

## **General Dental Practice Inspection (Announced)**

Aneurin Bevan University  
Health Board

M.J.Dental Services Ltd.

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## 1. Introduction

Healthcare Inspectorate Wales (HIW) is the independent inspectorate and regulator of all health care in Wales.

HIW's primary focus is on:

- Making a contribution to improving the safety and quality of healthcare services in Wales
- Improving citizens' experience of healthcare in Wales whether as a patient, service user, carer, relative or employee
- Strengthening the voice of patients and the public in the way health services are reviewed
- Ensuring that timely, useful, accessible and relevant information about the safety and quality of healthcare in Wales is made available to all.

HIW completed an inspection to [M J Dental Services Ltd., ] at [4, Mervyn Terrace, Osborne Road, Pontypool. NP4 6NW] on [10 March 2016].

HIW explored how [M J Dental Services Ltd] met the standards of care set out in the Health and Care Standards (April 2015) and other relevant legislation and guidance.

Dental inspections are announced and we consider and review the following areas:

- Quality of the Patient experience - We speak to patients (adults and children), their relatives, representatives and/or advocates to ensure that the patients' perspective is at the centre of our approach to how we inspect.
- Delivery of Safe and Effective Care - We consider the extent to which services provide high quality, safe and reliable care centred on the person.
- Quality of Management and leadership - We consider how services are managed and led and whether the culture is conducive to providing safe and effective care. We also consider how services review and monitor their own performance against relevant standards and guidance.

More details about our methodology can be found in section 6 of this report.

## 2. Context

M J Dental Services Ltd] provides services to patients in the [Pontypool] area of [Torfaen]. The practice forms part of dental services provided within the area served by [Aneurin Bevan University Health Board].

M J Dental Services Ltd] is a mixed practice providing both private and NHS dental services

The practice staff team includes three dentists, three dental nurses, two reception staff and a practice co-ordinator.]

A range of NHS/Private dental services are provided. The majority of the patients attending this surgery (96%) are NHS patients.

### 3. Summary

**Overall, we found evidence that M J Dental Services Ltd provides patients with safe and effective dental care in a clean, comfortable environment and is well regarded by its patients.**

This is what we found the practice did well

- Provided literature in the Welsh language and enabled patients to communicate through the medium of Welsh
- Patients we spoke to were happy with the services provided
- Staff we spoke to were happy in their roles and understood their responsibilities
- Clinical facilities were well-equipped, visibly clean and tidy
- There are arrangements in place for the safe use of x-rays

This is what we recommend the practice could improve:

- Training is needed for dentists in relation to adult protection
- Training in radiological procedures is needed for dental nurses involved in this process
- The date of processing dental instruments should be included on packaging
- Recording of patient notes.

## 4. Findings

### *Quality of the Patient Experience*

**We found evidence that the practice is committed to providing a positive experience for their patients. The feedback gained through the HIW and the practice's own questionnaires and from talking with patients, suggests that patients were happy with the services they received from all the staff. The availability of leaflets published in Welsh and the fluency of one of the dentists in the Welsh language was particularly appreciated by the Welsh speaking patients. We had no concerns regarding this aspect of care.**

Prior to the inspection, we invited the practice to distribute HIW questionnaires to patients to obtain views on the dental services provided. Patient comments included:

*"Very happy with the service provided"*

*"A very friendly practice, always keen to satisfy one's needs-.  
Excellent!!"*

*"Excellent caring staff, always a happy atmosphere."*

*"Always friendly and welcoming and are good with children as well."*

Only six HIW questionnaires had been completed at the time of our inspection but we were able to gather further relevant information from the practice's own patient questionnaires which are distributed quarterly. We saw the practice's own quarterly report to the period ended December 2015 and where relevant have included the patient responses in this inspection report.

### Dignified care

We saw evidence that patients were provided with care in a dignified and respectful manner. Patients wishing to discuss issues in private can be seen in either an empty surgery or upstairs in a comfortable waiting area. We noted the friendly yet professional manner with which staff spoke to patients. At the time of our visit we saw several children attending and had the opportunity to talk to them and their parents. Children told us that they liked their dentist because they 'didn't hurt them' and 'made them laugh'. Parents too were happy with the

individual care they received for themselves and their families and told us they felt staff took time to listen and respond to their queries. All patients told us that they were satisfied with the care and treatment they received at the practice and were made to feel welcome by the staff.

