

General Dental Practice Inspection (Announced)

Smiles Dental Practice Pentwyn,
Oasis Healthcare Limited/Cardiff
& Vale University Health Board

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2017

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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**

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Healthcare Inspectorate Wales (HIW) is the independent inspectorate and regulator of healthcare in Wales

Our purpose

To check that people in Wales are receiving good care.

Our values

- **Patient-centred:** we place patients, service users and public experience at the heart of what we do
- **Integrity:** we are open and honest in the way we operate
- **Independent:** we act and make objective judgements based on what we see
- **Collaborative:** we build effective partnerships internally and externally
- **Professional:** we act efficiently, effectively and proportionately in our approach.

Our priorities

Through our work we aim to:

Provide assurance:

Provide an independent view on the quality of care.

Promote improvement:

Encourage improvement through reporting and sharing of good practice.

Influence policy and standards:

Use what we find to influence policy, standards and practice.

1. What we did

Healthcare Inspectorate Wales (HIW) completed an announced inspection of Smiles Dental Practice Pentwyn, part of Oasis Healthcare Limited at Pentwyn Drive, Pentwyn, Cardiff, CF23 7EY within Cardiff & Vale University Health Board on the 7 September 2017.

Our team, for the inspection comprised of a HIW inspector and a dental peer reviewer.

HIW explored how the service met the Health and Care Standards (2015).

Further details about how we conduct dental inspections can be found in Section 5 and on our website.

2. Summary of our inspection

Overall we found evidence that Smiles Dental Practice Pentwyn provides safe and effective care to their patients in a pleasant environment with friendly, professional and committed staff. Patients were very satisfied with the service provided.

This is what we found the service did well:

- Patients were satisfied with the service provided
- The staff team were friendly, welcoming and committed to providing a high standard of care
- Clinical facilities were well-equipped, clean, tidy and well organised
- Dental instruments were cleaned and sterilised appropriately
- There were arrangements in place for the safe use of X-rays.

This is what we recommend the service could improve:

- Further patient health promotion information and leaflets
- A review and actions must be taken in respect of making more secure the access to the stock room area and decontamination room
- Further verification of inoculation immunity check status is required for three dental nurses
- Oasis Healthcare Limited must amend its infection control policy for dental practices in Wales to refer to the Welsh Health Technical Memorandum 01-05 (WHTM 01-05) and not the HTM 01-05.

3. What we found

Background of the service

Smiles Dental Practice Pentwyn, which is part of Oasis Healthcare Limited, provides services to patients in the Cardiff and surrounding area. The practice forms part of dental services provided within the area served by Cardiff & Vale University Health Board.

The practice has a staff team which includes four dentists, two hygienists, six dental nurses, one trainee dental nurse, one practice manager and one receptionist.

The practice provides a range of NHS and private general dental services.

Quality of patient experience

We spoke with patients, their relatives, representatives and/or advocates (where appropriate) to ensure that the patients' perspective is at the centre of our approach to inspection.

Overall, we found that Smiles Dental Practice, Pentwyn was working hard to provide a high quality experience to their patient population. The feedback gained through our patient questionnaires was positive. However, we found some evidence that the practice was not fully compliant with all Health and Care Standards in all areas.

Prior to the inspection, we invited the practice to distribute HIW questionnaires to patients to obtain views on the dental services provided. In total 18 completed questionnaires were received. The majority of completed questionnaires were from patients who had been a patient at the practice for more than two years. Overall, patient feedback was very positive. Patients were asked on the questionnaires how the dental practice could improve the service it provides, and some of the comments received were:

"More than happy"

"At one time there were a lot of delays but this seems to have improved"

Staying healthy

All patients who completed a questionnaire told us that the dental team had spoken to them about how to keep their mouth and teeth healthy. Health promotion information assists in supporting patients to take responsibility for their own health and wellbeing. The practice needs to provide more dental health promotion information in the waiting areas. This will support patients in accessing information which could support them in caring for their own oral hygiene. Signs displaying 'no smoking' were displayed in the reception/waiting area.

Improvement needed

More health promotion information needs to be available for patients in the waiting area.

Dignified care

All patients who completed a questionnaire felt that they had been treated with respect when visiting the practice. We observed the warm, friendly and professional approach adopted by staff towards patients.

There was space available for staff to have conversations with patients in a private area, away from other patients, if required for the purpose of maintaining patient confidentiality. We saw that the doors to the dental surgeries (where patients were receiving care on the day of our inspection) remained closed to maintain privacy and dignity.

