

General Dental Practice Inspection (Announced)

The Parade Specialist Dental Centre

Inspection date: 26 February 2018

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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 The Parade Specialist Dental Centre at 23 The Parade, Roath, Cardiff CF24 3AB on the 26 February 2018.

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

HIW explored how the practice complied with the Private Dentistry (Wales) Regulations 2008 and the Private Dentistry (Wales) (Amendment) Regulations 2011 and other relevant legislation and guidance.

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 the staff at The Parade Specialist Dental Centre provided safe and effective care to its patients.

The practice was patient focussed and during the inspection we observed staff being friendly and professional towards patients.

We saw evidence of good leadership and the practice had the necessary policies and procedures in place to support the practice, patients and staff.

The practice needs to ensure that patient records are maintained in accordance with professional standards for record keeping .

This is what we found the service did well:

- The practice is committed to providing a positive experience for its patients
- There was evidence of good management and leadership from the practice manager, area manager and clinical advisor
- The practice had dedicated and appropriate facilities for the decontamination of dental instruments
- Dental equipment was well maintained and regularly serviced.

This is what we recommend the service could improve:

- All staff to receive training in cardiopulmonary resuscitation
- Remedy the signs of wear and tear in the clinical areas
- Ensure all clinical staff have documentation confirming they have the necessary immunity from Hepatitis B.
- Records are to be maintained in accordance with professional standards for record keeping, namely the Private Dentistry (Wales) Regulations 2008 and the General Dental Council Guidance.

3. What we found

Background of the service

The Parade Specialist Dental Centre is a private only dental practice.

The practice staff team includes four dentists, three hygienists, seven dental nurses, three receptionists and one practice manager.

A range of private dental services are provided.

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.

We found the practice was committed to providing a positive experience for their patients. All the patients who completed the HIW questionnaire indicated that they were satisfied with the care and treatment they had received.

The practice needs to ensure that its complaints policy and price list are clearly displayed.

Prior to the inspection, we invited the practice to distribute HIW questionnaires to patients to obtain views on the dental services provided. A total of 15 questionnaires were completed. Patient comments included the following:

Very good

Staff and service is second to none. Dentists and nurses are very informative and always happy to help

Staying healthy

Health promotion information assists in supporting patients to take responsibility for their own health and wellbeing. In the waiting area we saw a selection of leaflets available offering information on treatments provided by the practice. In addition there was a patient information folder which gave a selection of health promotion information. We were told that additional leaflets providing health promotion information had been ordered and would be displayed in the waiting area.

Dignified care

All the patients who completed a questionnaire told us that staff were always polite to them when they visited the practice.

We were told by staff that if there was a need to have a private conversation or telephone conversation with a patient this could be conducted in the office to the rear of the reception area, maintaining patient confidentiality.

All the dental surgeries had doors which could be closed. During the inspection it was noted that one surgery door was not completely closed whilst a patient was receiving treatment. We recommend staff ensure all surgery doors are closed when patients are being treated, affording them privacy and dignity.

Improvement needed

Staff to ensure surgery doors are closed securely whilst patients are receiving treatment.

Patient information

The majority of the patients who completed a questionnaire told us that they had been provided with appropriate information about their treatment including the risks, treatment options, the costs for services and after care services.

At the time of the inspection we saw a price list setting out private dental treatment costs contained in the patient information folder. It is possible that patients do not look at the folder or are aware of its contents. The practice must ensure price lists are clearly displayed including a list of basic items and provide clear information on prices. Patients should not have to ask for this information.

Outside the practice was a sign displaying the practising dentists' details and the practice's opening hours. This was not accurate and we were told that new signage had been ordered.

Improvement needed

The practice to clearly display a price list setting out private dental treatment costs.

The practice to display the names and qualifications of all resident dentists in an area where it can clearly be seen.

Communicating effectively

During the inspection we observed staff being polite and courteous when speaking to patients in person and on the telephone.

The practice has a website, which was in line with General Dental Council (GDC) ethical advertising guidance¹ but its complaints policy included contact details for the Care Quality Commission. We recommend the policy is amended to include contact details for the registration authority in Wales, namely HIW.

Improvement needed

The practice to ensure that its website is updated to include contact details for the registration authority in Wales in its complaints policy.

Timely care

Details of how patients could access emergency dental care when the practice was closed was displayed at outside the practice. This information was also provided on the practice's answerphone message.

Staff told us that during its opening hours the practice made efforts to ensure patients were seen in a timely manner. If a dentist was running late staff would advise the patients waiting of any delay.

