

**General Dental Practice
Inspection (announced)**
Cardiff and Vale University
Health Board, Six Gables
Dental Practice

29 October 2014

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1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection to Six Gables Dental Practice at 27a Penlline Road Whitchurch, Cardiff within the area served by Cardiff and Vale University Health Board on 29 October 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 Wales¹.

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

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

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 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 recommendation 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

Six Gables Dental Practice provides services to patients in the Whitchurch area of Cardiff. The practice forms part of dental services provided within the geographical area known as Cardiff and Vale. The practice employs a staff team which includes three dentists and six other staff who undertook dental nursing and administration roles.

The practice provides NHS and private treatment.

As Six Gables Dental Practice is a mixed practice providing both private and NHS dental services, 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.

4. Summary

HIW explored how Six Gables Dental Practice meets the standards of care in *Doing Well, Doing Better: Standards for Health Services in Wales*.

The feedback we received from patients who spoke to us or completed questionnaires was positive. Patients informed us that practice staff always made them feel welcome and we observed the helpful, friendly and professional approach of staff when speaking with patients.

We recommended improvements to information displayed in the waiting room for patients. The practice is also advised to improve their complaints procedure to ensure it complies with the NHS complaints arrangements 'Putting Things Right'.

Overall, we found that the service offered by this practice was underpinned by relevant written policies and procedures to ensure patient care and treatment was delivered safely.

We found some inconsistency relating to patient records, including the amount of information recorded and where that information was stored.

We found there were a number of relevant policies and procedures in place to ensure that patient care and treatment was delivered safely. There was evidence of cohesive and effective team working with all staff having a clear understanding of what was expected in their role.

The practice was located in a large building which had previously been used for residential purposes. We found that the overall environment was very well maintained, clean and tidy and the practice was accessible for patients with varying levels of mobility.

5. Findings

Patient Experience

The feedback we received from patients who spoke to us or completed questionnaires was positive. Patients informed us that practice staff always made them feel welcome and we observed the helpful, friendly and professional approach of staff when speaking with patients.

We recommended improvements to information displayed in the waiting room for patients. The practice is also advised to improve their complaints procedure to ensure it complies with the NHS complaints arrangements 'Putting Things Right'.

On the day of our inspection the practice was only open for emergency admissions and as a result there were a limited number of patients available to speak to the inspection team. We spoke to two patients and their relatives. HIW questionnaires were given to patients prior to the inspection to obtain their views on the dental services provided.

All patients we spoke to, and who completed the questionnaires, told us that practice staff made them feel welcome. We observed staff speaking with patients in a helpful, friendly and professional way.

Examples of the feedback provided by patients included comments such as:

"Always been satisfied with my treatment."

"Excellent dentists and receptionists."

"Always seen same day."

All patients who completed the questionnaires said they were given enough information about their treatment, and that they were involved in making decisions about their care. Patients said they were satisfied with the service they received and said they did not experience any delay in being seen by the dentist. All patients confirmed that they knew how to access 'out of hours' care when the practice was closed.

There was a flexible appointment system in place meaning that patients could book routine appointments in advance and in the event of an emergency. Staff told us they tried to see patients as quickly as possible when required and could arrange emergency appointments at the end of the day. Patients confirmed that they had always been able to see a dentist at the practice on the same day in an emergency.

The practice operated a recall system to remind patients of when their next appointment was due. The practice manager explained they did this by sending out letters every month to remind patients when their check-up examination was due and requesting them to contact the practice to make an appointment. Patients were then reminded about their appointment by either by text message or by telephone. This helped to reduce the number of missed appointments. The practice manager told us that this system allowed emergency patients to be seen quickly when required.

We found limited information was available for patients within the waiting room area, such as an informative noticeboard with useful posters/information. This could be used as a way of communicating current oral health issues and advice to patients. We also found there was no information displayed regarding the NHS dental treatment pricing and bands of treatment.

Improvement needed

The practice must display treatment price lists, including prices for NHS dental treatment.

The practice may wish to consider using part of the wall area for displaying useful information for patients, such as oral health promotion.

Whilst information for patients on how they could raise concerns or complaints about their care and treatment was available in the waiting area, this information was small and not prominently displayed. This meant that patients may not know how to raise a concern or make a complaint. Patients we spoke to said that they did not know how to make a complaint about their dental care and treatment. However, they did tell us that they had never felt the need to complain. We advised the practice to improve the complaints information available to patients.

Improvement needed

The practice should ensure the complaints policy/poster is visible to patients.

