

General Dental Practice Inspection (Announced)

**Abertawe Bro Morgannwg
University Health Board,
Vale View Dental Care**

24 February 2015

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

Contents

| | | |
|----|--|----|
| 1. | Introduction | 2 |
| 2. | Methodology..... | 2 |
| 3. | Context..... | 4 |
| 4. | Summary..... | 5 |
| 5. | Findings | 6 |
| | Patient Experience | 6 |
| | Delivery of Standards for Health Services in Wales | 8 |
| | Management and Leadership..... | 11 |
| | Quality of Environment | 13 |
| 6. | Next Steps | 15 |
| | Appendix A | 16 |

1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection to Vale View Dental Care at Canola, Sarn, Bridgend, CF32 9TY within the area served by Abertawe Bro Morgannwg University Health Board on 23 February 2015.

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*¹.

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

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

- Information within the practice information leaflet and website
- 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

Vale View Dental Care provides services to patients in the Sarn area of Bridgend. The practice forms part of dental services provided within the geographical area known as Abertawe Bro Morgannwg University Health Board. A range of services are provided.

The practice has a staff team which includes one dentist (also the practice owner), one hygienist, one nurse and a practice manager. At the time of our inspection two trainee nurses were also working at the practice.

Vale View Dental Care is a mixed practice providing both private and NHS dental services. In this respect, the dentist working at the practice and registered with HIW to provide private dentistry will be subject to the provisions of The Private Dentistry (Wales) Regulations 2008 and the Private Dentistry (Wales) (Amendment) Regulations 2011.

4. Summary

HIW explored how Vale View Dental Care met the standards of care in the *Doing Well, Doing Better: Standards for Health Services in Wales*.

Patients who completed our questionnaires indicated they were very satisfied with the service they had received. Patients also told us they had been given enough information about their treatment.

We saw examples of staff being polite to patients and treating them with kindness. Relevant information about the services provided at the practice was readily available to patients. However, not all patients who provided comments were aware of how to access emergency treatment when the practice was closed.

Overall, we found the practice was being run with the intention to meet the standards. However, we did identify some improvement was needed in respect of the facilities used for cleaning and sterilising instruments. We also found some improvements were needed around the completion of patient dental records.

The practice had a manager who worked closely with the practice owner. A range of relevant policies and procedures were in place with the intention of ensuring patients' safety.

The practice environment appeared satisfactorily maintained both internally and externally. However, we have recommended the practice owner make suitable arrangements to ensure the risk of injury to staff accessing the out building, which was being used for waste storage, is minimised.

5. Findings

Patient Experience

Patients who completed our questionnaires indicated they were very satisfied with the service they had received. Patients also told us they had been given enough information about their treatment.

We saw examples of staff being polite to patients and treating them with kindness. Relevant information about the services provided at the practice was readily available to patients. However, not all patients who provided comments were aware of how to access emergency treatment when the practice was closed.

The practice team presented as friendly and welcoming and we saw examples of staff being kind and helpful to patients attending the practice.

We invited patients who were attending the practice on the day of our inspection to complete HIW questionnaires. In total we received six completed questionnaires. All patients who provided comments told us they were satisfied with the service they had received from the practice, were made to feel welcome by staff at the practice and had been given enough information about their treatment. Comments included:

'They're great.'

'Brilliant.'

'Yes, very satisfied [with the service]'

The practice manager explained that a patient satisfaction survey was underway at the time of our inspection and results from this were due to be collated very soon. We were told, as a result of the comments already received, the practice had provided more reading material for patients to read whilst waiting to be seen by the dentist or hygienist. The practice manager explained it was the intention to conduct patient satisfaction surveys every six months. This meant patients had a mechanism to provide feedback and that the practice had considered this to make improvements.

There was a flexible appointment system in place and we found patients could book appointments both in advance and on an emergency basis. This meant people could be confident, where they experienced dental pain, there was a system in place to try to ensure they were seen quickly. This system was evident on the day of our inspection.

Overall, patients told us they had not experienced any delays when waiting to be seen. Staff described that a process was in place for informing patients should their dentist be running late or unexpectedly absent.

