

General Dental Practice Inspection (Announced)

Hywel Dda University
Health Board,
Portland Street Dental
Practice.

6 May 2015

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1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection to Portland Street Dental Practice at 23 Portland Street, Aberystwyth, Ceredigion SY23 2DX within the area served by Hywel Dda University Health Board on 6 May 2015.

During the inspection we considered and reviewed the following areas:

- Patient experience
- Delivery of Health and Care Standards
- Management and leadership
- Quality of environment.

2. Methodology

HIW inspections of General Dental Practices seek to establish how well practices meet the Health and Care Standards¹. 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 2008² and the Private Dentistry (Wales) (Amendment) Regulations 2011³. Where appropriate we consider how the practice meets these regulations, as well as any relevant professional standards and guidance.

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

¹ <http://www.wales.nhs.uk/governance-emanual/how-the-health-and-care-standards-are-st>

² <http://www.legislation.gov.uk/wsi/2008/1976/contents/made>

³ <http://www.legislation.gov.uk/wsi/2011/2686/contents/made>

- Examination of practice policies and procedures
- Examination of equipment and premises
- 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

Portland Street Dental Practice provides services to approximately 12000 patients in the Aberystwyth area of Ceredigion. The practice forms part of dental services provided within the geographical area known as Hywel Dda University Health Board.

Portland Street Dental Practice is a mixed practice providing both private and NHS dental services.

The practice employs a staff team which includes seven dentists (one is a locum and one undertaking training), two hygienists, one therapist, eleven nurses (one is also a patient co-ordinator) two of which are trainees, one practice manager and three reception staff.

A range of services are provided. These include:

- Diagnosis and prevention
- Restorative
- Crown and Bridge
- Cosmetic Treatment
- Dentures
- Implants
- Sports gum shields.

4. Summary

HIW explored how Portland Street Dental Practice meets the standards of care set out in the Health and Care Standards April 2015.

Overall, patients told us they were satisfied with the service they received from the dental practice and they were given enough information about their treatment. Feedback from the HIW patient questionnaires was very positive.

We found care and treatment was planned and delivered safely to patients. We found that all surgeries were visibly clean, tidy and well-organised. We saw evidence that indicated that the care provided was of a high standard.

The practice had a range of relevant policies and procedures in place which ensured the provision of safe care to patients. We saw that the practice was being efficiently run and staff worked effectively together. There was a very professional and cohesive team.

We found the practice was exceptionally clean, modern, spacious and appropriately maintained to provide a safe environment for patients to receive treatment. Access to the practice is suitable for wheelchair users.

5. Findings

Patient Experience

Patients told us they were satisfied with the service they received from the dental practice and they were given enough information about their treatment. Feedback from the HIW patient questionnaires was very positive.

Before the inspection, the practice was asked to give out HIW questionnaires to obtain patient views on the dental services provided. Twenty five patient questionnaires were completed prior to the date of inspection. We also spoke to three patients on the day of inspection. Patient feedback was very positive. All patients said they were satisfied with the care and treatment they received at the practice and felt welcomed by staff. All patients told us they had not experience any delay in being seen by the dentists.

Patient comments included the following:

“...this is an exceptional practice. I feel privileged to be a patient.”

“The practice is extremely well organised and efficient with a caring ethos towards the patient.”

“The treatment I receive here at Portland is by far the best I have ever experienced. The whole team go the extra mile to ensure your experience is a positive one. Their enthusiasm and patient care is outstanding – 5 star service.”

“The practice is always very clean and airy and all the staff very helpful at all times.”

“Very happy with the excellent, high standard service.”

“Superb service – a model example of how a practice should be run.”

“When I first came to this practice I was very nervous about having dental treatment. My dentist has been excellent and I no longer have the same fears.”

The majority of patients said they knew how to access out of hours dental services. We saw a sign in the practice window with the emergency contact number and we confirmed there was a contact number provided on the

practice's answer phone message and information was provided on the practice's website.

All patients said they received enough information about their treatment. Staff told us treatment options were discussed with patients and we found evidence of this recorded in patient notes.

There was a flexible appointment system in place and patients could book appointments both in advance and on an emergency basis, enabling patients to be seen quickly if required.

There was a very good standard of practice information leaflets in both English and Welsh available in the reception/waiting area. The practice also had an excellent introduction pack which was sent to every new patient. This contained pertinent information, again in both English and Welsh. We did note however that the NHS price list was not included. There was a website which included relevant information for patients and was clear and easy to navigate.

Improvement needed

The practice need to include the NHS price list in their new patient introduction pack.

The practice also had a patient co-ordinator who was a first point of contact for any new patients. This was an example of noteworthy practice. Patients stated it made them feel at ease and they knew who to ask for on their first visit.

The practice had a range of health promotion information available in the waiting areas, including smoking cessation and mouth cancer awareness.

The practice had a good system for regularly gaining patient views both by questionnaires and a suggestion box which we saw in the waiting area. We saw the practice had analysed survey results and addressed any potential changes needed in the practice. This is a good example of how the practice uses patient feedback to continually assess the quality of the service provided.