The practice provides both private and NHS treatment and had a procedure in place for patients to raise concerns or complaints about their care and treatment. Whilst the procedure generally met the arrangements covering both private and NHS care and treatment, it was not fully compliant with the arrangements set out under 'Putting Things Right'². We could not be assured that complaints were responded to within

² 'Putting Things Right' are the arrangements in place for handling and responding to concerns about care and treatment provided by the NHS in Wales

prescribed timescales, or that patients were informed they could refer their complaint to the Public Services Ombudsman for Wales should they wish.

Improvement needed

The practice should ensure the complaints procedure for patients receiving NHS treatment fully complies with the arrangements in 'Putting Things Right'.

The practice does not have an independent website which they manage, although both the Wales NHS and Cardiff and Vale Health Board websites contain information about the practice. Our review of information contained on the NHS and health board websites found that some details were out of date. When notified of this, the practice manager took immediate action to remove the out of date information.

The practice did not have a system to regularly assess patients' views and act upon them. This could help ensure that the practice is offering a service which meets the needs of the patient population and could help the practice to identify improvements.

Improvement needed

The practice should adopt a system of continual evaluation and improvement through patients' feedback, to ensure the service meets the needs of its population.

Delivery of Standards for Health Services in Wales

Overall, we found that the service offered by this practice was underpinned by relevant written policies and procedures to ensure patient care and treatment was delivered safely.

We found some inconsistency relating to patient records, including the amount of information recorded and where that information was stored.

The practice manager informed us that all new patients are requested to complete a new patient questionnaire, which includes their medical history. The practice had a policy of checking patients' medical history at every visit and ensuring that any changes to their medical information or possible risks to their health were identified and updated within their records.

We found that it was difficult to locate initial medical histories, provided by patients when they first joined the practice, as they were stored in different places dependent on when the patient joined the practice. It was not clear when looking at a patient's notes where their medical history could be found. This meant that if a patient was seen by a different dentist it was not always immediately clear where the initial, or most recent medical history update, was stored.

Improvement needed

The practice should ensure that complete and accurate patient records, including an up-to-date medical history, are available for each patient.

We examined a sample of 15 patient records (i.e. five patient records for each dentist working at the practice on the day of our inspection). We found the level of detail recorded by individual dentists was inconsistent. For example, some patient records included comprehensive notes and future plans, while others were brief.

We found that dentists were recording information in different areas of electronic patient records following appointments. This meant that when we tried to find specific information, for example treatment options discussed, we could not consistently find the information as it was not in the same place in every record. The practice manager and a dentist we spoke to confirmed that the practice did not have an accepted way of recording information within the electronic record, and that the system had only recently been introduced meaning staff were still familiarising themselves with it.

Improvement needed

The practice should ensure electronic patient records are comprehensive and a consistent approach is applied to recording details of treatment, in particular where records are stored.

We looked at the procedures in place concerning decontamination of instruments and found there were appropriate measures and checks in place. This included cleaning methods, instrument storage and the way which staff transported instruments around the practice.

We found that all items of sterilised equipment were in appropriately sealed packs. However, not all of the items had stickers indicating the sterilisation and use by dates. We advised the practice manager of this and the items without stickers were re-sterilised and labelled immediately.

Conversation with the practice manager and review of the practice audit files confirmed that the practice completes routine quarterly checks in relation to infection control requirements in accordance with the document called the Welsh Health Technical Memorandum (WHTM 01-05)³.

We found that the practice had an on-going contract in place for the disposal of hazardous waste. We saw waste had been segregated into different coloured containers to indicate correct methods of disposal. We noted that the bins for clinical waste were stored in the car park and were unlocked. As this area was accessible by the public, we recommended that these bins should be locked.

Improvement needed

The external bins storing clinical/hazardous waste should be locked

We found that the arrangements in place in relation to the use of x-ray equipment complied with existing standards and regulations. Staff received appropriate training and the quality of patients' dental x-rays was regularly checked. The practice manager provided a copy of the practice x-ray procedure which had recently been updated. This had been signed by all staff confirming that they had reviewed and understood the procedure and its most recent amendments. This means patients can be confident staff are using x-ray equipment safely.

³ <http://wales.gov.uk/topics/health/cmo/professionals/dental/publication/cdo-letters/decontamination2/?lang=en>. The WHTM 01-5 document provides professionals with guidance on decontamination in primary care practices and community dental practices.

Information relating to the review of quality of x-rays was not recorded in patient notes but within an x-ray book, which was stored within the individual surgeries. Each of the dentists we spoke to confirmed that they regularly reviewed the x-ray books to monitor any changes in x-ray quality and ensured that the quality of the x-rays was maintained. This means that patients are not exposed to radiation unnecessarily.