Patient information

The majority of patients who completed a questionnaire told us that they felt involved as much as they wanted to be in any decisions made about their treatment. The majority of patients who completed a questionnaire told us that they had received clear information about their dental treatment, including available treatment options and associated costs. However, a third of the patients that completed a questionnaire said that they didn't understand how the cost of their treatment was calculated. However, we saw that information about the price of both NHS and private treatment was available in the waiting area, so that patients were informed about costs.

The practice provides patients with information on the practice, in a leaflet called 'Our Team', which is available in the waiting area. We saw that the practising dentists' details and the surgery opening hours were being displayed externally.

Communicating effectively

While most patients that completed a questionnaire told us that they were always able to speak to staff in their preferred language, almost a quarter of patients told us that they could never speak to staff in their preferred language.

The practice has a broad patient group, with a diversity of communication needs and it was good to note that there was a folder available in the waiting

area which had some key information translated into several different languages, including Welsh. This demonstrated that the practice was pro-active in supporting communication issues where required.

The practice should have a formal arrangement in place to access interpreting services. The practice is advised that interpreting services must be offered to patients who may require it.

Timely care

The majority of patients who completed a questionnaire said that they would know how to access the out of hours dental service if they had an urgent dental problem. We saw that the out of hours emergency contact number was being displayed externally. The practice tries to ensure that dental care is always provided in a timely way and we were told and observed that the receptionist informs patients of the reasons for any undue delays.

Individual care

Planning care to promote independence

All patients who answered the questionnaire confirmed that the dentist enquires about their medical history before undertaking any treatment. We saw evidence of treatment planning and options being discussed with patients. We saw evidence that patients were being informed and encouraged to care for their teeth/gums after and between appointments.

People's rights

The practice had in place an equality and diversity policy. There is ramp access to the practice and level access to waiting area and surgeries on the ground floor, for patients with mobility difficulties and wheelchair users. There is also a disabled access toilet available on the ground floor.

Listening and learning from feedback

Over a third of patients that completed a questionnaire told us that they wouldn't know how to raise a concern or complaint about the services they

receive at the dental practice. However, we found that the practice had a written procedure for dealing with concerns (complaints) about NHS dental treatment. This complaints procedure was compliant with the arrangements for raising concerns about NHS treatment in Wales (known as 'Putting Things Right'¹). There was also information available for private patients' on how to make a complaint which was in line with the Private Dentistry Wales 2008 Regulations². These complaints procedures were presented in a joint document which was available in a prominent place in the waiting area, so that patients could easily access this information, should they require it.

The practice manager was advised and agreed that for clarity, the complaints document should be separated so that the contact details for NHS patients' complaints and the contact details for private patients' complaints are made clearer to the reader.

Few patient complaints had been received over recent years and there was an electronic 'I Casework' complaints record system being maintained, which has a comprehensive format from receipt of complaints to closure process. This system also captures concerns. Oasis Healthcare Limited of which this practice is part, has a central complaints handling team and the practice's electronic complaint returns are audited centrally on a monthly basis to enable any common themes to be identified. The practice manager was the designated complaints person. Most patients that completed a questionnaire confirmed that they were asked for their views on the dental practice, for example, through patient questionnaires.

¹ <http://www.wales.nhs.uk/sites3/page.cfm?orgid=932&pid=50738>

² [https://www.dentalprotection.org.uk/help-advice/regulations/wales/private-dentistry-\(wales\)-regulations-2008](https://www.dentalprotection.org.uk/help-advice/regulations/wales/private-dentistry-(wales)-regulations-2008)

Delivery of safe and effective care

We considered the extent to which services provide high quality, safe and reliable care centred on individual patients.

Overall, we found evidence that patients were provided with safe and effective dental care. Clinical facilities were well equipped and were visibly clean and tidy. We found the practice had taken steps to help protect the health, safety and welfare of staff and patients. However, a review and actions need to be taken in respect of making more secure the access to the stock room area and decontamination room. We were satisfied with the arrangements in place to protect patients and staff from preventable healthcare associated infections. However, further verification of inoculation immunity check status is required for three staff. The practice (Oasis Healthcare Limited) must amend its infection control policy.

