

DRIVING
IMPROVEMENT
THROUGH
INDEPENDENT AND
OBJECTIVE REVIEW

General Dental Practice Inspection (Announced)

Aneurin Bevan University Health Board,

Trefynwy Dental Practice

23 February 2015

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1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection at Trefynwy Dental Practice, 10 St James' Street, Monmouth, NP25 3DL within the area served by Aneurin Bevan University Health Board on 23 February 2015.

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

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

- Information within the practice information leaflet and website (where applicable)
- HIW patient questionnaires

At the end of each inspection, we provide an overview of our main findings to representatives of the dental practice to ensure that they receive appropriate feedback.

Any urgent concerns that may arise from dental inspections are notified to the dental practice and to the health board via an immediate action letter. Any such findings will be detailed, along with any other recommendations made, within Appendix A of the inspection report.

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

3. Context

Trefynwy Dental Practice provides services to patients in the town of Monmouth and those living close to the Welsh/English border. The practice forms part of dental services provided within the geographical area known as Aneurin Bevan University Health Board. The practice employs a staff team which includes three dentists, three dental nurses and a receptionist/practice manager. Overall management of the practice was provided by Mr E H Cronin and Mrs J M Cronin (both dentists who work at the practice); the practice manager and each other member of the dental team having agreed areas of responsibility for the day to day operation of the service.

A full range of NHS dental services and private treatments are provided. These include:

- Examinations and advice
- X-rays
- Preventative and Periodontal (gum) treatment
- Fillings
- Extractions
- Crowns
- Dentures and repairs
- Patient referrals to services beyond the scope of primary dental care (for example-orthodontic services)
- NHS domiciliary visits

Trefynwy Dental Practice is a mixed practice providing both private and NHS dental services. In this respect, any dentist working at the practice who is also 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 Trefynwy Dental Practice met the standards of care in the Doing Well, Doing Better: Standards for Health Services in Wales.

Patients we spoke to and those who completed our questionnaires indicated they were very satisfied with the service provided by the practice team. Patients also told us they had been given enough information about their treatment and had not experienced any significant delays in being seen by a dentist.

We found the practice was being run with the intention to provide a good quality service to patients.

During the inspection visit, we considered whether the clinical facilities available at the practice conformed to current standards for health services in Wales-as outlined in the document entitled Doing Well, Doing Better². Our observations served to confirm that the clinical environment was of a high standard with a particular emphasis on patient safety.

The practice was advised of the identification of two improvements. These related to the need to ensure that all future patients' records contained sufficient detail following dental consultations and treatment and the need for improved arrangements associated with the dispensing of prescribed drugs.

The dental surgery was established and well run by Mr E H Cronin and Mrs J M Cronin together with a team of experienced, motivated staff. The practice had appropriate clinical procedures and quality assurance processes in place to ensure patients' safety. Staff told us they were very well supported in their roles.

The dental surgery was well maintained and provided a safe environment for patients to receive treatment. We also saw that the premises were clean and hygienic throughout.

² http://www.wales.nhs.uk/governance-emanual/standards-for-health-services-in-wales-s. The Standards for Health Services in Wales is underpinned by supporting guidance. Specific guidance on each individual standard (1 – 26) can be found within this document.

5. Findings

Patient Experience

Patients we spoke to and those who completed our questionnaires indicated they were very satisfied with the service provided by the practice team. Patients also told us they had been given enough information about their treatment and had not experienced any significant delays in being seen by a dentist.

The practice team presented as professional, friendly and welcoming and we saw them being courteous and polite to patients throughout our inspection.

We were able to speak to a number of patients attending the surgery on the day of our visit. Without exception all told us they were happy with the service provided by the practice staff.

Prior to our inspection visit, we provided the practice with HIW questionnaires to distribute to patients as a means of obtaining their views and experiences of the services provided. Fourteen completed questionnaires were returned. All patients who provided comments indicated they were highly satisfied with the service they had received from the practice, were made to feel welcome by staff and had been given enough information about their treatment.

Comments included:

'I am always asked if I have any questions and the dentist and nurse take time to explain'

Is' the best dentist I've ever been to. They make you feel so welcome'

'From coming in to seeing the dentist to the nice lady at the front desk, you always feel welcome'

'I am very happy with this dental practice. All are very helpful and I like the open modern look to the rooms and get very good service'

A suggestion box was available at the reception as a means of allowing patients to post comments and suggestions on the quality of the service provided. We were told that comments received to date, had been very positive. We were also informed that patients were encouraged to raise any particular

issues which the practice team during their visits so that staff could try and address any concerns they may have on the spot.

When asked about making complaints, patients told us they either knew how to raise any complaints they may have with the staff at the practice, or did not have a reason to complain. We saw that complaints posters were clearly displayed within the reception/waiting room area which contained the correct timescales for the acknowledgment and resolution of complaints together with contact details for relevant bodies.

