

**General Dental Practice  
Inspection [Announced]**  
Hywel Dda University Health  
Board, Avenue Villa Dental  
Practice

**11 November 2014**

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**Communications Manager  
Healthcare Inspectorate Wales  
Welsh Government  
Rhydycar Business Park  
Merthyr Tydfil  
CF48 1UZ**

Or via

**Phone:** 0300 062 8163  
**Email:** [hiw@wales.gsi.gov.uk](mailto:hiw@wales.gsi.gov.uk)  
**Fax:** 0300 062 8387  
**Website:** [www.hiw.org.uk](http://www.hiw.org.uk)

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## 1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection to Avenue Villa Dental Practice at Queen Victoria Road, Llanelli SA15 2TP within the area served by Hywel Dda University Health Board on 11 November 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*<sup>1</sup>.

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

- Information held by Healthcare Inspectorate Wales (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

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<sup>1</sup> Doing Well, Doing Better: Standards for Health Services in Wales came into force from 1<sup>st</sup> 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](http://www.weds.wales.nhs.uk/opendoc/214438)

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

Avenue Villa Dental Practice provides services to patients in the Llanelli area of Carmarthenshire. The practice forms part of dental services provided within the geographical area known as Hywel Dda University Health Board. The practice employs a staff team which includes five dentists, one hygienist, 11 nurses, one laboratory technician and a practice manager. The nurses also work as receptionists on a rotational basis.

A range of services are provided. These include:

- General dentistry
- Implantologist
- Facial aesthetics
- Teeth whitening
- Hygienist
- Access contact
- Dental laboratory

## 4. Summary

HIW explored how Avenue Villa Dental Practice 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 standard of care they received at the practice and receive sufficient information about their treatment. Feedback from the patient questionnaires was positive on all areas of care.

We were assured that care and treatment was planned and consistently delivered in a way that was intended to ensure patient's safety and welfare.

On the day of the inspection we were assured that the practice was being effectively and efficiently run; with robust systems in place to ensure patients safety.

Patients using the practice and staff can be assured that the building is safe; appears well maintained, and provides a comfortable environment for patients to receive treatment.

## 5. Findings

### *Patient Experience*

**Overall, patients told us that they were satisfied with the standard of care they received at the practice and received sufficient information about their treatment. Feedback from the patient questionnaires was positive on all areas of care.**

During the inspection, we asked the practice to distribute HIW questionnaires to patients in an attempt to obtain views on the dental services provided. In addition, we spoke with a small number of patients who were receiving treatment on the day of the inspection (four people).

Sixteen questionnaires were returned. Both the patients who completed the questionnaires and those spoken with had been using the service for between two years and 60 years. All (20 people) indicated that the practice team always made them feel welcome with comments such as;

*“Always very polite and welcoming”*

*“Friendly and welcoming”*

*The practice team always make me feel welcome”*

Most patients felt that they were involved in making decisions about their care, with only one stating there was not enough information about treatment. This patient felt that due to different opinions there was “conflicting diagnosis”. Examination of a sample of patient records and conversations with four of the dentists disclosed consistent ways of working. All dentists confirmed that treatment options were discussed with patients following consultations. The patient records we looked at showed in most cases, all notes were updated after each visit; detailing the treatment given, as well as future plans. The practice manager told us that patients receive a treatment plan to take away and read.

All responses to the question about how to access the out of hours service showed that patients would not know how to access care when the practice was closed. Staff explained that a laminated note was placed in the practice window every evening with relevant emergency contact details. The practice manager stated that the on-call dentist for private patients could be contacted via an answer phone message on the practice’s answer phone or the contact number on the sign in the window, whilst NHS patients could telephone NHS



Direct who's number was also on the practice's answer phone and the sign in the window.

There was a flexible appointment system in place and patients could book appointments both in advance and on an emergency basis. This meant patients could be confident that there was a system in place to try to ensure they were seen quickly when required. Fifteen patients stated that they were satisfied with this system and had not experienced any delay in their appointment time. Five patients said there had been delays, but added comments such as;

*"Very infrequently"*

*"Small acceptable delay"*

*"Previous appointments over-running"*

There was clear signage at the front of the premises indicating the opening times for the practice.

There was a complaints process visible on the downstairs reception room wall. We discussed this with the practice manager and found the process was possibly not fully consistent with the 'Putting Things Right'<sup>2</sup> guidance. The practice manager confirmed that this would be addressed as soon as possible. We also noted the HIW's address was not on the complaint process poster, however this was corrected during the course of the inspection. When we asked patients if they would know how to make a complaint or raise a concern the only half said they would know. There was however, a patient information leaflet giving relevant information regarding the practice which included how to raise a concern (complaint).

When questioned regarding their views on the overall service they received, patients said they were satisfied; with comments such as *"very helpful reception staff, clean and friendly surgery"*, *"I have been with this practice since I was 13 years old, travelling six miles by train and car. I am now 72!"*, *"I have always received excellent service and treatment from the dentist and staff alike"* and *"most satisfied"*.

