

**General Dental Practice
Inspection [Announced]
Abertawe Bro Morgannwg
University Health Board,
Swansea Orthodontic Practice**

2 October 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
Fax: 0300 062 8387
Website: www.hiw.org.uk

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1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection to Swansea Orthodontic Centre at 63, Sketty Road, Uplands, Swansea, SA2 0EN within the area served by Abertawe Bro Morgannwg University Health Board on 2 October 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 Dental Practices seek to establish how well practices meet the standards in *Doing Well, Doing Better: Standards for Health Services in Wales*¹.

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 dental records
- Examination of practice policies and procedures
- Examination of equipment and premises
- Information within the practice information leaflet and website.

¹ Doing Well, Doing Better: Standards for Health Services in Wales came into force from 1st April 2010. The framework of standards sets out the requirements of what is expected of all health services in all settings in Wales. www.weds.wales.nhs.uk/opendoc/214438

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

Swansea Orthodontic Centre provides services to patients in the Uplands area of Swansea. The practice forms part of dental services provided within the geographical area known as Abertawe Bro Morgannwg. At the time of our inspection the practice employed a staff team which included two dentists, two therapists, four nurses, three reception staff and a practice manager.

Orthodontic treatment was provided using a range of specialist brace systems / appliances.

4. Summary

The practice had an experienced and established practice manager and we felt the practice was well run.

Patients told us they were satisfied with the service they received, were made to feel welcome and received sufficient information about their treatment.

Whilst information on how to raise concerns or complaints was available this was not prominently displayed. Arrangements should be made to further improve the availability of this information to patients.

The practice should ensure the complaints procedure fully reflects the arrangements for responding to concerns or complaints about NHS care and treatment in Wales. This should ensure patients are made aware of their rights under these arrangements.

Care and treatment provided at the practice was planned and delivered in a way intended to ensure people's safety and welfare.

Generally, patients could be assured the practice environment was safe and their privacy protected. However, the arrangements for handling waste should be reviewed to avoid transferring it through the waiting room where it could pose a potential hazard to patients.

Findings

Patient Experience

Patients told us they were satisfied with the service they received, were made to feel welcome and received sufficient information about their treatment.

Whilst information on how to raise a concern and complaints was available this was not prominently displayed. Arrangements should be made to further improve the availability of this information to patients.

The practice should ensure the complaints procedure fully reflects the arrangements for responding to concerns or complaints about NHS care and treatment in Wales. This should ensure patients are made aware of their rights under these arrangements.

The staff team presented as friendly and welcoming and we observed them being courteous and polite to patients. The waiting areas and surgeries were clean and tidy. Relevant oral health promotion information for patients was displayed, informing patients of how to look after their own oral health.

The practice manager told us feedback from patients about their care and treatment were sought on a monthly basis via a patient survey. We looked at some of the comments made and these indicated patients were very happy with the service provided by the staff.

We spoke with four people using the service and their accompanying relatives. People we spoke with had been using the service for between one to three years. Everyone we spoke with told us they were satisfied with the service they had received and they were made to feel welcome by staff at the practice.

There was a flexible appointment system in place and patients could book appointments both in advance and on an emergency basis. On the day of the inspection staff accommodated a patient requiring an emergency appointment on the same day. This meant people could be confident where they experienced difficulties with their treatment there was a system in place to try to ensure they were seen again quickly.

Generally, patients told us they had not experienced any delays when waiting to be seen. Staff told us that if a dentist was running late they kept people informed.

The practice provided both private and NHS treatment and had a procedure in place for patients to raise concerns or complaints about their care and treatment. Whilst the procedure generally met the arrangements covering both private and NHS care and treatment it did not fully take into account the arrangements set out under 'Putting Things Right'². This meant we could not be assured patients were informed of their rights under these arrangements such as being able to refer their complaint to the Public Services Ombudsman for Wales.