There was a flexible appointment system in place and we found patients could book appointments both in advance and on an emergency basis. This meant people could be confident there was a system in place to try to ensure they were seen quickly when they experienced dental pain.

Overall, patients we spoke to and who had completed HIW questionnaires indicated they had not experienced any delays when waiting to be seen. Staff described that a process was in place for informing patients of any delay on the infrequent occasions when their dentist may be running late.

Other comments provided within completed questionnaires included:

'Very pleased to receive an excellent service'

'They are always good to fit me in quickly if I have a problem and let me fit my appointments around my bus times'

'I have always received the best care including emergency appointments. My children actually love coming to the dentist even when treatment is needed'

'The service is first class'

We saw that the practice had a prominent display of NHS and private patients' complaint procedures in the waiting area together with a wide range of dental health promotion material. Some information was provided in English and Welsh. We also saw a display of leaflets which offered patients the opportunity to use local voluntary community transport to help them get to the practice for their dental appointments.

Delivery of Standards for Health Services in Wales

We found the practice was being run with the intention to provide a good quality service to patients.

During the inspection visit, we considered whether the clinical facilities available at the practice conformed to current standards for health services in Wales-as outlined in the document entitled Doing Well, Doing Better³. Our observations served to confirm that the clinical environment was of a high standard with a particular emphasis on patient safety.

The practice was advised of the identification of two improvements. These related to the need to ensure that all future patients' records contained sufficient detail following dental consultations and treatment and the need for improved arrangements associated with the dispensing of prescribed drugs.

We found the arrangements in place for the use of X-ray equipment were inkeeping with existing standards and regulations. This included training updates for staff. We observed that the radiation protection file was very detailed with regard to the use of X-ray equipment. It was also evident that dentists had recorded sufficient information to justify why certain dental X-ray views had been taken. In addition, the surgery had a suitable quality assurance system in place to ensure that the image quality of patient X- rays were graded and recorded. The practice however may wish to develop a contingency plan for the development of X-ray films in the event that the digital equipment fails.

We saw certificates in staff files that indicated they had received training on how to deal with medical emergencies and how to perform cardiopulmonary resuscitation (CPR). This meant staff had been taught on the correct procedures to deal with patient emergencies. The practice also had an appointed first aider.

Staff had access to resuscitation equipment and appropriate drugs in the event of a patient emergency (collapse) at the practice. We did find that the portable suction unit was not stored with the portable oxygen. This was brought to the attention of one of the dentists; immediate action being taken to re-position the

³ http://www.wales.nhs.uk/governance-emanual/standards-for-health-services-in-wales-s. The Standards for Health Services in Wales is underpinned by supporting guidance. Specific guidance on each individual standard (1 – 26) can be found within this document.

equipment for ease of access by staff. We saw that regular checks had been carried out regarding the expiry dates of drugs held at the practice through the use of a written log. We also saw that the storage of emergency drugs and prescription pads was appropriate and secure.

We found that the practice dispensed antibiotics to patients on occasions; the drugs being given to patients in small polythene bags. The practice was advised to ensure that dispensed medication should, in the future, either be placed in a bottle with a child proof lid, or from blister packs, for the purpose of safety. This matter was discussed with dentists during the inspection visit.

Improvement needed

The practice is required to demonstrate how it will make improvements to the storage and packaging of prescribed, dispensed medication.

We considered the procedures in place regarding cleaning and sterilisation of instruments (otherwise known as decontamination). There was a separate decontamination room at the premises (which is considered to be good practice) and the entire decontamination process was supported by detailed records of daily safety checks regarding the safe and effective operation of the autoclave⁴. The decontamination/maintenance programme included start and end of day equipment checks. Conversation with one of the dental nurses revealed that the practice washer/disinfector was not currently in use; engineers having been called to collect and replace the machine. In the interim, the dental nurses were manually cleaning instruments prior to sterilisation in the autoclave.

There were two sinks in the decontamination room, one of which was dedicated for hand washing, the other containing two bowls for the initial cleaning of used instruments and for rinsing instruments respectively. We saw that sterilised instruments were promptly placed in sealed bags at the end of the decontamination process; packaging being marked with a use by date of twelve months in accordance with WHTM 01-05.

We selected and looked at a sample of 10 patient records associated with two dentists working at the practice. Each of those records contained insufficient detail in terms of the dentists' findings during patient consultations. Specifically,

⁴ An **autoclave** is a pressure chamber used to sterilize equipment and supplies by subjecting them to high pressure saturated steam.

we found that none of the 10 records selected provided clear evidence of discussions with patients concerning treatment options and advantages/disadvantages of treatment. Neither were we able to find recorded evidence of patient risk assessments for dental caries (decay) gum disease, mouth cancer or updated medical histories.