Resuscitation equipment and emergency drugs were available at the practice and there were systems in place to help ensure they were safe for use. There were arrangements in place for the safe use of X-ray equipment. The practice had taken steps to promote and protect the welfare and safety of children and adults who become vulnerable or at risk. Disclosure Barring Service (DBS) safeguarding checks were in place for all dentists in line with the private dental regulations.

Safe care

Managing risk and promoting health and safety

We found the practice had taken steps to help protect the health, safety and welfare of staff and patients. We saw that the portable appliance testing (PAT) had been undertaken to help ensure the safe use of small electrical appliances within the practice. A five yearly electrical wiring certificate for the premises and gas certificate was in place.

There was one unisex toilet for use by patients and staff with disabled access on the ground floor, which was clearly signposted and visibly clean; with a sanitary disposal bin in place. Contract documentation was in place for the disposal of non hazardous and hazardous waste. Sharps containers were safely stored.

Risk assessments on Control of Substances Hazardous to Health (COSHH) and safety data sheets were being kept for substances in addition to risk assessments. COSHH substances were being stored safely and securely. Access to staff only areas needs to be reviewed to ensure patient safety.

Fire extinguishers were available and had been serviced in the last 12 months, with a fire equipment maintenance contract in place and fire risk assessment evident. Fire signage was available. There was a health and safety policy in place.

Improvement needed

A review and actions must be taken in respect of making more secure the access to the stock room area and decontamination room.

Infection prevention and control

There were no concerns given by patients over the cleanliness of the dental practice; all patients that completed a questionnaire felt that, in their opinion, the dental practice was very clean. On the day of the inspection we found the practice was visibly well maintained and surgeries were clean, tidy and well organised.

We were satisfied with the arrangements to protect staff and patients from preventable healthcare associated infections at the dental practice. This is because we saw evidence that there were infection prevention and control measures in place. Examples included the following:

- Designated 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
- Instruments were stored and transported appropriately and their packaging dated to show when they had to be used.

A decontamination policy was in place and we saw evidence that staff were signing and dating to indicate that they had considered key policies. We found that inoculation immunity check status for staff members was available. However, further verification of inoculation immunity check status, was required for three staff.

The practice had recently undertaken an infection control audit, as recommended by the Welsh Health Technical Memorandum (WHTM) 01-05³ guidelines and relevant staff had completed decontamination refresher training on a five yearly basis. However, we noted that the practice's (Oasis Healthcare Limited) infection control policy still refers to the HTM 01-05 and not the WHTM 01-05 as required.

Improvement needed

Further verification of inoculation immunity check status is required for three staff. Documentary evidence to be forwarded to HIW.

The practice (Oasis Healthcare Limited) must amend its infection control policy for dental practices in Wales to refer to the Welsh Health Technical Memorandum (WHTM) 01-05 and not the HTM 01-05.

Medicines management

The practice had procedures in place showing how to respond to patient medical emergencies and these were displayed in relevant areas. All clinical staff had up to date cardiopulmonary resuscitation (CPR) training. The emergency drugs were stored securely and 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. A resuscitation policy

³ <http://www.wales.nhs.uk/sites3/docopen.cfm?orgid=254&id=232444>

was in place which included the location of the equipment and roles and responsibilities. There were designated and trained first aiders available at the practice.

Safeguarding children and adults at risk

The practice had taken steps to promote and protect the welfare and safety of children and vulnerable adults that might be at risk. This is because there were appropriate protection policies in place and safeguarding training was being provided for relevant staff.

There were arrangements in place for staff to raise any concerns and staff told us they felt able to do this in practice.

Medical devices, equipment and diagnostic systems

We looked at the clinical facilities in the surgeries and found that they contained appropriate equipment for the safety of patients and the dental team. We noted that the surgeries had been designed and organised to help the team work efficiently and were visibly very clean and in good condition.

We saw that the environment had been planned and laid out to ensure the safe use of radiation equipment. A radiation file was available at the practice with key information in one place. We saw documentation to show that X-ray machines had been regularly serviced to help ensure they were safe for use. We found that staff involved in taking radiographs had completed the required training, in accordance with the requirements of the General Dental Council and Ionising Radiation (Medical Exposure) Regulations (IRMER) 2000⁴.

Effective care

Safe and clinically effective care

Patients benefit from a practice that seeks to continuously improve the service provided. We saw that the practice engaged in relevant audits, including infection control and six monthly in-house radiographic and clinical notes audits.