Recommendation

The practice should make suitable arrangements to ensure its complaints procedure makes clear how patients receiving NHS treatment can have their concerns considered under 'Putting Things Right'.

In addition, whilst information for patients on how they could raise concerns or complaints about their care and treatment was available in the waiting area, this information was not prominently displayed. This meant that people did not have easy access to written information about making a complaint. People we spoke with did not know about the practice's process to raise a concern or make a complaint.

Therefore, the practice should make arrangements to further improve the information available to patients visiting the practice.

Recommendation

The practice should make appropriate arrangements to improve the information displayed on how patients can raise concerns or complaints about their care and treatment.

² 'Putting Things Right' are the arrangements in place for handling and responding to concerns about care and treatment provided by the NHS in Wales

Delivery of Standards for Health Services in Wales

Care and treatment provided at the practice was planned and delivered in a way intended to ensure people's safety and welfare.

The practice should review arrangements for handling waste to avoid transferring it through the waiting room where it could pose a potential hazard to patients.

We looked at a sample of four patient records and found these to be generally very well managed. The medical histories relating to two patients had not been countersigned/initialled by the dentist to confirm these had been seen. Consent forms, whilst including patients' names, did not have any other form of unique patient identification recorded as an additional safety check to confirm the form related to the correct patient. This was shared with the relevant dentist and practice manager so they were aware and improvements could be made.

Suitable arrangements were in place for the safe use of radiographic equipment. All mandatory documentation, including those in relation to safety checks, maintenance and testing and staff training were comprehensive and up to date.

Staff had received training in cardio pulmonary resuscitation and had access to suitable equipment in the event of a patient emergency (collapse) at the practice.

Emergency drugs at the practice were securely stored and a suitable system was in place to replace drugs that had expired.

We considered the arrangements for the decontamination of instruments used at the practice and found these were satisfactory. Mandatory records had been maintained and the equipment being used was visibly in good condition. Suitable processes were in place for pre-sterilisation cleaning, sterilisation and storing of instruments.

Audits in respect of infection control had been conducted in accordance with *Welsh Health Technical Memorandum (WHTM 01-05)*³. Hand washing facilities and disposable items were available to reduce the risk of cross infection.

³ The Welsh Health Technical Memorandum (WHTM 01-05) document provides professionals with guidance on decontamination in primary care practices and community dental practices.

We recommended the practice conduct an assessment of changes needed to progress to best practice. This will demonstrate the practice is formally considering emerging best practice guidelines and how it will work towards achieving these. The practice manager agreed to arrange this.

Recommendation

The practice should conduct and record an assessment of changes needed to progress to best practice.

Staff told us contracts were in place for the disposal of hazardous waste and the documentation we saw confirmed this. We saw waste had been segregated into different coloured containers to indicate correct methods of disposal and these were stored securely. However, staff told us such waste is carried through the waiting room when collected by the disposal van. This could result in the contamination of the waiting room thus posing a health hazard to patients. Therefore alternative arrangements should be made to reduce the risk of contamination of the waiting room and possible risk to patients' health.

Recommendation

The practice should make appropriate alternative arrangements so hazardous waste is not carried through the waiting room when being collected for disposal.

Management and Leadership

The practice had an experienced and established practice manager and we felt the practice was well run.

An experienced practice manager was responsible for the day to day running of the practice.

We felt the practice was well run with the service underpinned by relevant written policies and procedures to ensure patients' care and treatment was delivered safely. However, some policies were company wide and did not provide relevant contact details for lead persons / agencies. This could result in delays in staff seeking appropriate advice or support. We highlighted this to the practice manager who agreed to add this information.

Staff were able to access policies electronically within the practice and were encouraged to do so to ensure the most up to date version was accessed.

A suitable system was in place to obtain regular feedback from patients about their care and treatment. The feedback we saw indicated patients were very happy with the service provided at the practice.

