.

We saw that equipment and drugs were available for use in a patient emergency (collapse). We also saw records showing that the drugs and equipment were being checked on a regular basis. We recommended that weekly checks be undertaken on emergency drugs and equipment in accordance with the Resuscitation Council (UK)⁴ guidelines. The practice confirmed that this would be implemented immediately. We saw that some of the emergency equipment, (specifically airways), were out of date and the practice also required a full set of different sized face masks. We informed the practice manager of our findings who provided verbal assurance that corrective action would be taken. On the day of our inspection we saw that the relevant equipment was ordered.

⁴ [The Resuscitation Council \(UK\)](#) exists to promote high-quality, scientific, resuscitation guidelines that are applicable to everybody, and to contribute to saving life through education, training, research and collaboration.

Improvement needed

The practice must make suitable arrangements to ensure that, in accordance with the quality standards set out by the Resuscitation Council (UK):

- ***A full emergency kit is always available at the practice, and***
- ***Regular checks are being conducted on the emergency equipment***

Training records showed the majority of staff had completed cardiopulmonary resuscitation (CPR) training on an annual basis. We were unable to see confirmation or certification of completed CPR training for two members of clinical staff. In accordance with HIW's process, we requested immediate written assurance from the practice on the action taken.

Improvement needed (requiring an immediate improvement plan)

The practice must ensure that all relevant staff receive CPR training on an annual basis and ensure that certification is available for inspection by HIW.

The practice provided HIW with an immediate improvement plan. We were assured that suitable arrangements had been put in place to address the improvement needed.

We concluded that the practice had arrangements in place for the safe use of radiographic (X-ray) equipment. This is because the required documentation and information on the safe use of the X-ray equipment was available and up to date. We saw training certificates demonstrating that the dentists were up to date with their ionising radiation training and were meeting guidance set out by the General Dental Council. We saw that the Radiation Protection File had very recently been reviewed by the Radiation Protection Adviser (RPA) and returned to the practice. We saw that the local rules had been reissued by the RPA but not yet signed by staff using the radiographic equipment. We recommended that all appropriate staff are signed up to the newly issued local rules.

We saw that image quality audits of X-rays had been completed regularly as part of the quality assurance monitoring activity. These audits identify possible issues with the taking of X-rays and indicate where improvements should be made if required.

The practice had a procedure in place to promote and protect the welfare of children and adults who are vulnerable or at risk. All staff had completed training on child and adult protection and we saw training certificates that demonstrated this.

Staff we spoke with confirmed they felt able to raise any work related concerns they may have with senior practice staff and were confident these would be acted upon.

Effective care

Discussions with the practice team demonstrated a commitment to provide safe and effective care to patients.

The practice carried out a range of audits to monitor the quality and safety of the care and treatment provided to patients. These included clinical audits to identify areas for improvement and checks on equipment to make sure it was working effectively. It was unclear however, whether there was a systematic approach identifying when specific audits would be carried out. We recommended that the practice formalise the process for undertaking audit activity throughout the year.

We considered a sample of patients' dental records to assess the quality of record keeping. Overall, the notes made were sufficiently detailed. However, we identified the following common themes where improvement should be made:

- Medical histories had not always been countersigned by the dentists. This would demonstrate that the dentists had taken into account patients medical conditions and any medicines they were taking when planning dental care and treatment
- The outcomes of Basic Periodontal Examination (BPE)⁵ checks were inconsistently recorded within patient records and not in accordance with recommended guidelines
- The reasons for timescales between patient appointments were not consistently recorded meaning justification for different patient recall times could not be explained
- Recording of patient consent to treatment was inconsistently recorded. We were told that verbal consent was agreed at each appointment, but not always documented.

⁵ A basic screening method to check the soft tissues surrounding the teeth

Improvement needed

The dentists working at the practice must make suitable arrangements to ensure patient dental records are maintained in accordance with regulatory requirements and professional standards for record keeping

In addition, the reason for taking X-rays and the dentists' findings from them had not always been recorded as required by the Ionising Radiation (Medical Exposure) Regulations (IR(ME)R) 2000.

Improvement needed

The dentists working at the practice must ensure they record the justification for taking X-rays and their findings as required by the Ionising Radiation (Medical Exposure) Regulations 2000

Quality of management and leadership

A management structure with clear lines of reporting and accountability was demonstrated. Staff told us they felt well supported by the whole practice team. Staff told us they had the opportunity to attend relevant training and were supported and encouraged by the management team.

Documentation in respect of staff immunisation needed to be retained by the practice.