We saw health promotion material clearly displayed in the waiting room. This meant patients had access to relevant information to help them care for their own oral hygiene and health. The surgery on the ground floor had a large screen monitor. We were told this was used to show patients X-rays and photographs of their teeth, with the aim of helping them to gain a better understanding of explanations and advice given by the dentist.

Not all patients were aware of how to access emergency treatment when the practice was closed. Whilst the contact telephone number was displayed and visible from outside the practice, the practice owner may wish to explore how to further make this information available to patients.

Delivery of Standards for Health Services in Wales

Overall, we found the practice was being run with the intention to meet the standards.

However, we did identify some improvement was needed in respect of the facilities used for cleaning and sterilising instruments. We also found some improvements were needed around the completion of patient dental records.

We found arrangements were in place for the safe use of radiographic equipment. All mandatory documentation, including safety checks, maintenance and testing and staff training were available for inspection and up-to-date. A quality assurance system was in place to ensure that the image quality of patient X- rays were graded and recorded.

Staff had access to resuscitation equipment and emergency drugs in the event of a patient emergency (collapse) at the practice. A series of flowcharts were available to guide staff on the appropriate steps to take should a patient emergency be identified. We saw certificates in staff files that indicated they had received training on how to deal with medical emergencies and how to perform cardiopulmonary resuscitation (CPR). A system was in place to identify and replace expired drugs and also to check emergency equipment. We recommended the practice owner consider implementing a system to flag up the expiry dates of drugs as a prompt and to strengthen the existing system. The practice owner agreed to do this.

Contract documentation was in place for the disposal of hazardous waste. We saw waste had been segregated into different coloured bags/containers to indicate correct methods of disposal. Waste produced by the practice was securely stored whilst waiting to be collected.

We considered the arrangements for the decontamination (cleaning and sterilisation) of instruments used at the practice and compliance with Welsh Health Technical Memorandum 01-05 (WHTM 01-05)².

Observation of the decontamination process confirmed an appropriate process was in place for the cleaning and sterilisation of instruments. The practice had a

² The Welsh Health Technical Memorandum (WHTM 01-05) document provides professionals with guidance on decontamination in primary care practices and community dental practices

separate decontamination room as recommended within WHTM 01-05. This, together with the use of appropriate control procedures should reduce the risk of cross contamination of instruments. We saw that instruments were appropriately bagged and stamped with the date of processing and the date they had to be used by, prior to being stored. Records of checks had been maintained and the equipment being used for the cleaning and sterilisation of instruments was visibly in good condition. Whilst a separate room was available, we saw that some joints between surfaces needed resealing to prevent ingress of fluid and debris which could increase the risk of cross infection.

Improvement Needed

The practice owner should make suitable arrangements to review the surfaces within the decontamination room and take appropriate action to reduce the risk of cross infection.

We saw evidence that an infection control audit had been completed using a recognised tool specifically aligned to WHTM 01-05. This allows dental teams to self assess their practice against the policy and guidance set out within it.

Sufficient hand washing facilities and disposable protective equipment were available to reduce the risk of cross infection.

We looked at the clinical facilities of each of the surgeries within the practice. We found these contained relevant equipment to ensure the safety of patients and staff. Suitable arrangements were in place to protect patients' privacy when receiving treatment. We saw some equipment being stored that was uncovered in one of the surgeries. Whilst this equipment did not need to be sterile, we recommended that these be covered to reduce the risk of cross contamination. The practice owner agreed to do this.

The practice used an electronic patient records system. Overall, the sample of records we considered had been well maintained and demonstrated care had been planned and delivered in a manner to ensure patient safety. However, we did identify some areas where improvement was needed. Specifically, more care was required by the dentist (practice owner) when using the auto notes³ function to ensure they were fully applicable and accurate. We also found that

³ Auto notes are templates used to insert frequently entered notes. They can contain prompts or prefilled text.

improvements should be made in the timeliness of recording notes and recording the justification for taking X-rays. We informed the dentist of our findings so he could take appropriate improvement action regarding the above.