### Timely care

Patients told us that they rarely experienced delays and if these occurred an acceptable explanation was always given by the practice staff. Patients told us that the practice was very good at 'fitting them in' should they need to be seen as an emergency. We asked staff about accommodating patients needing emergency treatment and they told us that they tried their best to see patients on the same day but if not, gave them advice and would see them within twenty-four hours. We saw a notice displayed on the exterior window of the practice giving details of opening hours and how to access emergency dental services. This information was also given in the practice's own leaflets.

### Staying healthy

All patients completing the questionnaires stated that they received enough information about their treatment.

We noticed a plentiful supply of health information leaflets for patients to take home and notice boards gave information about good dental health and how to maintain it. We saw that the practice strived to provide health promotion information in many different ways to attract the attention of both children and adults and we commended them on their efforts. Health promotion information assists in supporting patients to take responsibility for their own health and well-being.

### Individual care

Responses from patient questionnaires and the patients we talked to indicated that all felt they were given enough advice about their individual treatment, were very happy with the service they received and were always made to feel welcome. Patients told us that the staff always took time to listen to them and advise them of any concerns or questions they may have. Patients also told us they enjoyed the friendly atmosphere at the practice.

We saw that the doorways were easily accessible for wheelchair access but there were no toilets accessible for wheelchairs. We noted that the practice was situated in a terraced property and staff told us it is difficult to modernise. The staff told us that when they knew a patient was attending in a wheelchair,



arrangements were made to see patients immediately to avoid delays and make their visit as comfortable and dignified as possible.

We saw complaints procedures for both private and NHS patients clearly displayed in both upstairs and downstairs waiting rooms and these complied with both private dentistry regulations and the NHS 'Putting Things Right' complaint process. Similar information was also available in the practice's patient information leaflets..

## *Delivery of Safe and Effective Care*

**Patients at this practice are provided with safe and effective dental care delivered by a team that is patient focused and have shared values in providing a good dental service. We saw areas that needed improvement in relation to the storage of dental instruments and the need for dentists to undertake training in adult protection. We also recommend that the practice team work together towards more consistency and conformity in clinical records.**

### Safe care

The dental practice is situated in a row of terraced houses with adjustments made to provide safe and comfortable facilities. We saw health and safety policies governing manual handling procedures, risk assessment in the workplace, a gas safety contract, strategic placement of fire extinguishers in both upper and lower accommodation and a fire equipment maintenance contract. We saw fire exit signs but noted that one of these was quite small and may be difficult to see. The practice responded by immediately replacing this with a larger sign. We were satisfied with this adjustment.

We saw that hazardous and non-hazardous waste was stored safely and there were appropriate waste disposal contracts in place. Regular testing of small electrical appliances (PAT) was carried out and documented.

We recommend that access to the attic storage room is made safe for staff, paying particular attention to flooring and cleanliness.

### Infection Control

We were satisfied with the arrangements at this practice to protect staff and patients from preventable healthcare associated infections. We saw that the practice had relevant infection control procedures in place and that an infection control audit had been completed and sent to the Wales Deanery for certification.

We saw that the practice had a decontamination room which although small was well laid out. We pointed out an area between the floor and wall that was not fully sealed and could pose a potential infection risk. This was rectified during our inspection by application of an appropriate sealant and we were satisfied with the corrective measures taken.

In surgery No.1 we saw that a small area of the flooring was carpeted. We advised that this could be a potential risk area for contamination. Staff agreed to rectify this by removing this area of carpet.

### **Improvement needed**

**Carpet in clinical areas should be removed and replaced with flooring which is in line with WHTM01-05 guidelines.**

We saw appropriate use of personal protective equipment (PPE) such as disposable gloves, heavy duty gloves, aprons and eye protection during our inspection.

We looked at the processing and storage of dental instruments and noted that only the expiry date was written on the packaging. Guidelines as set out in the Welsh Health Technical Memorandum 01-05 (WHTM 01-05) advises that the date the instruments were processed and wrapped should also be recorded.

### **Improvement needed**

**Stored dental instruments should include date of processing and packaging.**

### **Emergency Drugs and Resuscitation Equipment**

We saw evidence that all clinical staff had up to date cardio-pulmonary resuscitation (CPR) training and also training in the management of anaphylaxis. A detailed resuscitation policy was used by the practice and we noted that eligible members of staff were required to sign that they had read the policy. We saw that the practice had adequate resuscitation equipment which included a face mask for a child as well as adult masks. All drugs were in date and stored in a secure place. Overall, we saw that this practice complied fully with requirements as set out by HIW with regard to medicines management and resuscitation guidelines. We did note that a practice 'first aider' needed to be updated and saw that a place had been reserved on an appropriate course arranged for April 2016.

