

**General Dental Practice  
Inspection [Announced]  
Cardiff and Vale University  
Health Board  
VIP Dental Practice, Cowbridge**

**1 September 2014**

This publication and other HIW information can be provided in alternative formats or languages on request. There will be a short delay as alternative languages and formats are produced when requested to meet individual needs. Please contact us for assistance.

Copies of all reports, when published, will be available on our website or by contacting us: In writing:

**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)

## Contents

1.	Introduction .....	2
2.	Methodology.....	2
3.	Context.....	4
4.	Summary.....	5
5.	Findings .....	7
	Patient Experience .....	7
	Delivery of Standards for Health Services in Wales .....	9
	Management and Leadership.....	12
	Quality of Environment .....	15
6.	Next Steps .....	17
	Appendix A.....	18

## 1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection of VIP Dental Centre, 63 High Street, Cowbridge, Vale of Glamorgan, CF71 7AF (which forms part of Cardiff and Vale University Health Board), on 1 September 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; equipment and premises

---

<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)

- Information within the practice information leaflet and website

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.

Those who read these reports are requested to note that dental inspections capture a snapshot of the application of standards at the practice visited on the day of the inspection.

### 3. Context

VIP Dental Centre provides services to NHS and private patients in the Cowbridge area. The practice forms part of a range of dental services provided within the geographical area known as Cardiff and Vale University Health Board. The practice employs a staff team which includes 1 principal dentist and 1 associate dentist; 1 hygienist; 1 receptionist; 3 dental nurses and a practice manager.

A variety of services are provided. These include:

- Oral health education
- Oral health check-up
- Preventive treatments
- Routine and advanced restorative treatments
- Periodontal/Gum treatments
- Plaque and stain removal
- Emergency dentistry
- Children's dentistry
- Denture fitting and repairs
- Digital x-rays

## 4. Summary

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

Overall, we found that the provision of dental care and treatment was supported by a range of well established management systems and processes which ensured that patients care and treatment was delivered safely and in a timely way. The practice had very recently been merged with Integrated Dental Holdings<sup>2</sup> (IDH) and it was evident that improvements were being made to the management systems and processes. This process of change was being supported by the IDH transition manager and the experienced practice manager.

In addition to the above, the following points relate to what people told us and what we found at this inspection:

- Patients told us that they were treated with respect; felt the practice was welcoming and that they were involved in discussions about their care.
- Patients said they received sufficient information about their treatment and care and treatment was planned and delivered in a way that was intended;
- Five of the six patients we spoke to said they were unsure of how to make a complaint about their dental care and treatment. They also told us however that they would be confident about raising any issues of concern with the practice manager if so required.
- Patients and staff can be assured the practice is well run;
- Overall, patients and staff can be assured the practice environment is safe and their privacy is protected.

We also found that there were several aspects of the service which need to be improved. These were:

- The practice is advised to make improvements to the signs within the building so that patients are easily able to locate toilet facilities.

---

<sup>2</sup> Integrated Dental Holdings (IDH) is Europe's largest dental corporate company.

- The practice should ensure that patient records are complete and contain satisfactory information about medical histories and why patient dental x-rays are taken, the quality of those x-ray images and what they show.
- We recommend that the image quality of x-rays is checked/audited on a regular basis. This is to ensure that the quality of x-ray imaging is satisfactory and to enable the practice team to identify common errors in dental imaging;
- We suggest as part of the planned refurbishment works that the practice consider options for improving the privacy provided to patients in the treatment room by the glass wall behind reception. Checks should also be carried out to confirm that the glass used prevents radiation from x-rays reaching the reception area.

## 5. Findings

### *Patient Experience*

**Patients who spoke with us were unanimous in their opinion that they were treated with respect by all staff at the practice. They also told us that they had been involved in discussions about their care and treatment, were given information regarding alternative treatment options and received sufficient information about their treatment.**

Conversations with six patients demonstrated that they were made to feel welcome by the practice team. The practice operated an appointment system which was flexible. Patients could book appointments in advance.