Smiles Better is owned by three dentists. They are supported by a practice manager, two associate dentists and a team of dental nurses, hygienists and receptionists. Clear lines of accountability and reporting were described by all of the practice team.

Staff working on the day of our inspection told us that they felt well supported in their roles by all members of the practice team. We found that staff were clear and knowledgeable about their roles and responsibilities.

Staff told us that communication amongst the practice team was good and regular informal meetings were held. We recommended that the practice formalise the process for team meetings and record discussions and outcomes for future reference.

Improvement Needed

The practice should develop a formalised process for holding team meetings and ensure records of discussions and outcomes are maintained.

We saw that there were a range of policies and procedures in place with the aim of ensuring the safety of staff and patients. The majority of the policies we saw were not signed by staff, did not have review dates or version numbers. This meant that it was not possible to assess whether all staff had read and understood the policies and procedures in place and whether the most up to date version was available.

Improvement Needed

The practice should ensure that they have a system in place to review policies and procedures and demonstrate that these have been communicated appropriately to staff.

We were told that staff appraisals were not taking place.

Improvement Needed

The practice must ensure that all staff receive appraisals of their work on a regular basis.

We found that clinical staff were registered with the General Dental Council (GDC) and had indemnity insurance cover in place. We saw records for some staff to demonstrate that they received immunisation against Hepatitis B to protect patients and themselves against infection. We were unable to confirm the immunisation status for two members of staff. We informed the practice manager of our findings and we were told that all staff had been immunised, but that the supporting documentation was not available. In accordance with HIW's process, we requested immediate written assurance from the practice on the action taken.

Improvement needed (requiring an immediate improvement plan)

The practice must ensure that all relevant staff are immunised for Hepatitis B and ensure that certification and outcomes of immunisations are available for inspection by HIW.

The practice provided HIW with an immediate improvement plan. We were assured that suitable arrangements had been put in place to address the improvement needed.

The dentists working at the practice provided private dental services. Their HIW registration certificates were prominently displayed as required by the regulations for private dentistry. Up to date Disclosure and Barring Service (DBS) certificates were not available for all of the dentists working at the practice. The regulations for private dentistry require that all dentists providing private dental services in Wales have a DBS certificate issued within the previous three years.

Improvement Needed

All dentists working at the practice and registered with HIW to provide private dental services must have an up to date DBS certificate and make this available for inspection by HIW.

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 Better 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

Any dentist working at the practice who is registered with HIW to provide private dentistry will be subject to the provisions of the Private Dentistry (Wales) Regulations 2008⁶ and the Private Dentistry (Wales) (Amendment) Regulations 2011⁷. 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 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
- Discussions with staff including dentists, nurses and administrative 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.

⁶ <http://www.legislation.gov.uk/wsi/2008/1976/contents/made>

⁷ <http://www.legislation.gov.uk/wsi/2011/2686/contents/made>

Dental inspections capture a snapshot of the application of relevant regulations at the practice visited on the day of the inspection.

Appendix A

General Dental Practice: Improvement Plan

Practice: Smiles Better

Date of Inspection: 30 January 2017

Page number	Improvement needed	Regulation / Standard	Practice action	Responsible officer	Timescale
Quality of the patient experience					
Page 6	The practice must prominently display a price list for private dental treatments <i>General Dental Council Standards for the Dental Team, Standard 2</i>	The Private Dentistry (Wales) Regulations 2008 (as amended) Regulation 14	Private fees are now on display on a stand in reception area.	Jill Robinson	Immediate
Page 7	The practice's complaints procedure must include the contact details for Healthcare Inspectorate Wales.	The Private Dentistry (Wales)	Complaints procedure has been updated accordingly and added to practice website.	Jill Robinson	Immediate

Page number	Improvement needed	Regulation / Standard	Practice action	Responsible officer	Timescale
	<p>The complaints procedure must be included on the practice website</p> <p><i>General Dental Council Standards for the Dental Team, Standard 5.1</i></p> <p><i>General Dental Council, Guidance on Advertising (30 September 2013)</i></p>	<p>Regulations 2008 (as amended)</p> <p>Regulation 15(2)</p>			
Page 7	<p>The practice should implement a system for actively obtaining regular patient feedback about the service provided</p>	<p>The Private Dentistry (Wales) Regulations 2008 (as amended)</p> <p>Regulation 15(2)</p>	<p>A suggestions box has been placed in reception. The management has discussed the pros and cons of questionnaires having had limited success in the past, no decision has been reached.</p>	Jill Robinson	Immediate
Delivery of safe and effective care					
Page 9	<p>The practice must ensure the floor is sealed between the cabinets and the existing flooring (or make other suitable arrangements) to prevent water, dust and debris from accumulating in the surgeries</p>	<p>The Private Dentistry (Wales) Regulations 2008 (as amended)</p>	<p>The surgery at No. 2 has had a full refit, including new flooring to WHTM 01-05 regulations.</p> <p>The ground floor surgery at No. 4 has been resealed where damaged.</p>	Jill Robinson	Immediate