When asked about making complaints, twenty patients told us they knew how to make a complaint. We saw that the complaints process was displayed in the downstairs waiting room, information on making a complaint was included in the patient introduction pack and a full complaints policy was available on the practice's website. However HIW's address was not included. This was discussed with the practice manager and the display in the waiting room was rectified immediately.

Delivery of Health and Care Standards

Overall, we found care and treatment was planned and delivered safely to patients. We found that all surgeries were visibly clean, tidy and well-organised. We saw evidence that indicated that the care provided was of a high standard.

Clinical facilities

We looked at the clinical facilities of all seven surgeries at the practice and found these contained relevant equipment for the safety of patients and staff. All surgeries were visibly clean, tidy and well-organised. All surfaces were free from clutter to enable effective cleaning. We saw evidence of the daily cleaning regimes carried out by the nurses which were clearly recorded. We also saw evidence that portable appliance testing (PAT) had been conducted to check that small electrical appliances were fit for purpose and safe to use.

Decontamination of instruments

The practice had two small dedicated rooms for the cleaning and sterilisation of dental instruments. We found there were suitable processes in place to prevent patients from cross infection. The rooms were, on the whole, suitably laid out to allow instruments to be cleaned effectively, although there were plans in place to relocate the decontamination room, commencing in June of this year. This also included the purchase of new equipment. There was also a noteworthy system of dating to ensure that instruments were used within the recommended storage period.

We saw that the infection control policy was available. We also saw that there were suitable log books completed for the daily testing and maintenance of cleaning equipment. The practice also had a daily log book for other daily checks performed by the nurses. All logbooks had been completed to a high standard. This meant the practice had a good system for ensuring cleaning equipment was working correctly.

We saw evidence that staff had completed training on decontamination and infection control. The practice conducted a recent infection control audit and had used the audit tool developed by Cardiff University, as recommended by the Wales specific WHTM 01-05 guidelines.

Waste disposal

Waste was handled, stored and disposed of appropriately at the practice and a current waste disposal contract was in place.

Radiographic (x-ray) equipment

We found, with the exception of one surgery, that suitable arrangements were in place for the safe use of radiographic (x-ray). This surgery requires that the isolation switch be repositioned, outside of the controlled zone. Relevant documentation, including safety checks, maintenance and testing were available. We saw evidence that all qualified clinical staff had conducted appropriate training on ionising radiation. We looked at the radiation protection file, which includes details about the x-ray equipment and procedures for staff to follow and it contained all relevant information.

Improvement needed

The practice needs to ensure that the x-ray isolation switch is outside of the controlled zone in all surgeries.

Medical emergency equipment and medication

Staff had access to resuscitation equipment and medication in the event of a patient emergency (collapse) at the practice. The practice had a suitable system for ensuring that resuscitation equipment and emergency medication was regularly checked to ensure it was safe to use. We saw evidence that staff at the practice had received up-to-date training on how to deal with medical emergencies and there were appointed first aiders. This meant that in the event of a medical incident, staff had the necessary skills and access to life saving equipment and drugs to respond promptly. We did however discuss, with the principal dentist, the benefits of a children's pre measured auto-injector (for use in the case of a severe allergic reaction) with the principal dentist and this was ordered immediately.

Patient records

We looked in detail at a sample of twenty one patient records. Overall, we found the record keeping was of a very high standard.

Treatment procedures and options were explained to patients verbally and recorded in the patients notes. All patients received treatment plans and all aspects of the individualised electronic records were fully completed. The practice had a very good referral tracking system which ensured that patients received appropriate and timely care.

Management and Leadership

The practice had a range of relevant policies and procedures in place which ensured the provision of safe care to patients. We saw that the practice was being efficiently run and staff worked effectively together. There was a very professional and cohesive team.

Portland Street Dental Practice is independently owned by two principal dentists. The day-to-day management was the responsibility of the practice manager. We saw the practice was being run efficiently and staff worked effectively together as a team. Staff we spoke to on the day of inspection said they were happy in their roles, had a clear understanding of their responsibilities and felt supported by the principal dentist. In our discussions with the dentists, it was clear they had a high level of care and compassion for their patients and were keen to work in their best interests at all times.

We found the practice had a range of relevant policies, procedures and maintenance certificates in place and there was a suitable system to ensure these policies were regularly reviewed. Policies were individual to the practice and were dated on creation and when updated.

The principal dentist told us that staff meetings were conducted approximately every two weeks alternating between one short and one longer meeting. We saw examples of recent meetings notes which detailed discussions and actions from the meetings. Staff told us they were encouraged to raise any concerns during these meetings, but would also feel comfortable in raising concerns with the principal dentists or the practice manager at any time.

We saw evidence that staff had annual appraisals, these ensure the competency of staff and identify any training or development needs.

