

General Dental Practice Inspection Report (Announced)

91 Dental Care, Mold

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In writing:

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

Or via

Phone: 0300 062 8163
Email: hiw@gov.wales
Website: www.hiw.org.uk

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Healthcare Inspectorate Wales (HIW) is the independent inspectorate and regulator of healthcare in Wales

Our purpose

To check that healthcare services are provided in a way which maximises the health and wellbeing of people

Our values

We place people at the heart of what we do.
We are:

- Independent - we are impartial, deciding what work we do and where we do it
- Objective - we are reasoned, fair and evidence driven
- Decisive - we make clear judgements and take action to improve poor standards and highlight the good practice we find
- Inclusive - we value and encourage equality and diversity through our work
- Proportionate - we are agile and we carry out our work where it matters most

Our goal

To be a trusted voice which influences and drives improvement in healthcare

Our priorities

- We will focus on the quality of healthcare provided to people and communities as they access, use and move between services.
- We will adapt our approach to ensure we are responsive to emerging risks to patient safety
- We will work collaboratively to drive system and service improvement within healthcare
- We will support and develop our workforce to enable them, and the organisation, to deliver our priorities.



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1. What we did

Full details on how we inspect the NHS and regulate independent healthcare providers in Wales can be found on our [website](#).

Healthcare Inspectorate Wales (HIW) completed an announced inspection of 91 Dental Care, Mold on 9 May 2023.

Our team for the inspection comprised of a HIW Healthcare Inspector and a Dental Peer Reviewer.

Before our inspection, we invited the practice to hand out HIW questionnaires to patients or their carers to obtain their views on the service provided and to tell us about their experience of using the service. A total of 40 were completed. Some of the patients did not answer all of the questions. We also spoke to staff working at the service during our inspection. Feedback and some of the comments we received appear throughout the report.

Where present, quotes in this publication may have been translated from their original language.

Note the inspection findings relate to the point in time that the inspection was undertaken.

This (full) report is designed for the setting, and describes all findings relating to the provision of high quality, safe and reliable care that is centred on individual patients.

A summary version of the report, which is designed for members of the public can be found on our [website](#).

2. Summary of inspection

Quality of Patient Experience

Overall summary:

We found that 91 Dental Care was committed to providing a positive experience for patients.

All the patients who completed a HIW questionnaire rated the service provided by the dental practice as very good.

We observed staff greeting patients in a polite and friendly manner, both in person and on the telephone.

There were systems and processes in place to ensure patients were being treated with dignity and professionalism.

This is what the service did well:

- The practice had arrangements in place to protect the privacy of patients, including dedicated areas for patients to have private conversations with staff
- Patients were treated in a caring and friendly manner within surgeries that preserved their dignity
- Staff continue to record patient responses to their COVID-19 screening questions and we saw staff guiding patients to the appropriate surgeries.

Delivery of Safe and Effective Care

Overall summary:

We found that 91 Dental Care was meeting the relevant regulations associated with the health, safety and welfare of staff and patients.

The practice was very well maintained and well equipped to provide the services and treatments they are registered to deliver. All areas were very clean and free from any visible hazards.

There were good arrangements in place to ensure that X-ray equipment was used appropriately and safely.

The dental team were very knowledgeable, professional and demonstrated their understanding on where and how to access advice and guidance.

This is what the service did well:

- The practice had been designed and finished to a high standard
- Dental surgeries were clean, well equipped and fit for purpose, with well-maintained equipment
- Dedicated decontamination room
- Good quality audits had been completed.

This is what we recommend the service can improve:

- Ensure the location of the extractor fan is repositioned to ensure correct airflow in the decontamination room
- Ensure logs are maintained for all purchasing and dispensing of antibiotics
- Recording of patients' preferred language choice within clinical records.

Quality of Management and Leadership

Overall summary:

We found 91 Dental Care to have very good leadership and clear lines of accountability.

The day to day management of the practice was the responsibility of the registered manager, who we found to be very committed and dedicated to the role and the practice.

We observed that the staff team worked very well together and were committed to providing a high standard of care for patients.

Staff had access to appropriate training opportunities in order to fulfil their roles.

This is what the service did well:

- We saw that all staff, both clinical and non clinical, worked very well together as part of a team
- Very well maintained staff files
- All clinical staff had attended training relevant and were meeting the Continuing Professional Development (CPD) requirements.

This is what we recommend the service can improve:

- Complete the Health Education and Improvement Wales (HEIW) integrating smoking cessation audit.