Individual care

Planning care to promote independence

A review of patient records showed that patients are asked about their medical history at the time of their visit.

People's rights

The practice had an equal opportunities policy, bullying and harassment policy and fair and accessible care policy in place and staff had received training in equality and diversity.

Access to the practice was restricted for patients with mobility difficulties. Patients in wheelchairs and or with mobility difficulties would only be able to

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¹ https://www.gdc-uk.org/api/files/Guidance%20on%20advertising%20(Sept%202013).pdf

access the practice via its rear entrance and only access the hygienist's surgery situated on the lower ground floor. There were then stairs to the reception and waiting areas and patient toilet.

Staff told us that patients in wheelchairs or with mobility difficulties were referred to the sister practice in Cardiff Bay.

Listening and learning from feedback

Of the 15 patients who completed a questionnaire, 11 said they would know how to raise a concern or complaint about the services they receive at the dental practice.

The practice had a complaints policy in place that addressed private dental treatment. The policy contained reference to the Care Quality Commission, the registration authority for England. To be compliant with the Private Dentistry Regulations² the policy needs to contain reference to the registration authority for Wales, HIW. The complaints policy was contained in the patient information folder situated in the waiting area. We would recommend it is clearly displayed in the waiting and or reception areas.

The practice had a process and system in place to record, monitor and respond to any formal complaints they received. They told us they also record the verbal/informal concerns received on patient notes. It is recommended that patients' feedback is kept separate from their medical notes and recorded in a separate folder, together and where appropriate with the practice's response and or actions. This would enable the practice to identify any recurring themes. The practice also reviews comments submitted via the internet.

Improvement needed

The practice is to ensure its complaints policy is compliant with the Private Dentistry Regulations contains reference to the registration authority for Wales.

The practice is to cease recording patients' informal feedback in patient records

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

and to make alternative arrangements for recording such information.

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. We noted that clinical facilities were well equipped although there were some signs of wear and tear which needed addressing.

There were arrangements in place for the safe use of X-ray equipment and there was evidence of ongoing and regular maintenance.

Resuscitation equipment and emergency drugs were available at the practice and there were systems in place to help ensure they were safe for use.

The practice needs to ensure patient medical records are completed in keeping with professional standards for record keeping at each visit

Safe care

Managing risk and promoting health and safety

Overall we found arrangements were in place to protect the safety and well being of staff working at, and people visiting the practice.

Although the structure of the building appeared to be well maintained, there were signs of wear and tear in some of the surgeries and decontamination room. We were told of plans to rectify the flooring in two of the surgeries and address the damp and re-paint the walls in the decontamination room by the end of March 2018. In addition there were signs of dust on higher surfaces in two of the surgeries.

There were no concerns expressed by the patients who completed a questionnaire, about the cleanliness of the practice. We observed all public access areas to be clean and uncluttered.

We noted that regular testing of portable appliances (PAT) was undertaken to help ensure the safe use of small electrical appliances within the practice. We saw fire extinguishers were available at various locations around the building and we noted that servicing had been carried out within the last twelve months to ensure that the equipment worked properly. Directions for the emergency exit were visible.

We saw that contracts were in place for the safe transfer and disposal of hazardous (clinical), non-hazardous (household) and amalgam waste.

Under the Control of Substances Hazardous to Health Regulations 2002, employers need to either prevent or reduce staff exposure to substances that are hazardous to their health. We saw that the practice had a 'Control of Substances Hazardous to Health' (COSHH) controls checklist and relevant safety data sheets, providing information on substances that are 'dangerous for supply' and instructions for safe use in respect of other substances used within the practice. We noted this was last reviewed in 2017.

The practice had an accident reporting policy and a Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) book which was completed when an accident occurred.

Improvement needed

The practice is to address any signs of wear and tear in all clinical areas.

The practice is to ensure all clinical areas are thoroughly cleaned and free of dust.

Infection prevention and control

The practice had dedicated facilities for the cleaning and sterilisation (decontamination) of dental instruments as recommended by the Welsh Health

Technical Memorandum (WHTM) 01-05³. Despite the area of peeling paint which was scheduled to be addressed before end March 2018, the room was visibly clean and tidy and we saw evidence that appropriate infection prevention and control measures were in place. Pre-sterilisation cleaning and sterilisation was undertaken in accordance with WHTM and manufacturers' guidance. We saw evidence that the log books for checking the sterilisation equipment were maintained and there was an infection control policy in place.