Patients who spoke with us at this inspection said that they had never had a problem making an appointment at this practice. They also told us that the longest delay experienced in being seen to date was between 5-10 minutes after their appointment time.

Conversations with patients with regard to whether they felt they were given sufficient information about their treatment options revealed that they were very satisfied with the services at VIP dental practice.

The practice provided an example of how they have improved the service they provide to patients based on patient feedback. Patients told the practice that they would like more availability of NHS appointments at the practice. The practice responded by increasing the NHS appointment provision from part time to full time.

We were informed that there would be further focus on patient feedback in the near future as a result of the recent merger with Integrated Dental Holdings (IDH). Specifically, the IDH transition manager confirmed that the practice would continue to regularly assess patient views now that they are part of the IDH group. This would be achieved by conducting a patient survey every six months.

Examination of a sample of patient records and conversation with the clinical staff confirmed that treatment options were discussed with patients following consultations. Records scrutinised also showed that they were updated after each visit, detailing the treatment patients had been given, as well as future plans.

Most of the patients who agreed to speak with us at this inspection indicated that they did not know how to make a complaint or raise concerns about any aspect of their dental care and treatment. Patients did go on to tell us that they were confident they could find out how to make a complaint, should the need arise. We also found that the practice had a poster in the waiting room detailing how a patient can make a complaint, although this was not highlighted and was not easy to see.

***Recommendation***

***The practice is advised to make improvements to the signs within the building. For example, so that patients are easily able to locate toilet facilities.***

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

### **Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare**

Scrutiny of a sample of five dental records indicated that peoples' needs were assessed and care and treatment was planned and delivered in accordance with their individual treatment plans. Records were kept at the practice on a computer database, with some information such as new, or updated medical histories, being held on paper.

We found room for improvement in some patient records. Recording of patients' initial medical history was inconsistent, some were recorded well. Patients' subsequent medical history was usually well updated.

We found Basic Periodontal Examinations (BPE's)<sup>3</sup> were inconsistently recorded and included no obvious evidence of prescription of hygienist care. Patients' treatment plans and consent was well recorded, however these would benefit from more detail of the treatment options discussed with the patient.

In two of the five sets of patient records we reviewed, there was no recording of the patients' previous dental or social history. In addition, two sets of patient records failed to contain evidence of the reasons why dental x-rays had been undertaken.

### ***Recommendation***

***The practice should ensure that patient records are complete, in particular with regard to initial and updated medical histories and should contain satisfactory information about the reasons why patient dental x-rays are undertaken. The practice should also ensure that***

---

<sup>3</sup> A periodontal examination is a clinical examination of the gums. The BPE is a screening tool which is used to quickly obtain a rough picture of the periodontal condition and treatment needs of an individual. Regular recording of the BPE allows indicated treatment to be tailored specifically to a patient's needs and for the subsequent gum health to be reviewed and monitored.

***patient records contain satisfactory evidence of the justification for the radiographs as well as a report on the quality of each radiograph and of the related clinical findings.***

***Additionally, a regular audit of radiographic quality is strongly recommended.***

We found that the practice arrangements in relation to the use of x-ray equipment were in keeping with existing Standards and Regulations<sup>4</sup>. This included training updates for all appropriate staff including dentists.

The practice manager confirmed that two staff would be attending first aid training in the next three months. We were also told that there is always a member of staff working at the practice who is trained in the use of first aid.

The practice had recently taken delivery of new resuscitation equipment provided by IDH, and the practice had procedures in place to deal with emergencies; resuscitation equipment such as portable oxygen and airways being available for use. 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. The provision of new emergency medical equipment (including a defibrillator), drugs and related standard protocols by IDH was impressive.

Scrutiny of the procedures in place concerning decontamination of instruments revealed that there were appropriate measures and checks in place. This included excellent pre-sterilisation cleaning methods, instrument storage and the way which staff transported used instruments between surgeries (patient treatment rooms) and the decontamination room.