3. What we found

Quality of Patient Experience

Patient Feedback

Patients' comments were very positive and patients rated the service as very good.

Some of the comments provided by patients included:

"Always very professional, friendly and helpful."

"I always feel the staff are enjoying their work and working together as a team. The atmosphere is very relaxed and it all makes for a pleasant experience."

"Outstanding care and attention, nothing is too much trouble. The two dentists and their support staff are cheerful, friendly and professional. I would never go anywhere else for my dental care."

"Without exception the service, quality and professionalism at this practice has been excellent. 91 Dental care always maintain the highest of standards from dentistry to administration to the physical environment of a well maintained and comfortable decor. This is a first class practice with friendly, approachable staff who maintain attention to detail ensuring the very best for patients."

"I have been coming here for over 12 years. The care and attention given is excellent. The improvement in my dental health is due to 91 Dental expertise. I cannot praise the service and staff enough."

"Consistently excellent care offered to all members of the family. Thorough and considerate."

Person Centred

Health Promotion

We viewed the changes that had been made to the environment of the practice in response to COVID-19. To protect against the risk posed by the virus and other infections, the practice continues to operate a lock door policy and we saw alcohol

hand gel dispensers and face masks placed at strategic locations throughout the practice.

Staff told us that they continued to check patient responses to the COVID-19 screening questions and we saw staff guiding patients to the waiting room and surgeries.

All patients who completed a questionnaire confirmed that the dental team had spoken to them about how to keep their mouth and teeth healthy.

We saw 'No Smoking' signs within the practice confirming that the practice adhered to the smoke free premises legislation.

Dignified and Respectful Care

There were arrangements in place to protect the privacy of patients, including areas for patients to have private conversations with staff.

All patients who completed a questionnaire stated that they felt that staff at the practice treated them with dignity and respect.

All patients stated that they felt the dental team helped them to understand all of the available options for treatment when they needed it. All patients also told us that things are always explained to them during their appointment in a way they can understand. Patients told us:

"I have been coming to 91 Dental for a number of years. The service in my opinion is outstanding, you are always made to feel at ease. I struggled in the past with dentist anxiety but 91 Dental always have taken their time and been very understanding of my difficulties. I rate this dentist very highly."

"This is an excellent practice with highly skilled and qualified staff. The professionalism and quality of staff and the care demonstrated is exceptional. Time is taken to put you at your ease at each appointment and treatment is fully and clearly explained. I have recommended this practise to family and friends."

We saw staff providing care to patients in a dignified and respectful manner and patients were spoken with in a friendly and helpful way. Doors to surgeries were kept closed during treatments.

We found that the 9 Principles, as set out by the General Dental Council (GDC), was displayed by the main entrance.

Individualised care

General information about the practice was available on its website, social media page, was displayed by the main entrance, waiting area and reception.

The practice has a patient information leaflet which contained all the information required by the regulations.

In response to the HIW questionnaire, all patients told us that they were given enough information to understand which treatment options were available, and that their medical history was checked before treatment.

All patients agreed that they were given enough information to understand the risks and benefits of the treatment options and that costs were made clear to them before treatment.

We found that treatment planning and options were recorded within the sample of patient records viewed. This meant that patients were provided with information which enabled them to make an informed decision about their treatment. Some patients told us:

“Very individualised care, always based on my very complex dental needs.”

“Very personal and always caring.”

“I am a very nervous patient and made to feel relaxed that I have such understanding dentist.”

“Extremely pleased with the care I have received. the treatment provided has meant I have improved my oral health no end and my issues have virtually gone.”

Timely

Timely Care

We saw that staff made every effort to ensure that dental care was always provided in a timely way. Staff described a process for keeping patients informed about any delays to their appointment times.

All patients who completed the questionnaire confirmed that it was very easy to get an appointment when they needed one.

All patients who completed the questionnaire said that they knew how to access the out of hours dental service if they had an urgent dental problem. An emergency number was available should patients require urgent out of hours

dental treatment. Contact information was displayed by the main entrance, provided on the practice website, answer phone message and patient information leaflet.

Equitable

Rights and Equality

There was an equal opportunities policy in place. This meant that the practice was committed to ensuring that everyone had access to the same opportunities and to the same fair treatment.

All patients who completed the questionnaire confirmed they had not faced any discrimination when accessing or using the service.

There was good assisted access to the building. Wheelchair users could access a surgery on the ground floor and the reception area. One patient told us:

“New ground floor surgery is excellent and easy access.”