Page number	Improvement needed	Regulation / Standard	Practice action	Responsible officer	Timescale
	<p>identified</p> <p><i>The Welsh Health Technical Memorandum (WHTM) 01-05 (Revision 1):Chapter 6, para 6.46 - 6.49</i></p>	Regulation 14(6)			
Page 9	<p>The practice must make suitable arrangements to ensure staff comply with guidance set out within the WHTM 01-05 (Revision 1) guidance document in respect of:</p> <ul style="list-style-type: none"> performing tests and procedures on autoclave and ultrasonic bath equipment maintaining records of tests of equipment <p><i>The Welsh Health Technical Memorandum (WHTM) 01-05 (Revision 1): Chapter 4, Chapter 12, Chapter 14 and Appendix 3</i></p>	<p>The Private Dentistry (Wales) Regulations 2008 (as amended)</p> <p>Regulation 14(4), 14(5)</p>	<p>Daily tests of autoclaves and ultrasonic bath have been in place for a number of years and the results documented and kept.</p> <p>Foils strips from the ultrasonic bath tests are now being kept along with the reports.</p> <p>All clinical staff responsible for testing and validation have been reminded of the requirement for accurate recording of tests.</p>	Elyse Macdonald	Immediate
Page 10	The practice should record the date	The Private Dentistry	Process and use by dates are recorded on the packaging of	Elyse Macdonald	Immediate

Page number	Improvement needed	Regulation / Standard	Practice action	Responsible officer	Timescale
	<p>by which instruments should be used or reprocessed on the packaging of decontaminated instruments</p> <p><i>The Welsh Health Technical Memorandum (WHTM) 01-05 (Revision 1):Chapter 4, para 4.26</i></p>	<p>(Wales) Regulations 2008 (as amended)</p> <p>Regulation 14(4)</p>	<p>decontaminated instruments.</p> <p>All clinical staff responsible for decontamination have been informed of the requirement for both dates.</p>		
Page 11	<p>The practice must make suitable arrangements to ensure that, in accordance with the quality standards set out by the Resuscitation Council (UK):</p> <ul style="list-style-type: none"> • A full emergency kit is always available at the practice, and • Regular checks are being conducted on the emergency equipment <p><i>Resuscitation Council (UK), Quality Standards for cardiopulmonary resuscitation practice and training, Primary Care</i></p>	<p>The Private Dentistry (Wales) Regulations 2008 (as amended)</p> <p>Regulation 14(2)</p>	<p>The practice has purchased the full range of airways as recommended. Whilst there is no expiry date on the packaging as requested by HIW inspectors, this has been double checked with our supplier, who assure us that is the norm.</p> <p>The emergency drugs and equipment list is checked weekly. Oxygen cylinders daily. Records are kept of all checks. The AED is checked daily.</p>	Elyse Macdonald	Immediate
Page 11	Improvement Needed (requiring an	The Private	Mary Toy of Fountain Training has		

Page number	Improvement needed	Regulation / Standard	Practice action	Responsible officer	Timescale
	<p>immediate improvement plan)</p> <p>The practice must ensure that all relevant staff receive CPR training on an annual basis and ensure that certification is available for inspection by HIW</p> <p><i>Resuscitation Council (UK), Quality Standards for cardiopulmonary resuscitation practice and training, Primary Care</i></p> <p><i>General Dental Council Standards for the Dental Team, Standard 1.5.3</i></p>	<p>Dentistry (Wales) Regulations 2008 (as amended)</p> <p>Regulation 14(2)</p>	<p>provided annual in house CPR training sessions since 2008 with our next date arranged for 3rd May, 2017. Since the HIW inspection one of the 2 missing certificates for clinical staff has been located and a copy forwarded to HIW. Staff member 2's CPD folder wasn't made available at the inspection. On investigation I have found that she has a 3 year Emergency First Aid certificate dated 04/03/2014 and a Smiles Better CPR training certificate from 22/10/2014 (3 hours). We are confident that all clinical team members will meet their core CPD requirements as defined by the General Dental Council. Both members will be attending the May session. All team members are encouraged to attend our CPR sessions.</p>	<p>Jill Robinson</p>	<p>Immediate</p>
<p>Page 13</p>	<p>The dentists working at the practice</p>	<p>The Private</p>	<p>Audit of patient records in respect of</p>	<p>Nigel Jones</p>	<p>March 2017</p>