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<sup>2</sup> Putting things Right is the integrated processes for the raising, investigation of and learning from concerns (complaints). Concerns are issues identified from patient safety incidents, complaints and, in respect of Welsh NHS bodies, claims about services provided by a Responsible Body in Wales.

In addition to the questions asked, one patient made a personal observation and suggestion to improve the service which included;

*“The treatment door could be closed as not private. Can hear conversation between dentist /patient and can hear dental procedures. I do not believe this is good practice as lack of privacy/confidentiality”.*

Staff, told us that arrangements would be in place for patients with mobility problems to be seen in one of the downstairs surgeries.

## *Delivery of Standards for Health Services in Wales*

**We were assured that care and treatment was planned and consistently delivered in a way that was intended to ensure patients safety and welfare.**

### **Patient Records**

Records were kept at the practice on a computer database, with some information being held in paper records. Scrutiny of a sample of 16 dental records (i.e. four patient records for each dentist working at the practice) indicated that patients needs were assessed, and care and treatment was planned and recorded robustly. There were updates to medical conditions within all patient records. All had previous dental and social histories recorded. With regard to treatment plans, we saw inconsistencies between the dentists with two always evidencing planning, one sometimes and one providing no evidence. We discussed this with the dentists individually. The issue was similar with consented to treatment; however all had been seen again within the National Institute for Health and Care Excellence (NICE)<sup>3</sup> guidelines.

Where patients had received radiographs (x-rays) there was evidence of clinical evaluation of the x-ray to ensure that the quality of the image was adequate. There were also monthly audits undertaken of the evaluations. This ensures safe and effective practice.

We discussed the quality of recording with the dentists. We found overall basic fundamental systems were in place but the notes lacked detail in terms of options / reasons for attendance and consent. The dentists were very receptive to this observation and the practice manager has arranged to update the electronic system to allow for improved note taking in line with best practice.

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<sup>3</sup> The NICE dental recall clinical guideline helps clinicians assign recall intervals between oral health reviews that are appropriate to the needs of individual patients.

## **Recommendation**

***The recording of consent to treatment and the agreed care and treatment plans is mandatory under the Standards for Health Services Wales –Doing Well Doing Better 2010 and therefore must be maintained.***

### **Drug storage and emergency equipment**

Exploration of how emergency drugs were kept at the practice revealed that they were securely stored. We also found that there were suitable arrangements in place to ensure that expired drugs were promptly replaced.

There was a dedicated first aider and the first aid kit was stored within easy reach. Equipment required in the case of an emergency was available with certain items stored in each surgery as well as within the first aid kit.

### **Decontamination**

We looked at procedures in place concerning decontamination of instruments and found that although there were appropriate measures in place, there was no dedicated decontamination room. The practice manager told us this had been discussed, however the lack of appropriate space was proving to be a problem. This did not hinder the process and we saw evidence of record keeping; clear demarcation zones; a validation record for each wash cycle; the plan to use washer-disinfector to clean and disinfect hand pieces and the use of dedicated cleaning equipment in each surgery.

The exception was the hygienist who used an empty surgery to wash and sterilise the equipment. We noted that there were two trays to transport the equipment (one for used and one for clean) however only one was lockable. The practice manager confirmed that there were routine, quarterly audits (checks) in relation to infection control requirements in accordance with the Welsh Health Technical Memorandum (WHTM 01-05)<sup>4</sup>. There were dedicated hand washing facilities in key areas of the practice premises.

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<sup>4</sup> <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.

***Recommendation***

***It is recommended that both trays used for transportation of instruments are lockable.***

### **Radiographic equipment**

There were no concerns regarding the radiation protection file. There was a named radiation protection adviser; identification and demarcation of controlled areas; a record of dose investigation levels and a quality assurance system regarding the image quality. We also saw the radiation equipment check certification.

## *Management and Leadership*

**On the day of the inspection we were assured that the practice was being effectively and efficiently run; with robust systems in place to ensure patients safety.**

The practice provides mainly private dental care and treatment with some exempt and access NHS patients via the local health board. At the time of our inspection, an experienced practice manager was responsible for the day-to-day running of the practice.

The practice had been acquired by a new dental care provider in December 2013. As part of this acquisition the practice premises had been refurbished; new policies had been introduced and existing staff had been transferred onto new contracts. The practice manager told us that the transition had been seamless and well supported. We found that the practice was well run with the service underpinned by relevant written policies and procedures to ensure patient care and treatment was delivered safely. Staff were able to access these policies within the practice to check their understanding and ensure they were taking correct action. We did note however that the new policies did not have review dates to ensure that the information was current.

### ***Recommendation***

***Policies and procedures must be in line with Welsh Legislation and Best Practice and are dated to ensure the information is current.***

Staff told us they felt well supported in their roles by the practice manager and would be comfortable raising any work related concerns they may have. There was evidence of cohesive and effective team working.