We were provided with a further small sample of patient records completed since January 2015 at which point the practice had adopted a much more rigorous approach to recording all required elements of patients' dental consultations. In addition, completed HIW questionnaires and patients who spoke with us on the day of our inspection stated that they were always provided with sufficient information at the practice about their dental care and treatment.

Going forward however, the practice must ensure that all patient records contain sufficient evidence of all aspects of care, discussion and treatment provided in the future.

Improvement Needed

The practice is advised of the need to demonstrate how it will ensure that patients' records contain sufficient detail following dental consultations and treatment. This is in accordance with current NHS standards.

Patient records were kept at the practice in electronic and paper form. We were also assured that each member of staff had a unique password and all computer information was 'backed up' on a regular basis to ensure that patient records were maintained on the system. We did advise the practice to consider relocating filing cabinets where patient records were stored. This was because they were currently located in the hallway/entrance to the practice and we found that two of the 12 filing cabinet drawers were closed, but not locked. This meant that unauthorised persons could potentially access confidential records. The practice may also wish to consider the purchase of fire proof cabinets as and when any conventional metal cabinets are replaced.

All equipment at the practice appeared to be in very good condition and was subject to maintenance contracts. We were also able to confirm that portable appliance testing was carried out as required.

We saw that there was adequate storage for dental instruments and dedicated hand washing facilities in each surgery. The team also confirmed that used instruments were never transported between the two dental surgeries.

Conversation with dentists revealed that a thorough audit had been completed regarding infection prevention and control. Discussions with the dental team

also revealed an emphasis on promoting a safe, good quality service through daily and weekly checks with regard to the use of decontamination equipment.

We considered the content of maintenance records which enabled us to confirm that the surgery had an on-going contract in place to ensure the appropriate handling and disposal of hazardous waste. We also saw that hazardous (clinical) waste was stored correctly in a locked room.

We saw that staff had access to suitable personal protective equipment for use during the course of their work. In addition, patients were provided with eye protection.

During the inspection visit, we considered whether the clinical facilities available at the practice conformed to current standards for health services in Wales-as outlined in the document entitled Doing Well, Doing Better⁵. Our observations served to confirm that the clinical environment was generally of a high standard with a particular emphasis on patient safety.

⁵ http://www.wales.nhs.uk/governance-emanual/standards-for-health-services-in-wales-s. The Standards for Health Services in Wales is underpinned by supporting guidance. Specific guidance on each individual standard (1 – 26) can be found within this document.

Management and Leadership

The dental practice was established and well run by Mr E H Cronin and Mrs J M Cronin together with a team of experienced, motivated staff. The practice had appropriate clinical procedures and quality assurance processes in place to ensure patients' safety. Staff told us they were very well supported in their roles.

Trefynwy Dental Practice is an established independent surgery. Overall management of the practice was provided by Mr E H Cronin and Mrs J M Cronin (both dentists who work at the practice); the third dentist, practice manager and other members of the dental team having agreed areas of responsibility for the day to day operation of the service.

Overall, we found that the practice was well run as the daily operation of the service was underpinned by a range of clinical procedures and quality assurance processes to ensure that patients care and treatment was delivered safely and in a timely way. We were able to confirm those arrangements by looking at a variety of records and policies held at the practice and through discussions with each member of the dental team.

Contact details of the local safeguarding teams in relation to adult and child protection were clearly contained within policy documents.

The nursing and administrative element of the staff team was well established; each person having worked at the practice for more than five years. We were also told that the practice did not use agency dental staff and staff sickness/absence levels were low. This meant that patients received care and treatment from staff who were familiar to them.

Dental nursing staff we spoke to told us they felt very well supported in their work. They also told us they, along with the dentists attended regular staff meetings (every three months) where they have opportunities to raise any issues of concern about services being provided to patients. Such meetings were also used to convey new/relevant information to the dental team. We were able to confirm those arrangements by looking at the notes held at the surgery which highlighted the relevant topics/issues discussed by the team. Conversation with the receptionist and dental nurses also demonstrated the ability of the team to discuss day to day clinical matters in an informal way.

Examination of three staff files demonstrated that they had completed relevant training during 2014 which included sessions about cardiopulmonary resuscitation (CPR) and adult and child protection. We further found that the practice placed a great emphasis on staff training and development in general;

continuing professional development files containing information about staff training in recent years.

We saw written records which provided evidence that staff received an annual appraisal which assisted in determining whether training received in the previous twelve month period had been effective and what training was required in the future. The appraisal also offered the opportunity for open discussion about the services provided at the practice.