### **Safeguarding.**

We saw that only two of the three dentists currently employed at the practice had Disclosure and Barring Services (DBS) certificates that were in date. We were told that one of the dentists had applied for this certificate and was awaiting delivery. We did not see any DBS certificate for one of the dentists,(named in the practice leaflet as the 'lead dentist' ) who was returning to the practice after an absence of a year. A valid (an Enhanced level check undertaken within the last three years) DBS certificate is a requirement of the

Private Dentistry regulations and HIW therefore request that evidence of this outstanding certificate is forwarded to HIW without delay.

All clinical staff had undergone child protection training and all dental nurses had undergone adult protection training. We did not see evidence that the three dentists had undergone adult protection training. The General Dental Council (GDC) has expressed their keenness to ensure that staff are aware of their responsibilities in relation to safeguarding and has made it a recommended topic for continual professional development (CPD)

### **Improvement needed**

#### **Dentists to undergo adult protection training.**

All of the dental nurses had been employed at the dental practice for more than fifteen years and consequently previous employment checks had not been made. The practice co-ordinator was aware of the need for appropriate pre employment checks in accordance with safeguarding policies, standards and relevant regulations should new staff be employed.

#### *Radiographic equipment*

We saw documentation that confirmed all dentists had up to date training in ionising radiation and that there was a named Radiation Protection Supervisor (RPS) at the practice. A contract was in place for the services of a Radiation Protection Adviser (RPA) and we saw quality assurance audits for 'image quality' had been carried out in accordance with the General Dental Council (GDC) guidelines. We did not see evidence that ionising radiation training had been carried out by all dental nurses and this should be undertaken by dental nurses involved with radiological procedures.

### **Improvement needed**

#### **The relevant training in ionising radiation should be conducted by all dental nurses participating in radiological investigations**

#### Effective care

We saw that some of the practice's information leaflets were also available in the Welsh language and that one of the dentists was also fluent in Welsh. We were told that Welsh speaking patients greatly appreciated the opportunity to communicate in their own language.

Patients benefit from a practice that seeks to continuously improve the service provided. We saw that the practice engaged in some relevant audits such as infection control and that a quality assurance/clinical governance policy was in place with standards appraised and overseen by the Local Health Board

### Patient records

We looked in detail at a sample of patient records for each of the three dentists working at the practice. Generally clinical records were of satisfactory standard and written notes were legible. We did however, find some inconsistencies in record keeping and x-ray taking and improvement is needed in the following areas:

- Reason for attendance should always be recorded
- Medical histories should be updated at each course of treatment and signed by clinical staff to validate findings..
- Previous dental history was not recorded and it may be helpful to document this
- Basic Periodontal Examination for children and adults should be recorded on a regular basis in line with guidelines
- Bite wing radiographs should be undertaken where indicated (we found that this was not always the case) When X-rays are taken, the grading, findings and justification must be recorded
- Cancer screening should be recorded and explained

### **Improvement needed**

**In view of the above anomalies in the clinical records, we recommend that the dentists at this practice should conduct a clinical records audit and share learning from this.**

## *Quality of Management and Leadership*

**We saw evidence of effective management and leadership at this practice. Staff we spoke to were happy in their roles, understood their responsibilities and felt supported by the practice co-ordinator. A range of relevant policies and procedures were in place.**

The practice is situated amongst a row of terraced houses and facilities were limited by the layout and structure of the building. Efforts had been made wherever possible to provide a comfortable, safe and pleasant environment for patients and staff.

We noted that all staff were registered with the General Dental Council and were up to date with Hepatitis B vaccinations. There was appropriate indemnity insurance in place for staff. In accordance with the private dentistry regulations, all dentists providing private treatment were registered with HIW and their registration certificates were available within the practice. We reviewed the policies and procedures available and were satisfied that overall these were consistent with the services provided. Staff mentioned the importance of keeping abreast of new developments and procedures in order to ensure best practice for patients and to keep themselves updated. Evidence of annual staff appraisals was seen and we also saw a log of the staff meetings.

We saw systems in place to ensure that any new staff received an induction and that they are made aware of practice policies and procedures. The staff we talked to understood and were confident in their roles and responsibilities and we saw that there was an excellent working relationship amongst the staff, the majority of whom had worked together for many years.