Observation of the practice environment further revealed that there were dedicated hand washing facilities in key areas of the practice premises. Conversation with the practice manager led to confirmation that the practice completes annual audits (checks) in relation to infection control requirements in

---

<sup>4</sup> Ionising Radiation Regulations 1999; and Ionising Radiation (Medical Exposure) Regulations 2000 (IR(ME)R)

accordance with the document called the Welsh Health Technical Memorandum (WHTM 01-05) <sup>5</sup>

We also found that the practice had recently changed their service provider and had a new contract in place to ensure the correct handling, storage and disposal of hazardous waste.

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 Better 2010'<sup>6</sup>. Our observations served to confirm that the practice was meeting the standards as required.

---

<sup>5</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.

<sup>6</sup> <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*

### **Patients and staff can be assured the practice is well run.**

An experienced practice manager is responsible for the day to day running of the practice and following the recent merger with Integrated Dental Holdings (IDH) the practice has the support of a transition manager for an interim period to ensure a seamless transition.

Overall, we found that the practice was well run as the service was underpinned by a range of management systems and quality assurance processes to ensure that patients' care and treatment was delivered safely and in a timely way. We also found that the staff team was well established.

Administrative and nursing staff we spoke to told us that they felt well supported in their work. They also told us that they, along with dentists and the practice manager, attended regular staff meetings where they have opportunities to raise any issues of concern about services being provided to patients. Such meetings are also used to convey new/relevant information to the dental team. We did not look at any of the notes that had been taken at those events.

We were also told that if there were any incidents at the practice, they are discussed and lessons learned to ensure that the same thing could not happen again.

Conversation with the practice manager further demonstrated that staff were able to discuss practice and performance issues with her on a regular, informal basis. Staff are also provided with an annual appraisal as a means of focussing on their performance for the past year and identifying training needs for the coming year.

Scrutiny of a range of written policies and procedures in place demonstrated that staff had easy access to guidance with regard to safe working practises. Conversations with staff also served to verify their ability to seek day to day advice about working practises to protect patients and themselves. The policies we reviewed contained version control and detail of when they were initially agreed and when they are subsequently reviewed (to ensure that they conform to current professional guidance and standards).

We found that VIP Dental Practice had a complaints (concerns) policy which was consistent with 'Putting Things Right'<sup>7</sup>. The practice provides information on 'Putting Things Right' to patients when responding to any concerns or complaints. Examination of complaint records at this inspection demonstrated that the practice's approach to dealing with complaints was consistent with current GDC Standards (?)

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

Scrutiny of a sample of radiation protection records confirmed that the practice has a named radiation protection supervisor and adviser. We also found that there were working instructions in place for patient and staff protection. This included protocols in the event of equipment malfunction as well as the provision of alternative wet x-ray films in case the existing digital equipment should fail.

Currently the practice does not use personal radiation dose monitoring badges;<sup>8</sup> however, these will be provided through practice improvements to ensure best practice.

We found limited evidence of checks/audit activity in relation to x-ray imaging. Dental imaging is essential to dentists for diagnosis, treatment planning, monitoring treatment and monitoring lesion development. The nature of capturing x-rays inside the mouth can sometimes be difficult. This is because some patients are unable to remain still, or are unable to tolerate the (necessary) dental equipment within the mouth even for a short period. This

---

<sup>7</sup> In April 2011 the Welsh Government introduced new arrangements for the management of concerns called Putting Things Right. It aimed to make it easier for patients and carers to raise concerns; to be engaged and supported during the process; to be dealt with openly and honestly; and for bodies to demonstrate learning from when things went wrong or standards needed to improve.

<sup>8</sup> A radiation dose film badge monitors the radiation doses of people working with radioactive materials

can lead to poor quality x-rays which can create difficulties in determining the course of patients' treatment.

Several of the stored digital x-rays appeared to be scratched or damaged leading to reduced diagnostic value; this was discussed - as such problems, whilst not uncommon on wet films, are less common with digital images. It was concluded by staff members that some of the digital sensor plates are getting old and need to be replaced.