Staff had access to and used personal protective equipment (PPE) when working in the decontamination areas.

We saw evidence that the practice had recently undertaken an infection control audit in accordance with WHTM 01-05.

Medicines management

The practice had procedures in place to deal with patient emergencies and, with the exception of two dental nurses, all staff had received training within the last 12 months, on how to deal with medical emergencies and how to perform cardiopulmonary resuscitation (CPR). We were told that one dental nurse had been booked on a course and the other would undertake relevant training on her return from maternity leave. The practice had two appointed first aiders. A resuscitation policy was in place and we recommend this is amended to include roles and responsibilities for staff.

The staff held appropriate emergency drugs and emergency resuscitation equipment in accordance with Resuscitation Council (UK) guidance⁴. These were stored securely and could be accessed easily.

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³ 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

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

We noted that the practice had in place a system to check that emergency drugs and equipment were in date and ready for use. We also noted that prescription pads were kept securely

Improvement needed

All staff to undertake relevant training in dealing with medical emergencies and CPR.

The practice to amend its resuscitation policy to include roles and responsibilities for staff.

Safeguarding children and adults at risk

The practice had policies and procedures in place to promote and protect the welfare of children and vulnerable adults, containing the contact details for the relevant safeguarding agencies. With the exception of the dental nurse on maternity leave, all staff had completed training in the protection of vulnerable adults and protection of children.

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

Improvement needed

All staff to undertake relevant training in the protection of vulnerable adults and protection of children.

Medical devices, equipment and diagnostic systems

We looked at the clinical facilities in all of the surgeries and found that they contained appropriate equipment for the safety of patients and the dental team.

The radiological equipment was in working order and controlled areas had been identified. We saw documentation to show that the X-ray machines were regularly serviced. The radiation protection file was maintained and contained all the essential information.

In accordance with the requirements of the General Dental Council⁵ and Ionising Radiation (Medical Exposure) Regulations (IR(ME)R) 2000⁶ all clinical staff had completed the required training.

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, clinical record keeping, waiting times and implant success.

Quality improvement, research and innovation

There are no arrangements in place for peer reviews and would recommend formal and regular meetings are arranged between the dentists for this purpose.

The practice might wish to consider applying for the Deanery Maturity Matrix Dentistry practice development tool⁷. The Maturity Matrix (MMD) Tool is a dental practice team development tool to allow the team to focus on how they work.

Improvement needed

The dentists to arrange formal and regular meetings for the purpose of peer review.

The practice to consider applying for the Deanery Maturity Matrix Dentistry practice development tool

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⁵ General Dental Council - http://www.gdc-uk.org/Pages/default.aspx

⁶ http://www.legislation.gov.uk/uksi/2000/1059/pdfs/uksi 20001059 en.pdf

⁷ <u>https://dental.walesdeanery.org/improving-practice-quality/maturity-matrix-dentistry</u>

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. Paper records were stored securely in the practice manager's office. A data protection policy was in place

Record keeping

We reviewed a sample of patient records. We found that in some cases clinical findings were not always being recorded. In addition there were instances where radiographs were not being justified or graded. We would recommend that the practice undertake a comprehensive radiograph audit.

Improvement needed

In keeping with professional standards for record keeping, the practice should ensure that patient records are completed at each patient visit to record comprehensive information on examination, advice and treatment provided and relevant X-ray information.

The practice is to undertake a radiograph audit

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 Private Dentistry Regulations and relevant professional standards.

During the inspection we found evidence of good leadership and lines of accountability. The practice manager was responsible for the day to day management of the practice.

The practice had a comprehensive range of relevant policies and procedures in place to ensure the practice and staff are supported and committed to providing a high quality service to patients.

The practice needed to introduce a formal appraisal system for the benefit of its staff.

Governance, leadership and accountability

The Parade Specialist Dental Care is part of the BUPA group of dental practices in England and Wales. Day to day management is provided by the practice manager. We found the practice had good leadership with all staff understanding their roles and responsibilities.

The practice was well organised with good record keeping in all areas. There was a wide range of policies and procedures in place to ensure the safety of both staff and patients. We noted that the policies all had review dates and there was also provision for staff to evidence that they had read the policies.

All clinical staff were registered to practice with the General Dental Council and had appropriate indemnity insurance cover in place. We saw all the dentists' registration certificates clearly displayed as required by the Private Dentistry (Wales) Regulations 2008. The practice's public liability insurance certificate was not on display. We recommend that this is clearly visible to all visitors to the practice.