Improvement Needed

The practice owner should make suitable arrangements to ensure the completion of patient dental records fully take into account professional standards for record keeping.

Management and Leadership

The practice had a manager who worked closely with the practice owner. A range of relevant policies and procedures were in place with the intention of ensuring patients' safety.

A manager was responsible for the day to day running of the practice and worked closely with the practice owner. The practice consisted of a small team of staff who appeared to work well together. Those staff we spoke to were aware of their respective roles and responsibilities. We found the practice to be well run.

The practice manager confirmed all clinical staff working at the practice were registered with the General Dental Council and they had indemnity cover in place. The dentist working at the practice provided private dental services. He had an up to date registration certificate issued by HIW and this was displayed in accordance with the relevant regulations for private dentistry.

The practice had a range of relevant policies and procedures with the intention of ensuring patient care and treatment was delivered safely. We saw that not all policies had been dated. We highlighted this to the practice owner and manager so a suitable system could be introduced to demonstrate when policies had been agreed or revised. Staff working at the practice were expected to sign a confirmation sheet indicating they were aware of the policy. We also found policies and procedures were being considered at practice meetings with the intention of further reinforcing staff understanding. This is notable practice.

Suitable information was available to staff on Control of Substances Hazardous to Health (COSHH). However we suggested also making COSHH information available in those areas where chemicals were frequently used to assist staff in accessing safety information in a timely manner if needed.

Records were available confirming relevant staff working at the practice had received Hepatitis B vaccinations. This meant staff had taken appropriate steps to ensure their and patient safety in this regard.

Staff told us they felt well supported in their roles and were able to raise any work related concerns they may have. Staff also told us practice meetings were held weekly and topics relevant to their work were discussed. Notes from meetings confirmed this arrangement. We suggested the practice owner and manager consider widening the scope of these meetings to encourage staff to discuss other aspects of the service in addition to the policies and procedures already being discussed. They agreed to explore this further.

Staff told us they were able to access training relevant to their role and for their continuing professional development (CPD). We looked at the professional development files for all staff and found they were recording evidence of training they had attended to support CPD requirements. This meant that patients were treated by staff who had appropriate skills and up-to-date training.

We looked at a sample of maintenance certificates. These confirmed that equipment was inspected regularly. Therefore, staff and patients could be assured there were systems in place to ensure equipment was inspected and maintained to ensure it was fit for purpose.

The practice provided both private and NHS care and treatment and had a procedure in place for patients to raise concerns (complaints). The procedure generally met the arrangements covering both NHS and private care and treatment. However, we informed the practice manager the timescales for responding to complaints about private treatment needed to be changed to fully comply with the regulations for private dentistry. The contact details for Healthcare Inspectorate Wales also needed to be updated as they were out of date.

Improvement Needed

The practice owner should make suitable arrangements to ensure the contact details of Healthcare Inspectorate Wales are up to date.

Information for patients on how to raise a concern (complaint) was readily available at the practice. However, half of the patients who completed questionnaires (3) told us they were not aware of the process to follow. Therefore the practice may wish to explore how patients' awareness of the procedure can be improved.

Quality of Environment

The practice environment appeared satisfactorily maintained both internally and externally. However, we have recommended the practice owner make suitable arrangements to ensure the risk of injury to staff accessing the out building, which was being used for storing waste, is minimised.

Vale View Dental Care is a small practice operating from premises located in the Sarn area of Bridgend.

The practice was clearly signposted making it easy to find from the main road. There was a small car park immediately behind the practice that patients could use. Additional parking was available in side streets nearby. The name and qualification of the dentist together with the opening hours of the practice were clearly displayed near the entrance of the practice. The emergency number was also clearly displayed. This meant that patients attending the practice when it was closed were directed to a number they could call for advice when needing emergency dental treatment. We were told this number was also obtainable from the practice's answerphone message.

The entrance to the practice was not suitable for wheelchair users due to a step. Handrails were present to assist people with mobility difficulties. We were told wheelchair users could access the practice via the rear entrance with the prior arrangement and assistance from staff.

