

General Dental Practice Inspection (announced)

Cwm Taf University Health
Board, Gentle Dental
Aberdare

9 December 2014

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1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection to Gentle Dental at 7 Victoria Square Aberdare within the area served by Cwm Taf University Health Board on 9 December 2014.

During the inspection we considered and reviewed the following areas:

- Patient experience
- Delivery of Standards for Health Services in Wales
- Management and leadership
- Quality of environment

2. Methodology

HIW inspections of General Dental Practices seek to establish how well practices meet the standards in *Doing Well, Doing Better: Standards for Health Services in Wales*¹.

During the inspection we reviewed documentation and information from a number of sources including:

- Information held by HIW
- Interviews of staff including dentists and administrative staff
- Conversations with nursing staff
- Examination of a sample of patient medical records
- Examination of practice policies and procedures
- Examination of equipment and premises
- Information within the practice information leaflet and website

¹ Doing Well, Doing Better: Standards for Health Services in Wales came into force from 1st April 2010. The framework of standards sets out the requirements of what is expected of all health services in all settings in Wales. www.weds.wales.nhs.uk/opendoc/214438

- 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 will be notified to the dental practice and to the health board via an immediate action letter. Any such findings will be detailed, along with any other recommendations made, within Appendix A of the inspection report.

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

3. Context

Gentle Dental provides mainly NHS and some private services to patients in the Aberdare area of Rhondda Cynon Taf. The practice forms part of dental services provided within the geographical area known as Cwm Taf University Health Board. The practice employs a staff team which includes a practice manager, two dentists, one trainee dentist (waiting to start), and four nurses (including one trainee), two of whom also work on reception.

A range of services are provided. These include:

- General dentistry
- Teeth whitening
- Dentures
- Crowns

Gentle Dental has applied to be a training practice for a newly qualified dentist and is currently awaiting approval from the Wales Deanery (School of Postgraduate Medical and Dental Education). The practice also has plans to provide a private orthodontic service and dental implants².

² Dental implants are artificial tooth roots placed in the jaw to hold a replacement tooth or bridge.

4. Summary

HIW explored how Gentle Dental Aberdare meets the standards of care in the Doing Well, Doing Better: Standards for Health Services in Wales.

Overall, patients told us that they were satisfied with the service provided at the practice and felt they received enough information about their treatment. We found evidence the practice assessed and acted upon patient views. Patient feedback from the HIW questionnaires was positive.

We found the practice provided a safe service to patients and had suitable systems in place to protect patients from cross-infection.

The practice was well run by the practice manager and principal dentist and had appropriate management systems and processes in place to ensure patient safety.

We found the practice was generally clean and tidy and provided a safe environment for patients to receive treatment. We noted the practice was restricted by the layout of the building.

5. Findings

Patient Experience

Overall, patients told us that they were satisfied with the service provided at the practice and felt they received enough information about their treatment. We found evidence the practice assessed and acted upon patient views. Patient feedback from the HIW questionnaires was positive.

Seventeen HIW patient questionnaires were completed prior to the date of inspection. All patients said they were generally satisfied with the care they received at the practice. The majority of patients told us they did not experience any delay in being seen by the dentist. Patients said they felt welcomed by the staff and we saw reception and nursing staff talking to patients in a friendly and professional way.

A sample of patient comments included the following:

“I’m very nervous coming to the dentist, my dentist makes me feel at ease. Reception staff are always kind and helpful.”

“The dentist is very good. The receptionist is always friendly and obliging.”

“Good dental team for me and my family.”

“Always made to feel [at] ease and well informed about treatment.”

“Dentists and receptionists very kind and very helpful, any problems sorted straight away with much kindness.”

“Good treatment, nice dentist.”

All patients said the dentist explained the treatment they needed in enough detail; only one patient commented they “sometimes” received enough information. The dentist told us treatment options were discussed with patients and they were given the opportunity to ask questions. We looked at a sample of patient records and found notes of treatment options discussed with patients. One patient told us, “yes, my dentist explains to me all about my treatment and makes sure I understand what I’m about to have done”.

Twelve patients said they knew how to access ‘out of hours’ dental services, but seven patients said they were unsure. The emergency phone number for ‘out of hours’ dental services was clearly displayed in the window of the practice

and patients told us there was a number provided on the practice's answer phone message. We called the practice out of hours to confirm this was the case.

The practice had a policy for patients to raise complaints and this was displayed in the reception area. Thirteen patients said they did not know how to make a complaint. However, patients also said they felt no reason to complain and would be happy to approach staff with any concerns. Given the comments received, the practice may wish to explore how patients are informed of the complaints procedure.