Staff told us they felt well supported by the practice manager and able to approach her with any work related concerns or issues they may have. Staff told us they attended staff meetings once a month and they discussed a range of issues including any proposed changes to systems or the practice generally. We saw notes from these meetings confirming what staff told us.

Staff had access to training and ongoing professional development opportunities. All staff we spoke with told us they had received a thorough induction to equip them to carry out their roles. Staff told us the practice manager reminded them when their mandatory training was due and reminders were put in the staff area as a prompt. One dentist told us they had received specific clinical support due to them being new and clinical staff confirmed that they were supported to maintain their professional registration. This meant patients could be assured that the staff treating them had the necessary skills and up to date training.

The staff records we looked at confirmed staff had access to a range of training opportunities relevant to their role and they received an annual appraisal of their work, identifying objectives and training needs for the coming year.

The accident book in use was compliant with the Data Protection Act. The practice manager told us when an incident occurred, it was investigated and action identified to prevent a similar incident occurring. An example related to the reception desk area that had resulted in modifications being made to reduce the risk of injury to staff accessing this area.

We looked at a variety of maintenance certificates and schedules. These confirmed that equipment was inspected in accordance with mandatory requirements. Therefore, staff and patients could be assured there were systems in place to ensure equipment was inspected in a timely way and maintained to ensure it was fit for purpose.

Quality of Environment

Generally, patients could be assured the practice environment was safe and their privacy protected.

Swansea Orthodontic Centre is an established practice situated in the Uplands area of Swansea. Car parking was available along the main road where the practice is situated.

The practice had a reception area, three surgeries and waiting areas on the ground floor. Our observations indicated the size of the waiting areas was appropriate given the number of surgeries and patients attending. These areas were clean, tidy and well lit and ventilated. The 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.

Patients with mobility difficulties were able to access the practice building via a portable ramp that could be placed at the main entrance. Staff told us patients were asked when making an appointment whether they have mobility difficulties so staff could be available to help when patients attended for their appointments. Whilst lavatories were available for patient use, the size of these made them difficult to access by persons using wheelchairs. However, staff confirmed this had not caused any problems for patients.

The practice has three surgeries and a separate x-ray room all situated on the ground floor. We looked at the clinical facilities of each and these contained relevant equipment to ensure the safety of patients and staff.

We observed the practice to be satisfactorily maintained internally and externally. Security precautions were in place to prevent unauthorised access to areas of the building not used by patients. Appropriate arrangements were in place for the safe storage and security of paper and electronic records.

Patient information leaflets and relevant health promotion posters were displayed in the waiting areas.

5. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan in respect of Quality of the Patient Experience. 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 Swansea Orthodontic Centre 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: Swansea Orthodontic Centre

Date of Inspection: 2 October 2014

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
	Patient Experience			
7	The practice should make suitable arrangements to ensure its complaints procedure makes clear how patients receiving NHS treatment can have their concerns considered under 'Putting Things Right'.	Now displaying appropriate 'Putting Things Right' poster and have 'Putting Things Right' leaflets available at Reception in English and Welsh.		Completed
7	The practice should make appropriate arrangements to improve the information displayed on how patients can raise concerns or complaints about their care and treatment.	'Putting Things Right' posters displayed in prominent positions in both waiting areas and at the reception desk.		Completed

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
Delivery of Standards for Health Services in Wales				
9	The practice should conduct and record an assessment of changes needed to progress to best practice.	Assessment of changes undertaken and recorded. To be discussed with AM [area manager] at next meeting.		3 November 2014 25 November 2014
9	The practice should make appropriate alternative arrangements so hazardous waste is not carried through the waiting room when being collected for disposal.	Practice now has written policy to say that hazardous waste must be carried from the building for disposal via the side door exit. This information also given to staff at staff meeting.		Completed
Management and Leadership				
	None			
Quality of Environment				
	None			

Practice Representative:

Name (print): Mrs Kathy Williams

Title: Practice Manager

Signature: [Submitted electronically]

Date: 7/11/14