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 references, right to work in the UK, medical questionnaires and qualifications.

Improvement needed

The practice to display its public liability insurance certificate.

Staff and resources

Workforce

Staff told us that they enjoyed working in the practice and we observed a strong rapport between all practice staff. We noted that all staff had employment contracts and we saw evidence on staff files that the practice had an induction programme in place. We were told that staff appraisals had not been conducted for some time. Appraisals will allow for regular, planned discussion of numerous issues. These should then be recorded and signed as an agreed record of the appraisal, allowing for review points and assessment of progress. The practice manager told us that she would be implementing a programme of regular staff appraisals for clinical and non-clinical staff.

We saw certificates that evidenced staff had attended training on a range of topics relevant to their roles and meeting the Continuing Professional Development (CPD) requirements. We were told that arrangements would be made for one dental nurse, who was on maternity leave, to attend appropriate training on her return to work.

The practice holds separate meetings for the dentists, dental nurses and non-clinical staff after which minutes are drawn up and circulated to each group. We recommend a programme of staff meetings are introduced, involving both clinical and non-clinical staff. The practice also provides in-house training and an opportunity for staff to learn from each other, for example, what to do if a patient faints or suffers anaphylaxis.

The Regulations for Private Dentistry require that all dentists providing private dental services in Wales have a Disclosure and Barring Service (DBS) Certificate issued within the previous three years. We saw evidence that DBS clearance checks had been carried out for both clinical and non-clinical staff. Two dentist's and one hygienist's certificates were out of date and we were told that applications had been submitted.

Clinical staff are required to be immunised against Hepatitis B⁸ to protect patients and themselves against infection. The practice was unable to provide proof of immunity for one dentist, one hygienist and two dental nurses. The practice must obtain confirmation that all clinical staff have the necessary immunity from Hepatitis B.

Improvement needed

The practice to ensure that all staff have access to and complete all relevant training to enable them to meet their CPD requirements.

The practice to implement a programme of staff meetings involving both clinical and non-clinical staff

The practice must obtain confirmation that all clinical staff have the necessary immunity from Hepatitis B.

⁸ Welsh Health Circular (2007) 086

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

Our dental practice inspections are usually announced. Dental practices will receive up to 12 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.

Any dentist working at the practice who is registered with HIW to provide private dentistry will also be subject to the provisions of the <u>Private Dentistry (Wales)</u> <u>Regulations 2008</u> and the <u>Private Dentistry (Wales) (Amendment) Regulations 2011</u>. Where appropriate we consider how the practice meets these regulations, as well as the <u>Ionising Radiations Regulations 1999</u>, the <u>Ionising Radiation (Medical Exposure) Regulations 2000</u> and any other relevant professional standards and guidance such as the <u>General Dental Council Standards for the Dental Team</u>.

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

Further details about how HIW inspects <u>dental practices</u> and <u>independent</u> healthcare services 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 or	n this inspection		

Appendix B – Immediate improvement plan

Service: The Parade Specialist Dental Centre

Date of inspection: 26 February 2018

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.

officer

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: The Parade Specialist Dental Centre

Date of inspection: 26 February 2018

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	Regulation/ Standard	Service action	Responsible officer	Timescale
Quality of the patient experience				
Staff to ensure surgery doors are closed securely whilst patients are receiving treatment.	Private Dentistry (Wales) Regulations 2008 Regulation 14 (1) (d)	This action commenced and was immediately resolved on the inspection day with the team. A team meeting was held the following day. All staff are aware that the doors are to be closed whilst patients are receiving treatment, in which will continue moving forward.	Tracy Blackmore	26/02/2018
The practice to clearly display a price list setting out private dental treatment costs.	Private Dentistry (Wales) Regulations	A Price list is now visible in a photo frame on the wall of the waiting room.	Tracy Blackmore	27/02/2018

Improvement needed	Regulation/ Standard	Service action	Responsible officer	Timescale
	2008 Regulation 14			
The practice to display the names and qualifications of all resident dentists in an area where it can clearly be seen.	Private Dentistry (Wales) Regulations 2008 Regulation 14	This was corrected on the day of the inspection.	Tracy Blackmore	26/02/2018
The practice to ensure that its website is updated to include contact details for the registration authority in Wales in its complaints policy.	Private Dentistry (Wales) Regulations 2008 Regulation 15	This has now been completed by our head office. The link is listed on the page of quality of care referring to the HIW. https://www.oasisdentalcare.co.uk/platin um/parade-dental/about-us/quality-of-care/	Tracy Blackmore	16/04/2018
The practice is to ensure its complaints policy is compliant with the Private Dentistry Regulations contains reference to the registration authority for Wales.	Private Dentistry (Wales) Regulations 2008 Regulation 15	Our complaints policy now shows this, and is on display within the waiting room of the practice	Tracy Blackmore	26/02/2018