There was a suggestions box on the reception desk with a short patient feedback questionnaire. Although there was nothing wrong with this questionnaire, we suggested it could be improved by adding an area for patients to include additional comments. This would allow patients to freely express their views. The practice agreed to make this change.

We saw a sample of recently completed patient feedback questionnaires in the practice records. Staff told us patient comments were discussed during staff meetings and gave an example of how patient feedback was acted upon. The principal dentist explained how patient complaints about the stairs led the practice to put up 'mind your head' signs and add foam padding to low ceilings on the staircase, to prevent patients from hurting themselves. We recognised that due to the age and narrow layout of the building, there was a limited amount the practice could do to improve this issue. Patients with mobility difficulties and wheelchair users could be treated in the ground floor surgery.

We saw evidence of patient opinion audits, where a sample of patients seen by a particular dentist were asked to complete a feedback questionnaire. The results were discussed within the staff team and the dentists were made aware of patient's views. This was a good example of how the practice sought patient views and evaluated the quality of the service they provided.

Staff told us they occasionally used language line (a language translation service) for patients who could not speak English. A poster for language line was located in the reception area and reception staff had a copy by the telephone. This meant that patients whose first language is not English could successfully communicate their needs to staff via a translator.

Delivery of Standards for Health Services in Wales

We found the practice provided a safe service to patients and had suitable systems in place to protect patients from cross-infection.

We looked at a sample of five patient records for each dentist and found they were comprehensive and of a similar style. This means that patient treatment was recorded consistently at the practice and ensured continuity of care, if a patient needed to be seen by another dentist. We also noticed the practice used a red/amber/green colour coding system on patient notes, to help easily identify patients who needed extra attention. We found there was a good system for ensuring patients' medical histories were checked at each appointment.

We found suitable arrangements were in place for the safe use of radiographic equipment. All relevant documentation, including safety checks, maintenance and testing and staff training were available and up-to-date.

Staff had access to appropriate resuscitation equipment and drugs in the event of a patient emergency (collapse) at the practice. This was located on the ground floor. We suggest the practice consider the ease of transport of the resuscitation kit from the ground floor to the upstairs surgeries. There was a suitable system to replace expired drugs using a check list that was regularly updated. Oxygen cylinders were also checked regularly and levels noted. However, we noticed that glucagon (a drug used for patients with diabetes experiencing dangerously low blood sugar levels) was being stored separately from the rest of the emergency drugs, in the upstairs refrigerator. This may result in a delay in treating patients in an emergency.

Recommendation

The practice should consider the potential risk to patients of separating drugs and resuscitation equipment in the event of an emergency. The practice should consult the manufacturer regarding the storage of glucagon and if this needs to be refrigerated.

The practice had suitable arrangements in place for the handling, storage and disposal of hazardous waste. A current clinical waste disposal contract was in place. We also saw a waste handling audit had been conducted by the waste disposal company. The practice told us how this audit helped them to change some areas of their practice to comply with the latest guidelines.

The practice had a dedicated room for the cleaning and sterilisation of dental instruments. Appropriate hand washing facilities and disposable items were

available to reduce the risk of cross infection. We watched two nurses complete a cleaning cycle and found the system to be satisfactory. However, we noted the nurses did not take the same approach to the protective equipment they wore (e.g. gloves) when carrying out this process.

Recommendation

The practice should ensure all staff are aware of the appropriate personal protective equipment they need to wear when cleaning and decontaminating instruments.

Dental instruments were suitably stored and transported around the practice. Mandatory decontamination records had been maintained and the equipment being used was visibly in good condition. However, we found domestic material was being used to test a piece of cleaning equipment, which may not be as reliable as materials specifically designed for this purpose.

Recommendation

See Appendix A for recommendation regarding the materials used for testing cleaning equipment.

The practice told us one of the dentists was waiting for final approval to start providing dental implant treatments. We advised the practice to carefully consider additional infection prevention and control measures that may be needed for this procedure to continue protecting patients against the risk of infection.

Whilst the practice have made steps towards improving the decontamination process, such as installing a dedicated decontamination room and conducting infection control audits, they should develop a plan for progression to best practice in accordance with Welsh Health Technical Memorandum³ (WHTM) 01-05 guidelines.

Recommendation

The practice should develop a plan of how they will progress to best practice in accordance with WHTM 01-05 guidelines.

³ The Welsh Health Technical Memorandum 01-05 is a set of guidelines intended to raise the quality of decontamination (cleaning and sterilisation) work in primary care dental services.