We found that the practice had recently ordered a new set of radiation dose badges, in accordance with their radiation procedures which required radiation dosage within the surgeries to be monitored regularly. However, these had been stored in the radiation file and not yet been used.

Improvement needed

The practice should ensure the procedures for monitoring radiation dosage are followed consistently and the new radiation dose badges used.

The practice had adequate procedures in place and appropriate resuscitation equipment and emergency drugs were available in the event of a patient emergency (collapse) at the practice. Emergency drugs were found to be securely stored together with the resuscitation equipment. We also found that there were suitable arrangements in place to ensure that expired drugs were promptly replaced.

All of the staff we spoke to told us that they had received emergency first aid training. The records we saw showed staff had received training on how to deal with medical emergencies including how to administer cardiopulmonary resuscitation (CPR) and had certificates to confirm this.

We looked at a variety of maintenance files containing maintenance schedules, guidance and certificates held at the practice. These showed that there were suitable systems and management processes in place to ensure that all equipment was inspected in a timely way and in accordance with mandatory requirements.

Management and Leadership

We found there were a number of relevant policies and procedures in place to ensure that patient care and treatment was delivered safely. There was evidence of cohesive and effective team working with all staff having a clear understanding of what was expected in their role.

The practice provides both NHS and private dental care and treatment. At the time of our inspection a practice manager was responsible for the day-to-day running of the practice.

We found that the practice had relevant written policies and procedures to ensure that all aspects of patient care and treatment was delivered safely. The practice manager maintained comprehensive files of these procedures which were stored in the practice so staff could refer to them for information at any time. All policies had review dates to ensure that the information was current and all policies had been reviewed, updated and provided to staff within the two months prior to the date of inspection. However, the practice had retained previous versions of policies and procedures in the files which could be confusing. We advised that these duplicate policies should be removed to aid staff in identifying the current policy.

The practice manager told us that regular monthly staff meetings were held. This gave staff an opportunity to raise any issues of concern about the services being provided. These meetings were also used to provide staff with any updated policies or procedures and convey new information to the dental team. We saw minutes of the previous staff meeting which had taken place during the month before the date of inspection.

The practice manager informed us that there was an agreement with the local health board for occupational health support for staff, such as vaccines and procedures to follow in the event of a needle stick injury. This ensures that staff had appropriate systems in place to record injuries sustained and prevents possible cross infection with other staff or patients.

Staff told us they felt well supported in their roles by the practice manager and dentists and would be comfortable raising any work related concerns they may have. There was evidence of cohesive and effective team working with all staff having a clear understanding of what was expected in their role.

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 were able to see that the practice had used the results of a learning project undertaken by one staff member to develop a Six Gables style for any written documentation which was used in the practice. The practice manager confirmed that this was an example of staff are

encouraged to develop and share best practice which was replicated in all practice documentarian.

We saw evidence of individual staff had annual performance reviews and undertook continuing professional development which ensured that their knowledge and expertise was regularly updated.

Quality of Environment

The practice was located in a large building which had previously been used for residential purposes. We found that the overall environment was very well maintained, clean and tidy and the practice was accessible for patients with varying levels of mobility.

The practice is situated in the Whitchurch area of Cardiff and car parking is available in a small car park at the practice or in a public car park located a short distance away.

The practice has four surgeries, two located on the ground floor and two on the first floor. The names, qualifications and registration of all dentists working at the practice were displayed within the individual surgeries. The patient waiting area is located next to the main reception on the ground floor. The downstairs surgery had its own entrance door with level access directly from the car park at the rear of the practice. This meant the surgery environment was accessible to patients with a range of mobility difficulties.

Our observations indicated the size of the waiting areas was appropriate given the number of surgeries and patients attending. The patient waiting area was clean, tidy and well lit. We found information on display indicating the 'out of hours' contact number to inform patients attending for treatment. There was a toilet available on the ground floor for patients to use which had appropriate hand washing signage, heated dryer and paper towels. However, this would not be accessible for wheelchair users. All areas appeared to be in good order and recently decorated. Fire extinguishers were placed in easy to reach places and we could see that they had been serviced regularly.

A tour of the building confirmed the practice was satisfactorily maintained internally and externally. There was signage at the front of the premises indicating the opening times for the practice. However, this information was not prominent and the name of the practice was not immediately clear. Facilities such as the toilets had pictorial signage on the doors. However, there was no clear signage to indicate to patients the location of the toilets. We found that signage at the surgery was generally poor and suggested that the practice should consider improving the signage.