The practice had an informative leaflet that gave information to patients not only about the qualifications and experiences of each staff member, but also some personal information as to hobbies and interests of the staff.

Overall we were satisfied that this practice had clearly defined leadership and responsibilities, was effectively managed and was committed to staff development to maintain standards of patient care.

## 5. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan (Appendix A) to address the key findings from the inspection.

The improvement plan should clearly state when and how the findings identified at M J Dental Services Ltd., will be addressed, including timescales.

The action(s) taken by the practice in response to the issues identified within the improvement plan need to be specific, measureable, achievable, realistic and timed. Overall, the plan should be detailed enough to provide HIW with sufficient assurance concerning the matters therein.

Where actions within the practice improvement plan remain outstanding and/or in progress, the practice should provide HIW with updates to confirm when these have been addressed.

The improvement plan, once agreed, will be published on HIW's website and will be evaluated as part of the ongoing dental inspection process.

## 6. Methodology

The new Health and Care Standards (see figure 1) are at the core of HIW's approach to inspections of the NHS in Wales. The seven themes are intended to work together. Collectively they describe how a service provides high quality, safe and reliable care centred on the person. The standards are key to the judgements that we make about the quality, safety and effectiveness of services provided to patients.

**Figure 1: Health and Care Standards**



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 2008<sup>1</sup> and the Private Dentistry (Wales) (Amendment) Regulations 2011<sup>2</sup>. Where appropriate we consider how the practice meets these regulations, as well as the Ionising Radiation Regulations 1999, the Ionising Radiation (Medical Exposure) Regulations 2000 and any other relevant

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<sup>1</sup> <http://www.legislation.gov.uk/wsi/2008/1976/contents/made>

<sup>2</sup> <http://www.legislation.gov.uk/wsi/2011/2686/contents/made>



professional standards and guidance such as the GDC Standards for the Dental Team.

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
- 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.

## Appendix A

**General Dental Practice: Improvement Plan**

**Practice: M J Dental Services Ltd.,**

**Date of Inspection: 10 March 2016**

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
<b>Quality of the Patient Experience</b>					
	No improvements needed.				
<b>Delivery of Safe and Effective Care</b>					
8	Stored dental instruments must include date of processing and packaging	Welsh Health Technical Memorandum 01-05 (WHTM 01-05 2.k) 24.k	Advised improvement now implemented by practice staff. Automatic stampers were already being used for expiry dates but new date stamps have been purchased for date of processing as well.	M Jobbins	Completed

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
	<b>Carpet in clinical areas should be removed and replaced with flooring which is in line with WHTM01-05 guidelines.</b>	Welsh Health Technical Memorandum 01-05 6.46, 6.47, 6.48, 6.49	We have ordered new flooring to replace the whole surgery floor area (including carpeted area) and are awaiting a date for the fitting	M Jobbins	3-4 weeks
9	Dentists to undergo adult protection training	General Dental Council (GDC) guidance 4.3.3; 8.5	We have an online source for CPD (Educare) which includes an adult safeguarding package. The lead dentist has completed this and the two associates are about to also complete this module.	M Jobbins	1-2 weeks
10	The relevant training in ionising radiation should be conducted by all dental nurses if participating in radiological investigations.	General Dental Council (GDC) CPD for dental professionals.	All dental nurses at M J Dental Services Ltd undergo annual verifiable CPD (including all core topics) via CPD Dentistry which includes 1 hour of radiation training each year over the 5 year cycle This provides annual certificates which comply with the General Dental Council's lifelong learning scheme. These were available on the day of the inspection.	M Jobbins	Completed

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
11	In view of the anomalies seen in the clinical records, we recommend that the dentists at this practice should conduct a clinical records audit and share learning from this.	Health and Care Standards 3.5; General dental Council Standards 4	Since the inspection we have purchased Software Of Excellence (EXACT) software which is available surgery wide. Using this system we have now standardised record keeping within the practice. A 6 monthly in house record card audit is planned for completion in September.	M Jobbins	To be completed by September 30 <sup>th</sup> 2016
<b>Quality of Management and Leadership</b>					
	No improvements needed.				

### Practice Representative:

**Name (print):**           **MARC WILLIAM JOBBINS**

**Title:**                   **PRINCIPAL DENTAL SURGEON**

**Date:**                   **15<sup>th</sup> AUGUST 2016**