Page number	Improvement needed	Regulation / Standard	Practice action	Responsible officer	Timescale
	<p>must make suitable arrangements to ensure patient dental records are maintained in accordance with regulatory requirements and professional standards for record keeping</p> <p><i>General Dental Council Standards for the Dental Team, Standard 4</i></p>	<p>Dentistry (Wales) Regulations 2008 (as amended)</p> <p>Regulation 14(1)(b)</p>	<p>areas identified by HIW will be undertaken initially in March 2017 and every 6 months thereafter</p>		<p>followed by 6 monthly</p>
Page 13	<p>The dentists working at the practice must ensure they record the justification for taking X-rays and their findings as required by the Ionising Radiation (Medical Exposure) Regulations 2000</p> <p><i>General Dental Council Standards for the Dental Team, Standard 4.1</i></p>	<p>The Ionising Radiation (Medical Exposure) Regulations 2000</p> <p>Regulation 6</p>	<p>Clinicians have been reminded of their responsibility to justify and report in accordance with Irmer regulations.</p>	Nigel Jones	Immediate
Quality of management and leadership					
Page 14	<p>The practice should develop a formalised process for holding team meetings and ensure records of discussions and outcomes are</p>	<p>The Private Dentistry (Wales) Regulations 2008 (as</p>	<p>The practice has documented, staff meetings for several years, although they have been somewhat infrequent.</p>	Jill Robinson	Immediate

Page number	Improvement needed	Regulation / Standard	Practice action	Responsible officer	Timescale
	maintained <i>General Dental Council Standards for the Dental Team, Standard 6</i>	amended) Regulation 14(2)	We will endeavour to introduce a system of formal staff meetings on a bi/monthly basis.		
Page 14	The practice should ensure that they have a system in place to review policies and procedures and demonstrate that these have been communicated appropriately to staff <i>General Dental Council Standards for the Dental Team, Standard 6</i>	The Private Dentistry (Wales) Regulations 2008 (as amended) Regulation 14(2)	The practice's ongoing subscription to BDA Expert ensures we are up to date with policy requirements. As new policies, procedures and protocols are introduced or updated, staff will be required to read, sign and date to indicate they have been communicated appropriately.	Jill Robinson	Ongoing
Page 15	The practice must ensure that all staff receive appraisals of their work on a regular basis <i>General Dental Council Standards for the Dental Team, Standard 6.6.1</i>	The Private Dentistry (Wales) Regulations 2008 (as amended) Regulation 14(2)	Appraisals have been carried out in the past, with neither staff nor management enjoying the experience, however we will endeavour to get regular appraisals in place.	Nigel Jones Jill Robinson	6 months

Page number	Improvement needed	Regulation / Standard	Practice action	Responsible officer	Timescale
Page 15	<p>Improvement Needed (requiring an immediate improvement plan)</p> <p>The practice must ensure that all relevant staff are immunised for Hepatitis B and ensure that certification and outcomes of immunisations are available for inspection by HIW</p> <p><i>General Dental Council Standards for the Dental Team, Standard 1.4.2</i></p>	<p>The Private Dentistry (Wales) Regulations 2008 (as amended)</p> <p>Regulation 14(2)</p>	<p>The practice has an Occupational Health contract in place with ABUHB. All staff without certification or those with older certificates have now either had blood tests, boosters or are in the process of having a new set of immunisations.</p> <p>We have implemented a new system for recording and tracking the Hep B status of current and new staff.</p>	Jill Robinson	Ongoing, it will be several months before final Hep B status is received for those staff receiving full course. Estimate June 2017.
Page 16	<p>All dentists working at the practice and registered with HIW to provide private dental services must have an up to date DBS certificate and make this available for inspection by HIW</p>	<p>The Private Dentistry (Wales) Regulations 2008 (as amended)</p> <p>Regulation 13 schedule 2</p>	<p>2 clinicians were identified to have had DBS checks more than 3 years old. New checks have been registered with Mayflower DBS.</p>	Jill Robinson	End of March

Practice Representative:

Name (print): JILL ROBINSON

Title: PRACTICE MANAGER

Date: 22nd MARCH, 2017