We looked at a sample of staff training records. These confirmed staff had access to a range of training opportunities relevant to their role.

At the time of our inspection, all staff had valid Disclosure and Barring Service certificate, required by the regulations for private dentistry<sup>5</sup>.

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<sup>5</sup> The Private Dentistry (Wales) Regulations 2008 came into force on 1 January 2009. Amendments were made that came into force on 1 January 2012. These set out the legal requirements in relation to dentists providing private dentistry services.

The practice had a system to regularly assess patient's views and act upon them. This ensures that the practice is offering a service which meets the needs of its population and improves the service in line with patients' views.

We saw that there was a well established staff team; some having worked at the practice for many years. There had been a small turnover of dentists (two) over the past two years which had not affected the quality of the service being offered as a whole. This meant that patients received care from staff who were familiar to them.

The practice manager told us that all staff attended regular monthly staff meetings and this was confirmed by staff meeting minutes. This was an opportunity to raise any issues of concern about the services being provided; convey new/relevant information to the dental team, and discuss outcomes from patient questionnaires and audits. This was evidence of a progressive practice that was accepting of criticism and was improving from lessons learned.

We looked at a variety of maintenance certificates held at the practice which showed there were suitable systems and management process in place to ensure that all equipment was inspected in a timely way and in accordance with mandatory requirements.

Staff told us there was an identified person for first aid; fire martial; health and safety and decontamination. We saw that the health and safety notice was initially on a wall in a back office, however during the course of the inspection and after discussion with the practice manager it was moved back to its original place in the downstairs waiting area. This makes the notice visible to both staff and people visiting the premises.



## *Quality of Environment*

**Patients using the practice and staff can be assured that the building is safe, appears well maintained, and provides a comfortable environment for patients to receive treatment.**

Avenue Villa Dental Practice is an established practice situated in Llanelli town centre. There is no dedicated car parking, and parking spaces along the side roads near to where the practice is situated, is at a premium. However, there is a multi storey car parking facility within a short walking distance.

Patients with mobility difficulties are able to access the practice building. This is because there is a slight gradient in to the building rather than a step. In addition, some of the patient treatment rooms/surgeries are situated on the ground floor.

The practice has a reception area on the ground floor; four surgeries and two waiting areas arranged over two floors; a dental laboratory on the first floor and a designated ground floor room for the oral hygienist. Observations made during the inspection confirmed the size of the waiting areas are appropriate for the number of surgeries.

A tour of the building confirmed the practice was satisfactorily maintained internally and externally. There had been a recent redecoration programme. There was a toilet facility downstairs with ease of access for patients using wheelchairs. Fire extinguishers were placed in strategic places and had been serviced regularly.

The waiting areas, surgeries and circulation areas were clean, tidy and satisfactorily lit and ventilated.

Appropriate arrangements were seen to be in place for the safe storage and security of paper and electronic records with a corporate centrally located back-up system for electronic records. Security precautions were also in place to prevent unauthorised access to areas of the building not used by patients.

The names and qualifications of all dentists working at the practice were displayed in the foyer of the practice with a light over the plaque for visibility at night. There was a list of all staff working at the practice on the website which included their registration numbers and designation. This should be available and visible at the premises for patients who do not have access to the website.

***Recommendation***

***The practice must visibly display a list of staff working at the practice, their designation and registration numbers where applicable.***

There were contracts in place for the removal of clinical and non-hazardous waste and the bags and bins were stored securely. This ensures a safe environment for patients to access and for staff to work.

## 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; management and leadership and quality of 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 Avenue Villa 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: Avenue Villa Dental Practice**

**Date of Inspection: 11 November 2014**

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
<b>Patient Experience</b>				
	No recommendation on this occasion.			
<b>Delivery of Standards for Health Services in Wales</b>				
Pg 9	The recording of consent to treatment and the agreed care and treatment plans, is mandatory under the Standards for Health Services Wales –Doing Well Doing Better 2010 and therefore must be maintained.	A new update to our computer system which was recommended by the dental peer reviewer has now been implemented.	Angela Messer	Completed 14/11/14
Pg 10	It is recommended that both trays used for transportation of instruments are lockable.	New lockable boxes have been purchased and in use	Angela Messer	Completed 14/11/14

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
<b>Management and Leadership</b>				
Pg 12	Policies and procedures must be in line with Welsh Legislation and Best Practice and are dated to ensure the information is current.	Our head office has been informed that in future all policies that they implement are to be dated with current date and review date	Angela Messer	Completed 12/11/14
<b>Quality of Environment</b>				
Pg 15	The practice must visibly display a list of staff working at the practice, their designation and registration numbers where applicable.	Full list of staff inc designation and GDC numbers is now displayed on patient notice board	Angela Messer	Completed 21/11/14

### Practice Representative:

**Name (print):** Angela Messer

**Title:** Practice Manager

**Signature:** a c messer

**Date:** 26/11/14