⁴ http://www.legislation.gov.uk/uksi/2000/1059/pdfs/uksi_20001059_en.pdf

Quality improvement, research and innovation

The practice has regular audit visits conducted by the Oasis Healthcare Limited Internal Auditor and there is an annual clinical review audit undertaken by the Regional Clinical Support Advisor.

Information governance and communications technology

The storage of patient files was appropriate, to ensure the safety and security of personal data. All electronic files were being backed up regularly and access to computer screens was secure and discreet. A data protection policy was in place.

Record keeping

We viewed a sample of dental records of two dentists and spoke with both dental practitioners available on the day of our inspection. Overall, we found there was a very good quality of record keeping and patient care. No improvements were noted in this area and therefore the quality of clinical record keeping is to be commended.

Quality of management and leadership

We considered how services are managed and led and whether the workplace and organisational culture supports the provision of safe and effective care. We also considered how services review and monitor their own performance against the Health and Care Standards.

Smiles Dental Practice Pentwyn, is part of Oasis Healthcare Limited, which has a well established corporate team, which supports the dental team and practice manager in the day to day management of the practice. We found the practice to have good leadership and clear lines of accountability. We saw that a range of relevant policies were in place with the aim of ensuring the safety of staff and patients.

Staff told us they felt supported by senior practice staff and their colleagues and they had opportunities to attend relevant training. Staff we spoke with were committed to providing high quality care for patients.

Governance, leadership and accountability

Smiles Dental Practice Pentwyn, is part of Oasis Healthcare Limited, which has a well established corporate team, which supports the dental team and practice manager in the day to day management of the practice. Where we identified areas for improvement, the practice manager demonstrated a commitment to address these quickly. Patient information was being stored securely and safely in line with data protection.

Staff told us that they felt well supported in their roles by all members of the practice team. We found that staff were clear about their roles and responsibilities. Staff told us that they felt communication within the practice was good. We saw records of practice meetings that had been held on a regular basis with minutes being kept.

We advised the practice manager utilise the staff meeting format available which will capture, standing items, action points/owners and outcomes.

There were a range of policies and procedures in place with the aim of ensuring the safety of staff and patients.

Staff and resources

Workforce

We saw certificates that demonstrated staff had attended training on a variety of topics relevant to their role. Staff also confirmed that they were supported and encouraged by the management team to access training opportunities. We saw certificates to evidence that all clinical staff had completed training in areas highly recommended by the General Dental Council.

The practice had a settled and stable staff team, with good team working being reported and observed on the day of the inspection. We saw evidence that staff had received an appraisal of their performance within the last year and personal development plans identified as a result of their appraisals.

All relevant staff were registered with the General Dental Council. The dentists working at the practice provided private dental services and we saw their HIW registration certificates prominently displayed as required by the Private Dentistry (Wales) Regulation 2008 and we saw confirmation of indemnity cover.

Records were available that demonstrated staff had received immunisation against Hepatitis B to protect patients and themselves against infection.

There were systems in place to ensure that pre-employment checks of any new members of staff were carried out before they joined the practice, including Disclosure and Barring Service (DBS) clearance checks. DBS safeguarding checks were up to date for the four dentists in line with the private dental regulations.

4. What next?

Where we have identified improvements and immediate concerns during our inspection which require the service to take action, these are detailed in the following ways within the appendices of this report (where these apply):

- Appendix A: Includes a summary of any concerns regarding patient safety which were escalated and resolved during the inspection
- Appendix B: Includes any immediate concerns regarding patient safety where we require the service to complete an immediate improvement plan telling us about the urgent actions they are taking
- Appendix C: Includes any other improvements identified during the inspection where we require the service to complete an improvement plan telling us about the actions they are taking to address these areas

The improvement plans should:

- Clearly state when and how the findings identified will be addressed, including timescales
- Ensure actions taken in response to the issues identified are specific, measureable, achievable, realistic and timed
- Include enough detail to provide HIW and the public with assurance that the findings identified will be sufficiently addressed.

As a result of the findings from this inspection the service should:

- Ensure that findings are not systemic across other areas within the wider organisation
- Provide HIW with updates where actions remain outstanding and/or in progress, to confirm when these have been addressed.

The improvement plan, once agreed, will be published on HIW's website.

5. How we inspect dental practices

Dental practice inspections are usually announced. Dental practices receive up to twelve weeks notice of an inspection. This is so that arrangements can be made to ensure that the practice is running as normal, and that the inspection causes as little disruption to patients as possible.