The practice was arranged over two floors. There were two surgeries, one on each floor. There were waiting rooms on both floors, with the reception area incorporated into the ground floor waiting room. We were told the hygienist used the first floor surgery, whilst the dentist used the surgery located on the ground floor. During a tour of the practice we saw these areas were clean and tidy with suitable lighting, heating and ventilation. The waiting rooms provided comfortable areas for patients to wait whilst waiting to be seen by the dentist or hygienist. Whilst the first floor waiting room appeared to be a satisfactory size, the ground floor room appeared small given the number of patients attending. The practice team had already identified this as an area for improvement and consideration as part of any future development plans for the practice.

The practice had toilet facilities for staff and patients to use. The patient toilet was situated on the first floor making it unsuitable for use by people with significant mobility difficulties and wheelchair users. Both facilities were visibly clean and contained suitable hand washing equipment to prevent cross infection.

The practice building appeared satisfactorily maintained both internally and externally. However, the out building used for storage of (clinical and non hazardous) waste materials was in need of tidying to prevent the risk of injury to staff who may have to access the building. We were told non hazardous waste was stored in bags on the floor of the out building which may increase the risk of vermin. Therefore we recommended the practice owner and practice manager make suitable arrangements to reduce the risk of injury to staff and presence of vermin. Both agreed to explore and implement ways to address this.

Improvement Needed

The practice owner should make suitable arrangements to ensure the risk of injury to staff accessing the out building is minimised. In addition arrangements should be made to store waste so as to reduce the risk of the presence of vermin within the out building.

Security precautions were in place to prevent unauthorised access to the building. Fire exits were clearly signposted for patients and staff and maintenance labels indicated fire extinguishers had been checked within the last 12 months.

6. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan in the areas of delivery of the *Standards for Health Services in Wales*, management and leadership and the quality of the 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 Vale View Dental Care 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: Vale View Dental Care

Date of Inspection: 24 February 2015

| Page Number | Improvement Needed | Practice Action | Responsible Officer | Timescale |
|--------------------|--|--|----------------------------|-------------------------------------|
| | Patient Experience | | | |
| | - | | | |
| | Delivery of Standards for Health Services in Wales | | | |
| 9 | The practice owner should make suitable arrangements to review the surfaces within the decontamination room and take appropriate action to reduce the risk of cross infection. | <ul style="list-style-type: none">○ Joints between surfaces in the decontamination room have been re sealed with silicone to prevent ingress of fluid and debris to decrease the risk of cross infection.○ Furthermore a traffic light system has been introduced to specifically separate those dirty and clean areas. | Christian Hoes | completed / continuous improvements |

| Page Number | Improvement Needed | Practice Action | Responsible Officer | Timescale |
|----------------------------------|--|---|---------------------|-------------------------------------|
| 10 | The practice owner should make suitable arrangements to ensure the completion of patient dental records fully take into account professional standards for record keeping. | <ul style="list-style-type: none"> ○ I have re-read the FGDP (UK) standards for Clinical Examination and Record-Keeping and altered my auto notes to more of a question format to ensure they are fully applicable and accurate. ○ I will do my best to ensure that records are as contemporaneous and accurate as physically possible. | Christian Hoes | completed / continuous improvements |
| Management and Leadership | | | | |
| 12 | The practice owner should make suitable arrangements to ensure the contact details of Healthcare Inspectorate Wales are up to date. | <ul style="list-style-type: none"> ○ HIW contact details will be reviewed quarterly to ensure they are up to date. | Christian Hoes | completed / continuous improvements |
| Quality of Environment | | | | |
| 14 | The practice owner should make suitable arrangements to ensure the risk of injury to staff accessing the out building is minimised. In addition arrangements should be made to store waste so as to reduce the risk of the presence of vermin within the out building. | <ul style="list-style-type: none"> ○ I have purchased secure bins to store domestic waste so no waste will be stored in the out building and no staff will have to enter the building. ○ The building itself has been cleaned of all waste, jet washed and locked. | Christian Hoes | completed / continuous improvements |

Practice Representative:

Name (print): Christian Hoes.....

Title: Dentist (Practice Owner).....

Signature: [submitted electronically].....

Date: 31/03/2015.....