Improvement needed	Regulation/ Standard	Service action	Responsible officer	Timescale
The practice is to cease recording patients' informal feedback in patient records and to make alternative arrangements for recording such information.	Private Dentistry (Wales) Regulations 2008	This has commenced with immediate, effect and all team members are aware of this.	Tracy Blackmore	27/02/2018
	Regulation 16			
Delivery of safe and effective care				
The practice is to address any signs of wear and tear in all clinical areas.	Private Dentistry (Wales) Regulations 2008	This has been rectified and flooring replaced.	Tracy Blackmore	20/04/2018
	Regulation 14 (1) (d)			
The practice is to ensure all clinical areas are thoroughly cleaned and free of dust.	Private Dentistry (Wales) Regulations 2008 Regulation 14	This was an unused surgery in which was empty in cupboards, and surfaces and not due on the cleaning rota for another week. All clinical areas are currently dust free under the health and safety policy, and	Tracy Blackmore	27/02/2018

Improvement needed	Regulation/ Standard	Service action	Responsible officer	Timescale
	(1) (d)	working at height policy		
All staff to undertake relevant training in dealing with medical emergencies and CPR.	General Dental Council – Continuing Professional Development	All staff have now completed the CPR and medical emergency training. Our maternity leave nurse has now returned back to work and the training has been undertaken.	Tracy Blackmore	16/04/2018
The practice to amend its resuscitation policy to include roles and responsibilities for staff.	Independent Health Care (Wales) Regulations 2011	This has now been included and discussed within a staff meeting	Tracy Blackmore	27/02/2018
All staff to undertake relevant training in the protection of vulnerable adults and protection of children.	General Dental Council – Continuing Professional Development	Our maternity leave nurses has now returned and completed the training	Tracy Blackmore	02/04/2018
The dentists to arrange formal and regular meetings for the purpose of peer review.	Private Dentistry (Wales) Regulations 2008	Discussed and completed	Tracy Blackmore & all dentists	06/4/2018

Improvement needed	Regulation/ Standard Regulation 14 (2)	Service action	Responsible officer	Timescale
The practice to consider applying for the Deanery Maturity Matrix Dentistry practice development tool	Private Dentistry (Wales) Regulations 2008 Regulation 14 (2) GDC: Standards for the Dental Team Standard 6.6	Our current practice policies already covers the subjects within the Deanery Maturity Matrix Dentistry practice development tool	Tracy Blackmore	27/02/2018
In keeping with professional standards for record keeping, the practice should ensure that patient records are completed at each patient visit to record comprehensive information on examination, advice and treatment provided and relevant X-ray information.		This action was discussed within a meeting the following day and formally introduced with immediate effect	Adrian Binney, Michael Page	27/02/2018
The practice is to undertake a radiograph audit	Private	This was completed the following day	Rps	27/02/2018

Improvement needed	Regulation/ Standard	Service action	Responsible officer	Timescale
	Dentistry (Wales) Regulations 2008	after the inspection, following the current radiograph audit held on November 2017		
	Regulation 14 (2)			
Quality of management and leadership				
The practice to display its public liability insurance certificate.	Independent Health Care (Wales) Regulations 2011	This is now visible within the reception area of the practice.	Tracy Blackmore	27/02/2018
	Health and Safety at Work Act 1974			
The practice to ensure that all staff have access to and complete all relevant training to enable them to meet their CPD requirements.		The staff continue to have access to all cpd and relevant training to meet their CPR requirements	Tracy Blackmore	2/4/2018

Improvement needed	Regulation/ Standard	Service action	Responsible officer	Timescale
The practice to implement a programme of staff meetings involving both clinical and non-clinical staff	GDC: Standards for the Dental Team Standard 6.6.2	This has commenced	Tracy Blackmore	27/02/2018
The practice must obtain confirmation that all clinical staff have the necessary immunity from Hepatitis B.		Our maternity leave nurse has now returned and a copy of her hepatitis B immunity is now present	Tracy Blackmore	02/04/2018

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): Tracy Blackmore

Job role: Practice Manager

Date: 19/04/2018