The practice is an established training practice for dentists and currently had one dentist undertaking a foundation year of dental training. The practice had a dedicated area for trainees to study and this was indicative of the commitment to offer high standards of support to the trainee dentist.

We looked at the clinical governance arrangements in place at the practice. We saw evidence the dentists conducted a range of peer review audits together which had been documented. This meant that the practice had suitable clinical governance arrangements in place to help ensure the quality and safety of the care provided.

We looked at staff information at the practice. We confirmed that all clinical staff were registered with the General Dental Council and had appropriate indemnity

insurance. We also saw evidence that all staff had employment contracts in place.

We saw excellent examples of personal continued professional development (training) completed by staff at the practice, which showed that staff had access to training opportunities relevant to their role. This meant patients could be assured they are treated by staff who have appropriate skills and up-to-date training and who were confident and acquainted with their place of work. Staff files were well-organised and information was easy to locate.

At the time of our inspection, all dentists had a Disclosure and Barring Service (DBS) certificate dated within the last three years in line with the regulations for private dentistry.

The practice had suitable arrangements for the recording of accidents and incidents. Suitable arrangements for occupational health support were also in place through the local health board. We saw records to show that all clinical staff had received appropriate vaccinations to protect them against blood-borne viruses.

We found there were suitable arrangements for recording and responding to concerns (complaints). We saw that all complaint correspondence was kept together in a paper file. Verbal and informal complaints were appropriately captured on an electronic system.

We found the complaints process complied with arrangements in the NHS patient complaints procedure known as 'Putting Things Right' and there was a list of relevant organisations for patients to contact in the event they had a complaint. However it did not comply with The Private Dentistry (Wales) Regulations 2008, whereby the HIW address must also be made available for private patients. When this was highlighted it was rectified immediately.

Quality of Environment

We found the practice was exceptionally clean, modern, spacious and appropriately maintained to provide a safe environment for patients to receive treatment. Access to the practice is suitable for wheelchair users.

The practice is located in the town centre of Aberystwyth. The practice has seven surgeries, three on the ground floor and three on the first floor and one on the second floor. The practice does not have dedicated patient car parking, but on road car parking is available close to the practice.

Access to the practice is suitable for wheelchair users and door frames throughout the ground floor of the practice were suitably wide to allow access for wheelchairs. There is no lift to the first or second floor, but wheelchair users would be seen in the ground floor surgeries.

A tour of the building confirmed the practice was very well maintained internally and externally. The practice was exceptionally clean, tidy and satisfactorily lit throughout. It provided a very pleasant environment for patients to receive treatment. The waiting and reception areas were suitable sizes for the number of surgeries.

The standard of décor and maintenance on most of the surgeries was high, although three surgeries required sealant between floor and wall surfaces.

Improvement needed

The practice needs to ensure that the floor to wall surface is adequately sealed to promote good infection control measures and to minimise cross contamination.

The practice had three toilets, two for the public and one for staff. One ground floor toilet was suitable for wheelchair users and was decorated to a very high standard. All toilets were visibly clean and had suitable hand washing facilities for infection control.

There was a sign outside the practice with the opening hours and emergency contact number. The names, qualifications and the General Dental Council registration numbers of staff members were displayed by the entrance and on a poster by the reception area. Price lists were also displayed in the reception area.

In accordance with the private dentistry regulations, all dentists providing private treatment were registered with HIW and their registration certificates were displayed within the practice.

The fire exits were signposted and fire extinguishers had been appropriately inspected. We saw evidence that there were measures and systems in place to protect staff and patients in the event of a fire. We also found there were suitable arrangements to prevent unauthorised access to the building. Patient records and information were stored securely and electronic records were backed-up daily onto an external device. This meant the practice has taken measures to ensure the safety and security of patients and their information.

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 Health and Care Standards 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 the Portland Street 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: Portland Street Dental Practice

Date of Inspection: 6 May 2015

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
Patient Experience				
Page 7	The practice need to include the NHS price list in their new patient introduction pack to ensure compliance with GDC Standards 2.4.2.	The practice will include NHS fees in the welcome pack that goes out to new patients.	Mr Huw Davies	Immediately
Delivery of Health and Care Standards				
Page 9	The practice needs to ensure that the x-ray isolation switch is outside of the controlled zone in all surgeries to ensure compliance with the IRR99, the IRMER 2000 and the Health and Care Standards 2.9.	The isolation switch will be moved to outside the area.	Mr Huw Davies	Immediately an electrician has been to assess and will be carrying out the work on

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
				30.5.15
Management and Leadership				
	No improvement needed.			
Quality of Environment				
Page 12	The practice needs to ensure that the floor to wall surface is adequately sealed to promote good infection control measures and to minimise cross contamination. This will comply with GDC Guidance 1.5; Health and Care Standards 2.9 and Workplace (Health, Safety and Welfare) Regulations 1992.	The skirting and floor seals will be sealed	Mr Huw Davies	Immediately

Practice Representative:

Name (print): Mr Huw Davies

Title: Practice Principal.

Date: 22 May 2015