We looked at the clinical facilities of each surgery within the practice and these contained relevant equipment for the safety of patients and staff. However, we saw the patient chair in the upstairs surgery needed to be upgraded to allow for effective decontamination.

Recommendation

The practice should ensure that improvements are made to the patient chair in the upstairs surgery to allow for effective decontamination.

Management and Leadership

The practice was well run by the practice manager and principal dentist and had appropriate management systems and processes in place to ensure patient safety.

The practice had been acquired by the new owner, the principal dentist, in January 2013. Gentle Dental provides services to mainly NHS patients, with a small number of private patients. The practice is well run by the practice manager and principal dentist.

We felt the practice manager and principal dentist provided good management and leadership to the staff team. Staff told us they were happy in their roles, felt supported by the practice and were able to freely express any concerns.

Staff meetings were conducted monthly, with a range of topics discussed and we saw a sample of meeting notes to confirm this. For example, staff were reminded during a staff meeting about the importance of using the correct equipment when transporting any instruments. The principal dentist provided examples of lessons learnt at the practice. For example, due to a needle stick injury incurred by one of the nursing staff, practice was changed so the dentists were responsible for handling needles once they had been used and for their disposal, rather than nurses.

We found the practice had a range of relevant policies, procedures and maintenance certificates in place. The practice had a suitable system in place to ensure policies and procedures were regularly updated and staff were aware of them. The dental surgery recorded any incidents and injuries to staff and patients in an appropriate accident book.

Staff told us they had been supported with training and were encouraged to attend courses for their continued professional development. We looked at a sample of staff training records, these confirmed staff had access to a range of training opportunities relevant to their role. We also saw evidence of annual staff appraisals and staff confirmed appraisals had taken place.

There were induction programmes for new and temporary staff. The principal dentist told us that agency staff were only used occasionally. However, they were planning to employ a locum dentist, whilst the principal dentist was on maternity leave. We discussed the considerations that would be needed to ensure continued management and leadership whilst the principal dentist was away. Continued supervision arrangements for trainee staff were in place for this period.

We were told that all staff had completed training in child protection and the protection of vulnerable adults. We saw evidence of hepatitis B vaccinations and immunity records within staff files, which means that the practice had taken appropriate steps to protect staff and patients.

Staff we spoke to were highly motivated and positive about the practice and dental team. The dentist was also very positive about the support they received from the principal dentist and said they had improved their way of working as a result.

We saw the complaints procedure was compliant with the Private Dentistry Regulations 2008. However, the timescale for responding to complaints needed to be consistent with the NHS complaints procedure 'Putting Things Right'⁴. The practice manager agreed to correct this.

Recommendation

The practice should ensure the complaints procedure is consistent with 'Putting Things Right'.

We looked at a sample of complaint records kept by the practice. The practice manager told us all complaints to date had not been made directly to the practice, but had come through the health board. Not all correspondence was kept within the complaints file. We advised the practice to keep all complaint correspondence (including email and telephone) together and to clearly record the actions taken, to make this easier to review.

⁴ 'Putting Things Right' are the arrangements in place for handling and responding to concerns about care and treatment provided by the NHS in Wales.

Quality of Environment

We found the practice was generally clean and tidy and provided a safe environment for patients to receive treatment. We noted the practice was restricted by the layout of the building.

The practice is located in a townhouse in the main shopping area of Aberdare town centre. The building consists of four floors, including a basement and attic used for storage. There were no dedicated car parking spaces at the practice premises, but parking was available at nearby public car parks. Disabled parking was available on the opposite side of the road to the practice.

We noticed that the names of the dentists at the practice were displayed on the door to the building, along with the out of hours numbers and opening times. However, the General Dental Council registration numbers of the dentists were not displayed at the practice in accordance with guidelines.

Access to the practice is suitable for wheelchair users as the doorways into the building and to the patient waiting area were appropriately wide. However, there was a small step outside the front door. The reception area, main waiting room and a large surgery were located on the ground floor. The ground floor areas were level throughout, meaning patients with mobility difficulties and wheelchair users could easily access these areas. The first floor had two further surgeries and a small landing area used as a second patient waiting room. The second floor was used for staff only and consisted of a kitchen, office, store room and a staff seating area.

Staff told us that since the new practice owners arrived, improvements had been made to the internal premises, including the replacement of carpet on the staircase and upstairs waiting room and addition of patient information boards. A dedicated decontamination room had also been installed and one of the surgery chairs had been replaced.

We found the practice was clean and tidy with suitable heating and lighting. The ground floor waiting room and reception area were large and pleasant environments. However, due to the age and layout of the building, patients needed to climb narrow staircases to reach the upstairs surgeries.