Delivery of Safe and Effective Care

Safe

Risk Management

Arrangements were in place to protect the safety and wellbeing of staff and people visiting the practice.

The building appeared to be very well maintained internally and externally. We saw that all areas were very clean, tidy and free from obvious hazards.

There were no concerns expressed by patients over the cleanliness of the dental practice. All patients who completed the questionnaire felt that the dental practice was very clean.

Fire safety equipment was available at various locations around the practice, and we saw that these had been serviced within the last 12 months. All staff had received fire training.

Emergency exits were visible and a Health and Safety poster was displayed.

The practice had a range of policies and procedures, as well as various risk assessments in place, such as, fire, environmental and health and safety. All risk assessments were current and regularly reviewed.

We were assured that the premises were fit for purpose, and we saw ample documentation which showed that all risks, both internally and externally, to staff, visitors and patients had been considered. One patient told us:

“I feel safe that high standards are adhered to always here.”

Infection, Prevention, Control (IPC) and Decontamination

The practice had a dedicated area for the cleaning and sterilisation (decontamination) of dental instruments as recommended by the Welsh Health Technical Memorandum (WHTM) 01-05.

The facility was very clean, well organised, well equipped and uncluttered.

The decontamination arrangements were good. Staff demonstrated the decontamination process and we found that:

- The equipment used for the cleaning and sterilisation of instruments was in good condition
- Instruments were stored appropriately and dated

- There was ample personal protective equipment (PPE) to protect staff against injury and/or infection
- Daily maintenance checks were undertaken and recorded
- Instrument storage containers were sturdy and secure.

We found that the procedures in place for cleaning, sterilisation and storage of instruments were in line with latest best practice guidelines.

However, the extractor fan was on the clean side of the decontamination room, which creates the wrong air flow. We were informed that plans are in place to correct the airflow by repositioning the extractor fan.

The Registered Manager must ensure that the extractor fan is repositioned to ensure correct airflow.

Infection control audit had been completed using the Infection Prevention Society audit tool. We noted that the practice had plans in place to use the Health Education and Improvement Wales audit tool, which is aligned to the Welsh Health Technical Memorandum (WHTM) 01-05 guidance, for future audits.

There was a daily maintenance programme in place for checking the sterilisation equipment. A logbook was in place to record the autoclave start and end of the day safety checks.

Each surgery had a cleaning checklist, and we saw that these had been regularly completed.

An infection control policy was in place, which included reference to hand hygiene, safe handling and disposal of clinical waste, housekeeping and cleaning regimes and relevant training.

There were appropriate arrangements in place to deal with sharps injuries.

We saw records relating to Hepatitis B immunisation status all staff. However, it was unclear if one member of staff had adequate protection. The registered manager immediately arranged for the staff member to receive further checks and a risk assessment was completed. We received evidence following the inspection to show that the staff member did have adequate protection.

There was a system in place to manage waste appropriately and safely. Contract documentation was in place for the disposal of hazardous (clinical) and non-hazardous (household) waste. We saw that all waste had been segregated into the designated bags / containers in accordance with the correct method of disposal.

Medicines Management

We confirmed that the practice had emergency drugs and resuscitation equipment available which met Resuscitation Council (UK) standards. All equipment was stored appropriately, in date and was readily accessible. The practice undertook regular checks of this equipment, including drugs, and checks were appropriately logged.

There was a policy in place for managing medical emergencies and we noted that all clinical staff had received up to date cardiopulmonary resuscitation (CPR) training.

There was a medicines management policy in place. The practice dispenses antibiotics directly to patients. In the sample of ten patient records we reviewed, we found that antibiotic prescribing process was good. However, we found that no purchasing or dispensing logs were maintained for the antibiotics.

The registered manager must ensure that records are maintained for purchasing and dispensing of antibiotics and that the medicine management policy is reviewed and updated to reflect this.

Safeguarding of Children and Adults

There were policies and procedures in place to promote and protect the welfare and safety of children and adults who are vulnerable or at risk. The policies contained the contact details for the local safeguarding team, along with detailed flowcharts that informed staff of the actions required should a safeguarding issue arise.

We saw evidence that all clinical staff had completed training in the safeguarding of children and vulnerable adults. Staff were able to discuss with us, in detail, the policies and procedures and also various scenarios.

Staff told us that they felt able to raise any work related concerns directly with the registered manager and the principal dentist and were very confident that concerns would be acted upon.