Conversation with dentists revealed that the practice was currently involved in a peer review exercise which promoted discussions about aspects of clinical practice with other local dentists. This was with a view to making on-going improvements to the service provided at Trefynwy Dental Practice as far as possible.

We found that staff had contracts of employment in place which had been signed and dated and all clinical staff were registered with the General Dental Council and held dental indemnity cover. The surgery had also developed an induction programme to ensure that any new future members of the dental team were provided with a means of becoming familiar with the values and ethos of the practice as well as established processes and procedures in relation to patient services.

We saw that the practice had current evidence of Hepatitis B vaccination for all members of staff. Conversation with a dental nurse also confirmed that there were suitable arrangements in place between the practice and Aneurin Bevan University Health Board so that support and advice could be obtained from the occupational health department as and when required.

Discussion with two dental nurses demonstrated that they felt confident to raise any concerns they may have about services provided at the practice. A whistleblowing procedure was also found to be in place.

HIW certificates were prominently displayed in the patient waiting area in respect of the private dentistry provided at the practice as required by the regulations.

Examination of a variety of maintenance certificates held at the practice revealed that there were suitable systems and processes in place to ensure that equipment was inspected in a timely way and in accordance with mandatory requirements.

Quality of Environment

The dental surgery was well maintained and provided a safe environment for patients to receive treatment. We also saw that the premises were clean and hygienic throughout.

Trefynwy Dental Practice provides services from a converted coach house which is located on a main road in the town of Monmouth. The names and qualifications of all dentists working at the practice were displayed on a sign outside the building.

We saw that access into the building and ground floor surgeries was suitable for individuals with mobility difficulties. There was one step at the entrance; however, the practice had purchased a portable ramp to enable patients who used wheelchairs to access the building in a safe manner.

There were up to four dedicated car parking spaces at the practice premises. In addition, short term parking was available within the residential streets in close proximity to the practice and there was also a pay and display car park nearby.

A tour of the building confirmed the dental surgery was clean and very well maintained with suitable lighting, heating and ventilation. The building contained two patient surgeries which were situated on the ground floor.

The reception area was situated on the ground floor, immediately to the left of the front door.

The waiting room was open, welcoming, comfortably furnished and a suitable size for the number of surgeries.

The practice had a well signposted toilet on the ground floor which had been specifically adapted for patients with mobility difficulties. A further toilet was available to staff on the first floor. All such facilities were clean and hygienic, with suitable hand washing equipment to prevent cross infection.

We saw that staff were provided with a kitchen/rest area and space for changing on the first floor. There was also office accommodation and a private room used by the owners in that part of the building.

Fire exits were clearly signposted and fire extinguishers located on both floors had been recently inspected. We did however advise the practice to provide one additional fire exit sign at the top of the first floor landing to ensure that any visitors to the practice had a clear guide to safety in the event of a fire.

The employer liability insurance certificate was displayed at the dental practice, but not in an area easily visible to patients. The dental team agreed to relocate the certificate to the waiting area making this information more accessible to patients.

We found that the practice had a valid fire equipment contract and emergency lighting was present.

The premises were fitted with a security alarm as a means of preventing unauthorised access.

6. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan in respect of The Delivery of Standards for Health Services in Wales. 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 Trefynwy 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: Trefynwy Dental Practice

Date of Inspection: 23 February 2015

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
	Patient Experience			
	No issues identified for improvement with regard to this area of inspection.			
	Delivery of Standards for Health Services in	Wales		
Page 9	The practice is required to demonstrate how it will make improvements to the storage and packaging of prescribed, dispensed medication.	Any prescribed and dispensed medication will continue to be stored in a lockable cabinet away from the patient areas. We welcome the report highlighting the need for	Mr EH Cronin & Mrs J M Cronin	Completed
	NHS Standard 15	safe dispensing of medication. Improvements have already been instigated to ensure that all prescribed medicines are dispensed in either a bottle with a child-proof lid or as a blister pack.		

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
Page 10	The practice is advised of the need to demonstrate how it will ensure that patients' records contain sufficient detail following dental consultations and treatment. This is in accordance with current NHS standards-7a, 8a, 9a and 9b.	The practice will increase the frequency at which internal audits of the record keeping take place in order to ensure the high standard of record-keeping continues. This, alongside external peer review coupled with appropriate continuing professional development should provide a suitable mechanism to confirm that the required NHS standards are fulfilled.	Mr E H Cronin & Mrs J M Cronin	The nature of this improvement is obviously ongoing with no natural end-point.
	Management and Leadership			
	No issues identified for improvement with regard to this area of inspection.			
	Quality of Environment			
	No issues identified for improvement with regard to this area of inspection.			

Practice	Represen	tative:
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Name (print):	Drs E & J Cronin
Title:	Practice Owners
Signature:	
Date:	1 st April 2015