We found the upstairs waiting area was too small for the number of surgeries. However, staff told us that they would often ask patients to wait in the large waiting room on the ground floor. The seating in the upstairs waiting area was located next to a steep staircase leading down to the emergency fire exit at street level. The practice felt there was a risk of children falling downstairs and had installed a small wooden gate at the top of the stairs. Whilst this prevented

the risk of injury to children, the gate and furniture on the landing blocked the fire exit. The practice agreed to remove the gate and furniture causing these obstructions. We advised the practice to only use the downstairs waiting room and to call patients upstairs for their appointment to reduce the risk of patients (especially children) injuring themselves on the stairs.

Recommendation

The practice must ensure all fire exits are clear from obstructions.

A patient toilet was provided upstairs and another toilet was located on the ground floor. We were told this was a staff/disabled toilet. The patient toilet was not signposted from the corridors or from the ground floor waiting room. This means patients less familiar with the practice may not be able to locate the toilet easily.

We noticed the ground floor toilet was small and would be difficult for wheelchair users due to the limited size and because there were no hand rails to assist with transferring to the toilet and standing. The practice should install appropriate handrails and an emergency alarm, if the intention is to continue making this toilet available to disabled patients.

Recommendation

The practice should ensure that any toilet designated for disabled patients is suitable for safe use.

Fire exits were clearly signposted and fire extinguishers located on the ground, basement and first floors were recently inspected. There were suitable security measures in place to prevent unauthorised access to the premises. We found patient records were stored securely at the dental surgery and electronic records were backed-up daily onto a separate server. This means the practice has taken measures to ensure the safety and security of patients and their information.

There was a patient information board located in the reception area which contained relevant health promotion information about mouth cancer, diet, teeth brushing and flossing. These posters also made use of pictures to make the information more accessible to patients. We were told patients were given health promotion leaflets, including teeth brushing advice for children in both English and Welsh.

6. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan in respect of the recommendations made. The details of this can be seen within Appendix A of this report.

The improvement plan should clearly state when and how the findings identified at the Gentle Dental Aberdare will be addressed, including timescales.

The improvement plan, once agreed, will be published on HIW's website and will be evaluated as part of the ongoing dental inspection process.

Appendix A

General Dental Practice: **Improvement Plan**

Practice: **Gentle Dental Aberdare**

Date of Inspection: **9 December 2014**

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
	Patient Experience			
	-			
	Delivery of Standards for Health Services in Wales			
8	The practice should consider the potential risk to patients of separating drugs and resuscitation equipment in the event of an emergency. The practice should consult the manufacturer regarding the storage of glucagon and if this needs to be refrigerated.	The practice has looked into the storage requirements for glucagon and found that Glucagon need not be refrigerated. We have placed the Glucagon in the emergency box along with the other drugs and equipment.	Parul Sood	Done
9	The practice should ensure all staff are aware of the appropriate personal protective equipment they need to wear when cleaning and decontaminating instruments.	The practice has completed the course on Infection Control. We always encourage our staff for the appropriate use of the PPE in the decontamination room. Regular reminders are	Parul Sood	Done

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
		given in the staff meetings as well. Nurses have been reminded again after this recommendation.		
9	The practice should use standard foil strips when testing the ultrasonic bath to ensure the reliability of this test.	We have ordered standard foil strips to be used for ultrasonic bath reliability test.	Rahul Sood	2 weeks
9	The practice should develop a plan of how they will progress to best practice, in accordance with WHTM 01-05 guidelines	The practice has been working to achieve best practice in accordance with WHTM 01-05, a lot of the improvement work has already been carried out, however the practice needs a written plan.	Parul Sood	1 month
10	The practice should ensure that improvements are made to the patient chair in the upstairs surgery to allow for effective decontamination.	Plans for a new dental treatment chair in the upstairs surgery. We have also instructed an engineer to re upholster the chair.	Rahul Sood	6 to 12 months for a new chair 2-4 weeks for reupholster.
Management and Leadership				
12	The practice should ensure the complaints procedure is consistent with 'Putting Things Right'.	We have updated the complaints procedure.	Rahul Sood	Done
Quality of Environment				
14	The practice must ensure all fire exits are clear from obstructions.	All fire Exits are now clear from obstructions.	Rahul Sood	Done
14	The practice should ensure that any toilet	We will take advice on whether the toilet can	Rahul Sood	3-6 months

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
	designated for disabled patients is suitable for safe use.	have disabled facilities. If yes, we will install the facilities.		

Practice Representative:

Name (print):Parul Sood.....

Title:Dentist.....

Signature:Parul Sood.....

Date:18 January 2015.....