

DRIVING
IMPROVEMENT
THROUGH
INDEPENDENT AND
OBJECTIVE REVIEW

General Dental Practice Inspection (Announced)

Cwm Taf University Health Board, **Tonyrefail Dental Centre**

5 March 2015

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1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced follow-up inspection at Tonyrefail Dental Centre, 2 Pritchard Street, Tonyrefail, CF39 8PA within the area served by Cwm Taf University Health Board on 5 March 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 Wales¹.

HIW understands that [name of practice] is a mixed practice providing both private and NHS dental services. In this respect, any dentist working at the practice who is also registered with HIW to provide private dentistry will also be subject to the provisions of The Private Dentistry (Wales) Regulations 2008 and the Private Dentistry (Wales) (Amendment) Regulations 2011.

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 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

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

Tonyrefail Dental Centre provides services to patients in Tonyrefail. The practice forms part of dental services provided within the geographical area known as Cwm Taf University Health Board. The practice employs a staff team which includes one dentist; one receptionist/practice support, one dental nurse and a practice manager (who also manages another IDH dental practice within Cwm Taf).

A range of services are provided. These include:

- Diagnostic and screening procedures
- Oral health check-ups
- Treatment of disease
- Emergency dentistry
- Children's dentistry
- Private dentistry

4. Summary

This report relates to a routine follow-up inspection completed by HIW on the 5 March 2015 at Tonyrefail Dental Centre to check that areas for improvement highlighted at the previous HIW inspection (11 November 2014), had been completed. This was in accordance with essential NHS standards of care in the *Doing Well, Doing Better: Standards for Health Services in Wales*.

There were improved systems in place to reduce the risk and spread of infection. We also observed improvements made to the arrangements for the cleaning and sterilisation of used instruments and dental equipment.

The practice had undergone substantial refurbishment since our original inspection in November. The layout of the dental surgery had been completely transformed. Decontamination, although still within the dental surgery had a clear flow from the 'dirty instruments area' to clean. In addition, the dental surgery overall, now looked functional and hygienic.

HIW was provided with evidence of suitable systems for measuring essential quality and safety standards associated with the provision of dental care and treatment to patients.

We found that staff had received an annual appraisal to assist with ensuring that the dental team remained competent and confident in their work.

The NHS and private patients' complaint process was not displayed with the correct timescales for acknowledging or resolving complaints as required. The service provider has agreed to address this matter promptly in accordance with NHS standards, and The Private Dentistry (Wales) Regulations 2008.

The refurbishment and re-decoration of all areas within the practice premises has resulted in a significant improvement to the layout, cleanliness and appearance of the overall practice environment for the benefit of patients and staff.

5. Findings

Patient Experience

This aspect of the service was not considered at this follow-up inspection as no improvements were needed at the initial HIW inspection completed on 11 November 2014 with regard to the Patient Experience.

Delivery of Standards for Health Services in Wales

There were improved systems in place to reduce the risk and spread of infection. We also observed improvements made to the arrangements in place for the cleaning and sterilisation of used instruments and dental equipment.

The practice had undergone substantial refurbishment since our original inspection in November. The layout of the dental surgery had been completely transformed. Decontamination, although still within the dental surgery had a clear flow from the 'dirty instruments area' to clean. In addition, the dental surgery overall, now looked functional and hygienic.

Following our inspection on the 11 November 2014, the service provider was required to improve the arrangements in place regarding the cleaning, separation and disinfection of instruments at the dental centre.

Our observations on the day of this inspection confirmed that there were improved systems in place to reduce the risk and spread of inspection. We specifically held discussions with the dental team regarding the revised arrangements in place for the cleaning and sterilisation of instruments and found that the refurbishment of the dental surgery had enabled them to easily separate clean from used/dirty instruments. In addition, the flow of instruments (from the dirty to clean area) was suitable and clear; dedicated sinks being available for the processing of instruments and for hand washing purposes. As a result, we were satisfied that patients were protected from the risk of cross infection as far as possible.

We were also provided with a verbal assurance that the cleaning and sterilisation of all instruments took place in the dental surgery at such times when patients were not present in the room to ensure their safety.