Improvement needed

The practice should improve the signage for patients at the surgery

Appropriate arrangements were seen to be in place for the safe storage and security of paper and electronic records. Paper records were stored in locked cabinets and there was a back-up system in place for electronic records. Security precautions

were also in place to prevent unauthorised access to areas of the building not used by patients.

6. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan in respect of patient experience, delivery of standards for health services in Wales, management and leadership and the environment. 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 Six Gables Dental Practice 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: Six Gables Dental Practice

Date of Inspection: 29 October 2014

Page Number	Improvement needed	Practice Action	Responsible Officer	Timescale
Patient Experience				
7	The practice must display treatment price lists, including prices for NHS dental treatment. [General Dental Council Standards 2.4.1-2.4.2]	Practice was recently decorated and poster has now been placed back up with the Noticeboard for public to see	Huw Bowen	Done
7	The practice may wish to consider using part of the wall area for displaying useful information for patients, such as oral health promotion. [Doing Well, Doing Better: Standards for Health Services in Wales section 3b-c]	Has been done see above	Huw Bowen	Done

Page Number	Improvement needed	Practice Action	Responsible Officer	Timescale
7	<p>The practice should ensure the complaints policy/poster is visible to patients.</p> <p>[General Dental Council Standards 5.1.5]</p>	<p>There has been a Complaints poster on the notice board near reception</p> <p>Complaints poster has been placed on reception desk as well.</p>	Huw Bowen	Done
8	<p>The practice should ensure the complaints procedure for patients receiving NHS treatment fully complies with the arrangements in 'Putting Things Right'.</p> <p>[General Dental Council Standards section 5.1.3-5.1.4]</p>	<p>Will update using the Putting things right policy.</p>	Huw Bowen	Done
8	<p>The practice should adopt a system of continual evaluation and improvement through patients' feedback, to ensure the service meets the needs of its population.</p> <p>[Doing Well, Doing Better: Standards for Health Services in Wales section 5a-c]</p>	<p>The practice uses the profile sent by Dental Practice division to gauge feedback.</p> <p>The practice also has a comments book which is discussed regularly at practice meetings to ensure continual improvement in patient satisfaction etc.</p>	Huw Bowen	Done
Delivery of Standards for Health Services in Wales				
9	<p>The practice should ensure that complete and accurate patient records, including an up-to-date medical history, are available for each patient.</p>	<p>The practice has historically used paper records for medical histories.</p> <p>Prior to the inspection the practice had already</p>	Huw Bowen	Done

Page Number	Improvement needed	Practice Action	Responsible Officer	Timescale
	[General Dental Council Standards section 4.1; Doing Well, Doing Better: Standards for Health Services in Wales section 20c]	moved over to a computer Clinipad system using tablets for patients to sign which automatically updates into patient records .		
10	The practice should ensure electronic patient records are comprehensive and a consistent approach is applied to recording details of treatment, in particular where records are stored. [Doing Well, Doing Better: Standards for Health Services in Wales section 20a-c]	The practice is fully computerised and has been since 1993. We have undertaken an audit of our records and use a template to ensure all aspects are recorded fully.	Huw Bowen	Done
10	The external bins storing clinical/hazardous waste should be locked [WHTM 07-01 paragraph 5.72]	The bin on the day of inspection was lockable and should have been locked. The practice has since changed to a new waste company and has a brand new lockable bin which is locked at all times	Huw Bowen	Done
11	The practice should ensure the procedures for monitoring radiation dosage are followed consistently and the new radiation dose badges used. [Doing Well, Doing Better: Standards for Health Services in Wales section 3d; 16f]	We have a monthly report on staff dosimeter badges. We ensure that the staff wear and send the badges off monthly .	Huw Bowen	Done

Page Number	Improvement needed	Practice Action	Responsible Officer	Timescale
	Management and Leadership			
	Quality of Environment			
14	<p>The practice should improve the signage for patients at the surgery.</p> <p>[Doing Well, Doing Better: Standards for Health Services in Wales section 12a-c]</p>	<p>We clearly have all the surgeries ,staff and public areas and fire exits etc displayed.</p> <p>We have staff plaques on wall outside and have a clear professionally made sign by front door listing staff ,qualifications opening hours,emergency numbers etc , practice telephone number etc.</p>	Huw Bowen	Done

Practice Representative:

Name (print):Huw Bowen.....

Title:Mr

Signature:n/a.....

Date:02/03/2017