The registered manager described the pre-employment checks undertaken for any new members of staff. This included checking of references and / or undertaking Disclosure and Barring Service (DBS) checks. We confirmed that all relevant staff had received a DBS check. However, two staff DBS checks were due for renewal. The registered manager immediately arranged for both to be renewed. We received evidence following the inspection to show that this has been done.

Management of Medical Devices and Equipment

We viewed the clinical facilities and found that they contained relevant equipment. The surgeries were very well organised, clean and tidy and had been finished to a high standard.

All X-ray equipment was well maintained and in good working order. Arrangements were in place to support the safe use of X-ray equipment and regular image quality assurance audits of X-rays were completed. We saw evidence of up-to-date ionising radiation training for all clinical staff.

Effective

Effective Care

The practice had arrangements in place for the acceptance, assessment, diagnosis and treatment of patients. These arrangements were documented in the statement of purpose and in policies and procedures.

Patient Records

A sample of ten patient records were reviewed. There was evidence that good clinical records were being maintained, demonstrating that care was being planned and delivered to ensure patients' safety and wellbeing.

All the records we reviewed were individualised and contained appropriate patient identifiers, previous dental history and reason for attendance. The records were clear, legible and of good quality. However, we noted that patients' language choice was not recorded within the clinical notes.

We recommend that patients' preferred language choice is recorded within their clinical records.

Quality of Management and Leadership

Leadership

Governance and Leadership

We found good leadership and clear lines of accountability in place.

The day to day management of the practice was the responsibility of the registered manager who we found to be very committed and dedicated to the role. Staff told us that they were confident in raising any issues or concerns directly with the registered manager and the principal dentist and felt well supported in their roles. Many of the staff had worked together for many years and there was good rapport amongst them.

Staff were very clear and knowledgeable about their roles and responsibilities and were committed to providing a high standard of care for patients, supported by a range of policies and procedures. We saw that staff had signed the policies to confirm they had read and understood them. All policies and procedures contained an issue and review date ensuring that they were reviewed regularly and that practices were up to date.

There were appropriate arrangements for the sharing of information through practice wide team meetings. Minutes of meetings were maintained, with a breadth of relevant topics covered during these meetings.

All clinical staff were registered with the General Dental Council and had appropriate indemnity insurance cover in place. The practice also had a current public liability insurance certificate available.

Workforce

Skilled and Enabled Workforce

All staff working at the practice had a contract of employment. We also saw that there was an induction programme in place, which covered training and relevant policies and procedures. We saw evidence that staff appraisals were also undertaken. It was positive to note that appraisals were up-to-date and comprehensive.

Staff files contained the necessary information to confirm their on-going suitability for their roles. Training certificates were retained on file as required. All clinical

staff had attended training on a range of topics relevant to their roles and meeting the Continuing Professional Development (CPD) requirements.

The registered provider confirmed that they were aware of their duties and obligations as set out in the Private Dentistry (Wales) Regulations 2017.

Culture

People Engagement, Feedback and Learning

There was a written complaints procedure in place. This was available to all patients bilingually in the waiting area. Details were also included within the patient information leaflet and statement of purpose.

We reviewed the practice's complaints handling policy and, at the point of inspection, no formal complaints had been received by the practice.

We discussed the mechanism for actively seeking patient feedback, which is done by providing patients with questionnaires. Patients are also able to give feedback via social media and a comment box is also available in the waiting room. Feedback analysis is prepared by the registered manager and discussed with the dental team.

Learning, Improvement and Research

Quality Improvement Activities

It was very evident that staff at the practice were seeking to continuously improve the service provided. We saw that various audits had been completed, such as cross infection, clinical notes, X-ray quality, antibiotic prescribing, hand hygiene, periodontal screening and patient feedback.

We recommended that the practice also completes the Health Education and Improvement Wales (HEIW) integrating smoking cessation audit.

The registered manager should arrange for the HEIW integrating smoking cessation audit to be completed.

We found the dental team to be proactive, knowledgeable, professional and demonstrated their understanding on where and how to access advice and guidance.

4. Next steps

Where we have identified improvements and immediate concerns during our inspection which require the service to take action, these are detailed in the following ways within the appendices of this report (where these apply):

- Appendix A: Includes a summary of any concerns regarding patient safety which were escalated and resolved during the inspection
- Appendix B: Includes any immediate concerns regarding patient safety where we require the service to complete an immediate improvement plan telling us about the urgent actions they are taking
- Appendix C: Includes any other improvements identified during the inspection where we require the service to complete an improvement plan telling us about the actions they are taking to address these areas.