We saw that the dental surgery was less cluttered; extra cabinets having been introduced to the area to store day to day dental equipment.

The staff and patients we spoke with had no concerns about the cleanliness of the dental surgery, one patient indicating their approval of the recent improvements made to the practice environment. Conversations with the dental team also revealed the efforts they had made to maintain patient treatment whilst the refurbishment was taking place.

Management and Leadership

HIW was provided with evidence of suitable systems for measuring essential quality and safety standards associated with the provision of dental care and treatment to patients.

We found that staff had received an annual appraisal to assist with ensuring that the dental team remained competent and confident in their work.

The NHS and private patients' complaint process was not displayed with the correct timescales for acknowledging or resolving complaints as required. The service provider has agreed to address this matter promptly in accordance with NHS standards and The Private Dentistry (Wales) Regulations 2008.

Following the previous HIW inspection, the dental service provider was required to provide us with a full description of the on-going monitoring and quality assurance/clinical governance arrangements in place at the dental centre.

Since that time, we have been provided with evidence of the systems in place for measuring essential quality and safety standards associated with the provision of dental care and treatment to patients at Tonyrefail Dental Centre. Checks and audits have taken place in relation to antibiotic prescribing, infection prevention and control and record keeping. In addition, the practice completes 'in-house' compliance annual checks concerning the overall operation of the service which included health and safety matters.

We also noted that remedial action had been taken at such times when 'in-house compliance audits had been undertaken and in response to the annual NHS Quality Assurance Self assessment (QAS) exercise overseen by the Health Board.

Whilst the above improvements are notable, the dental service provider is reminded of the importance of ensuring that progress in this respect is maintained to enable the practice to effectively and proactively monitor compliance with relevant regulations and standards. Whilst no specific recommendation has been made in this regard, the expectation is that there will be evidence of further improvement in this respect at the time of the next inspection.

During the HIW inspection completed on 11 November 2014, we found that staff had not been provided with an annual appraisal. At this inspection, we saw an example of a recently completed appraisal form associated with a dental nurse. The one to one formal discussion with the practice manager had evidently resulted in highlighting training of interest to the member of staff as well as providing them with the opportunity to share their ideas and raise any concerns about the service. Conversation with the practice manager revealed that such appraisals would continue to take place with each member of the team on an annual basis to ensure that they remained confident and competent in providing care and treatment to patients.

Following the previous inspection, the dental service provider had displayed a more prominent poster relating to NHS complaints in the practice reception area. However, the poster did not contain correct information about the timescales for acknowledging and resolving complaints in accordance with the 'Putting Things Right' arrangements. We also found that there was no poster on display concerning the distinctly separate complaint arrangements for private patients. These matters were discussed with the practice manager who expressed a willingness to address those issues as promptly as possible. She also agreed to inform HIW when this has been done.

Quality of Environment

The refurbishment and re-decoration of all areas within the practice premises has resulted in a significant improvement to the layout, cleanliness and appearance of the overall practice environment for the benefit of patients and staff.

Following our previous inspection, the service provider was required to provide HIW with detailed information regarding the proposed refurbishment plan for the dental centre. This was in order to demonstrate compliance with Standards for Health Services in Wales.

HIW was subsequently provided with a draft written plan for the refurbishment of the one dental surgery at the premises. Our observations on the day of this follow up inspection revealed that significant improvements had been made to the layout and functionality of that dental surgery for the benefit of patients and staff.

A tour of the building confirmed that the service provider had almost completed the refurbishment and re-decoration of all areas within the practice premises which had resulted in a significant improvement to the cleanliness and appearance of the overall practice environment. The kitchen had been transformed into a functional storage area; a dedicated room having been created adjacent to the area for the purpose of developing X-rays.

Some minor remedial work remained outstanding in the kitchen and toilet areas on the ground floor and the room on the first floor intended as a second surgery had yet to be completed. Conversation with the practice manager however confirmed that dates had been arranged for that work to be finished.

Improvements in the reception area were marked. Clutter had been removed, and patients commented that the space appeared more welcoming.

6. Next Steps

This inspection has not resulted in the need for a further improvement plan.