### ***Recommendation***

***We recommend that the image quality of x-rays is checked/audited on a regular basis. This is to ensure that to the quality of x-ray imaging is satisfactory and to enable the practice team to identify common errors in dental imaging.***

We found that the practice had a sharps bin which was located in the cupboard of a treatment room. The practice was advised that the bin should be located on a wall to ensure ease of access by practice staff. The IDH transition manager confirmed this would be undertaken as soon as possible.

It was also noted that not all clinical staff wore clinical clothing when treating patients. Clinical staff should wear clinical clothes when treating patients and outdoor clothing when outside of the building. The two should not be mixed (i.e. outdoor trousers with a clinical top) as this represents a potential hygiene risk.

## *Quality of Environment*

**Overall, patients and staff can be assured the practice environment is safe and their privacy is protected.**

VIP Dental practice is an established practice situated in Cowbridge. Car parking spaces were available along the main road where the practice is situated, however, there was no reserved parking or disabled parking bay directly outside. Patients with mobility difficulties are able to access the practice building via a fixed ramp leading to the main entrance. However, the main door to the practice did not have a push button. Therefore, any patient who uses a wheelchair would not be able to independently gain access to the building. The practice acknowledges this and the reception staff open the door for patients who require assistance. One of the patient treatment rooms/surgeries was situated on the ground floor.

We were informed that a number of changes and improvements would be made to the environment of the practice. We therefore suggested that the practice may wish to consider installing a push button entry system to the main entrance to allow easier access for less mobile patients.

A tour of the building confirmed the practice was satisfactorily maintained internally and externally. The practice has a reception area on the ground floor, three surgeries and two waiting areas arranged over two floors. Observations made during the inspection confirmed the size of the waiting areas was appropriate for the number of surgeries. The treatment room located behind the reception area downstairs is glass fronted and we observed at times it was possible to hear treatment taking place. We observed that the reception desk is located directly outside this surgery, and when x-ray equipment is being operated in this treatment room, this is directed towards the reception staff. It is important that the practice ascertains whether the glass front to the treatment room provides adequate protection to any reception staff.

### ***Recommendation***

***We suggested as part of the planned refurbishment works that the practice consider options for improving the privacy provided to patients in the treatment room behind reception***

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. Discussion with

reception staff confirmed electronic records were 'backed up' by an external company offsite and onsite, every two days.

Names and qualifications of all dentists working at the centre together with an 'out of hours' contact number were clearly displayed to inform patients attending for treatment. A range of patient information leaflets and posters were displayed.

However, much of the information displayed in waiting areas or corridors informing patients was word based and we suggested to the practice manager that adding more pictorial information may be beneficial to patients. The practice manager agreed to address this issue.

## 6. Next Steps

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

**Date of Inspection: 1 September 2014**

Page Number	Recommendation	Health Board Action	Responsible Officer	Timescale
	<b>Patient Experience</b>			
8.	The practice is advised to make improvements to the signs within the building. For example, so that patients are easily able to locate toilet facilities.			
	<b>Delivery of Standards for Health Services in Wales</b>			
9.	The practice should ensure that patient records are complete, in particular with regard to initial and updated medical histories and should contain satisfactory information			

Page Number	Recommendation	Health Board Action	Responsible Officer	Timescale
	<p>about the reasons why patient dental x-rays are undertaken. The practice should also ensure that patient records contain satisfactory evidence of the justification for the radiographs as well as a report on the quality of each radiograph and of the related clinical findings.</p> <p>Additionally, a regular audit of radiographic quality is strongly recommended.</p>			
<b>Management and Leadership</b>				
14.	<p>We recommend that the image quality of x-rays is checked/audited on a regular basis. This is to ensure that to the quality of x-ray imaging is satisfactory and to enable the practice team to identify common errors in dental imaging.</p>			
<b>Quality of Environment</b>				

Page Number	Recommendation	Health Board Action	Responsible Officer	Timescale
15.	We suggested as part of the planned refurbishment works that the practice consider options for improving the privacy provided to patients in the treatment room behind reception			

**Practice Representative:**

**Name (print):** .....

**Title:** .....

**Signature:** .....

**Date:** .....