Feedback is made available to practice representatives at the end of the inspection, in a way which supports learning, development and improvement at both operational and strategic levels.

We check how dental practices are meeting the [Health and Care Standards 2015](#). Any dentist working at the practice who is registered with HIW to provide private dentistry will also be subject to the provisions of the [Private Dentistry \(Wales\) Regulations 2008](#) and the [Private Dentistry \(Wales\) \(Amendment\) Regulations 2011](#). Where appropriate we consider how the practice meets these regulations, as well as the [Ionising Radiations Regulations 1999](#), the [Ionising Radiation \(Medical Exposure\) Regulations 2000](#) and any other relevant professional standards and guidance such as the [General Dental Council Standards for the Dental Team](#).

These inspections capture a snapshot of the standards of care within dental practices.

Further detail about how HIW inspects [dental practices](#) and the [NHS](#) can be found on our website.

Appendix A – Summary of concerns resolved during the inspection

The table below summaries the concerns identified and escalated during our inspection. Due to the impact/potential impact on patient care and treatment these concerns needed to be addressed straight away, during the inspection.

Immediate concerns identified	Impact/potential impact on patient care and treatment	How HIW escalated the concern	How the concern was resolved
No Immediate concerns were identified on this inspection.			

Appendix B – Immediate improvement plan

Service: Smiles Dental Practice Pentwyn, Oasis Healthcare Limited

Date of inspection: 7 September 2017

The table below includes any immediate concerns about patient safety identified during the inspection where we require the service to complete an immediate improvement plan telling us about the urgent actions they are taking.

Immediate improvement needed	Standard	Service action	Responsible officer	Timescale
No immediate assurance issues were identified at this inspection.				

The following section must be completed by a representative of the service who has overall responsibility and accountability for ensuring the improvement plan is actioned.

Service representative:

Name (print):

Job role:

Date:

Appendix C – Improvement plan

Service: Smiles Dental Practice Pentwyn, Oasis Healthcare Limited

Date of inspection: 7 September 2017

The table below includes any other improvements identified during the inspection where we require the service to complete an improvement plan telling us about the actions they are taking to address these areas.

Improvement needed	Standard	Service action	Responsible officer	Timescale
Quality of the patient experience				
More health promotion information needs to be available for patients in the waiting area.	Health and Care Standards 1.1 and 4.2 Private Dentistry (Wales) Regulations 2008 Regulation 14 (1) (a)	We have ordered several leaflets for the practice including smoking cessation, oral cancer awareness, children's oral health, care for orthodontic appliances, diet advice. Order placed on 15/10/2017 – will display in waiting room once delivered.	Tracey Hellier (Lead Nurse) Nicola Hooper (Practice Manager)	30 November 2017

Improvement needed	Standard	Service action	Responsible officer	Timescale
Delivery of safe and effective care				
A review and actions must be taken in respect of making more secure the access to the stock room area and decontamination room.	Health and Care Standards 2.1 Private Dentistry (Wales) Regulations 2008 14 (1) (d)	A code lock has been fitted to the stock room door – fitted on 21/9/2017	Tracey Hellier (Lead Nurse) Nicola Hooper (Practice Manager)	Completed
Further verification of inoculation immunity check status is required for three staff. Documentary evidence to be forwarded to HIW.	Health and Care Standards 2.4 Private Dentistry (Wales) Regulations 2008 14 (1) (b)	All 3 staff members are in communication with the local occupational health department and are awaiting written confirmation of immunity check status details, advised this detail may take some time to be responded to.	Nicola Hooper (Practice Manager)	31 December 2017
The practice (Oasis Healthcare Limited) must	Health and	This has been passed to Oasis Dental	Nicola Hooper	31 December

Improvement needed	Standard	Service action	Responsible officer	Timescale
amend its infection control policy for dental practices in Wales to refer to the Welsh Health Technical Memorandum (WHTM) 01-05 and not the HTM 01-05.	Care Standards 2.4 Private Dentistry (Wales) Regulations 2008 14 (1) (b)	Care Head Office team to review and are awaiting a response.	(Practice Manager)	2017
Quality of management and leadership				
No issues identified.				

The following section must be completed by a representative of the service who has overall responsibility and accountability for ensuring the improvement plan is actioned.

Service representative

Name (print): Nicola Hooper

Job role: Practice Manager

Date: 12/10/2017