The improvement plans should:

- Clearly state how the findings identified will be addressed
- Ensure actions taken in response to the issues identified are specific, measurable, achievable, realistic and timed
- Include enough detail to provide HIW and the public with assurance that the findings identified will be sufficiently addressed
- Ensure required evidence against stated actions is provided to HIW within three months of the inspection.

As a result of the findings from this inspection the service should:

- Ensure that findings are not systemic across other areas within the wider organisation
- Provide HIW with updates where actions remain outstanding and/or in progress, to confirm when these have been addressed.

The improvement plan, once agreed, will be published on HIW's website.

Appendix A - Summary of concerns resolved during the inspection

The table below summaries the concerns identified and escalated during our inspection. Due to the impact/potential impact on patient care and treatment these concerns needed to be addressed straight away, during the inspection.

Immediate concerns Identified	Impact/potential impact on patient care and treatment	How HIW escalated the concern	How the concern was resolved
No immediate concerns were identified on this inspection.			

Appendix B - Immediate improvement plan

Service: 91 Dental Care, Mold

Date of inspection: 9 May 2023

The table below includes any immediate non-compliance concerns about patient safety identified during the inspection where we require the service to complete an immediate improvement plan telling us about the urgent actions they are taking.

Risk/finding/issue	Improvement needed	Standard / Regulation	Service action	Responsible officer	Timescale
No immediate improvement plan was required for this inspection.					

The following section must be completed by a representative of the service who has overall responsibility and accountability for ensuring the improvement plan is actioned.

Service representative:

Name (print):

Job role:

Date:

Appendix C - Improvement plan

Service: 91 Dental Care, Mold

Date of inspection: 9 May 2023

The table below includes any other improvements identified during the inspection where we require the service to complete an improvement plan telling us about the actions they are taking to address these areas.

Risk/finding/issue	Improvement needed	Standard / Regulation	Service action	Responsible officer	Timescale
The extractor fan was on the clean side of the decontamination room, which creates the wrong air flow during the decontamination process.	The registered manager must ensure that the extractor fan is repositioned to ensure correct airflow in the decontamination room.	WHTM 01-05	Electrician has assessed fan position and alterations necessary to improve air flow and is finalising a quote for the work required - the work will then be booked dependent on availability of electrician with aim to complete asap. Photo evidence can be provided when work complete.	Judith Townshend (dentist/principal)	Work to be completed by end of September 2023

<p>The practice dispenses antibiotics directly to patients. However, no purchasing or dispensing logs were maintained to check what was purchased is balancing with the antibiotics dispensed.</p>	<p>The registered manager must ensure records are maintained for purchasing and dispensing of antibiotics; and review and update the medicine management policy to reflect this.</p>	<p>PDR 13</p>	<p>Book purchased - headings filled in and staff training on how and when to fill in log. Log is kept with antibiotics so when new purchases arrive or antibiotics removed to dispense, log can be filled in immediately.</p>	<p>Lucy Stevens (head nurse)</p>	<p>Done Book in place and being used</p>
<p>All records we reviewed were individualised and contained appropriate patient identifiers, previous dental history and reason for attendance. However, patients' language choice was not recorded, and patients would need to ask for this service.</p>	<p>Patients' preferred language choice should be recorded within clinical records.</p>	<p>PDR 20</p>	<p>A section on the dental software under pt details has been assigned to language of choice. When pts attend for a new pt consultation or routine examination, they will be asked their language of choice and the details filled in.</p>	<p>Judith Townshend (dentist/principal)</p>	<p>Done Staff shown where and how to fill in</p>
<p>No HEIW Integrated smoking cessation audits have been completed to</p>	<p>The registered manager should arrange for the HEIW integrating smoking</p>	<p>PDR 16</p>	<p>Forms downloaded and have started the</p>	<p>Judith and Chris Townshend</p>	<p>Aim to complete</p>

ensure patients are supported with their tobacco dependency.	cessation audit to be completed.		audit. Will fill in for every pt who uses tobacco/e cig/tobacco product seen between July 1st 2023 and September 30 th 2023. Action plan will be recorded and implemented as appropriate. This can be submitted if required as evidence	(dentist/principal)	by end Sep 2023
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The following section must be completed by a representative of the service who has overall responsibility and accountability for ensuring the improvement plan is actioned.

Service representative

Name (print): Judith Townshend

Job role: Dentist/principal

Date: 3/7/23