

General Dental Practice Inspection Announced Fairlight Dental Practice

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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 Fairlight Dental Practice at Welsh St, Chepstow, Gwent, NP16 5LR on 1 September 2016.

HIW explored how Fairlight Dental Practice complied with the Private Dentistry (Wales) Regulations 2008 and the Private Dentistry (Wales) (Amendment) Regulations 2011 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

Fairlight Dental Practice provides private only dental services and is based in Chepstow.

The practice staff team includes two dentists, two hygienists, one receptionist, one practice manager and three dental nurses. At the time of the inspection there were vacancies for two dental nurses with agency nurse cover in the interim.

A range of private dental services are provided.

3. Summary

Overall, we found evidence that Fairlight Dental Practice provides patients with safe and effective dental care and is well regarded by its patients.

This is what we found the practice did well:

- Patient satisfaction was high
- Patient information, including health promotion was easily accessible
- Up-to-date policies and procedures to protect patients' safety
- Staff we spoke with were happy in their roles and understood their responsibilities
- Clinical facilities are well-equipped, visibly clean and tidy
- There are arrangements in place for the safe use of x-rays
- Dental instruments are cleaned and sterilised appropriately.

This is what we recommend the practice could improve:

- Ensure staff training updates and records are being maintained
- Update the complaints policy
- Develop a stock check process for controlled drugs.

4. Findings

Quality of the Patient Experience

We found that the practice is committed to providing a positive experience for their patients. The feedback gained through the HIW patient questionnaires was positive. The complaints policies available to patients need to be consistent and in line with the regulations.

Prior to the inspection, we asked the practice to distribute HIW questionnaires to patients to obtain views on the dental services provided. 16 questionnaires were completed and returned to us. Patient comments included:

“Very satisfied with the practice and have recommended it to others.”

“Everyone is very helpful. They were fantastic with my little boy when he had toothache.”

“Excellent and caring dental practice.”

“This dental practice is extremely well run; the staff are always cheerful, friendly and helpful. We always have a completely satisfactory service and treatment.”

Dignified care

We found that patients were provided with care in a dignified and respectful manner. We found there was space for staff to have conversations with patients in a private area, away from other patients if required. We heard staff speaking to patients in a friendly and professional way. Feedback from the patients who completed our questionnaires was universally positive.

There was one instance where we observed that a surgery door had been left open while a patient was undergoing treatment. We discussed the importance of ensuring that surgery doors are closed during treatment, for privacy and dignity, and were assured that this is the usual practice.

Staff told us they were exploring the need for a loop system in the reception area to assist patients who may have hearing difficulties, with their communication needs.

There was a range of information on display and available for patients. However, there was a lack of information produced in alternative formats and languages, including Welsh. The practice should also consider how they could

make information more accessible to a wider range of patients, such as by providing information in other formats and languages, including Welsh. The need for this could be assessed through gaining patient feedback.

We saw that a price list for treatments was available in the patient information files, so that patients were informed about costs. We advised that the price list be displayed in a more prominent place in the waiting room and this was completed during our visit.

Timely care

The practice tries to ensure that dental care is provided in a timely way and there was a policy in place with clear aims regarding waiting times. There was a flexible appointment system so that patients could book appointments in advance. Patients indicated in HIW questionnaires that they did not experience delay in being seen by the dentists and the majority of patients knew how to access out of hours dental care. We saw a sign in the window of the practice with details of the emergency contact telephone number so that patients could access emergency dental care when the practice is closed.

Staying healthy

Health promotion information assists in supporting patients to take responsibility for their own health and well-being. All patients who completed HIW questionnaires told us they received enough information about their treatment.

We noticed that health promotion information for patients, such as mouth cancer awareness, smoking cessation and general information on how patients could improve their oral health was available in patient information folders in the waiting area. We suggested that the practice could clearly label these folders as “patient information” to further encourage patient access to this information. Staff completed this during our visit.

Individual care

The practice had examples of compliment cards and testimonials provided by patients by way of feedback. There was a formal patient questionnaire process in place as a way of assessing the quality of the service provided. We suggested that patient questionnaires could be distributed on a periodic basis, with outcomes provided to patients, demonstrating the actions and learning taken forward, to further enhance this process.

The practice had a procedure in place so that patients could raise concerns (complaints). We found the procedure displayed in reception to require further detail in order to comply with the Private Dentistry Wales 2008 Regulations¹. Whilst the detail on the practice website was sufficient, the complaints policy displayed in the reception and waiting areas required further information. This is because it did not include HIW's contact details as a route of escalation, or identify fully the complaints response time targets.

Improvement needed

The complaints policies available to patients need to be consistent and in line with the regulations; including HIW contact details and complaint response time targets.

We saw that the practice had received one minor concern/complaint and this had been responded to promptly and appropriately. We saw that complaints were being appropriately recorded.

¹ The Private Dentistry (Wales) Regulations 2008 and The Private Dentistry (Wales) (Amendment) Regulations 2011.

Delivery of Safe and Effective Care

Overall, we were satisfied that the practice was providing patients with safe and effective care. We found that all surgeries were clean, tidy and well organised and that the practice had taken steps to help ensure the health, safety and welfare of staff and patients. We were satisfied with the arrangements to protect staff and patients from preventable healthcare associated infections at this dental practice. X-ray equipment was used appropriately and safely. Checks and audits were undertaken to ensure the service was safe and effective. Clinical records were being well maintained.

We identified aspects within the following areas that required improvement; processes for the checking and recording of stock levels of controlled drugs; one staff member required CPR training; there was a need to increase the number of staff who were first aid trained and several staff required training in safeguarding for children and vulnerable adults.

Safe care

Clinical facilities

We found that all surgeries were clean, tidy and well organised. We found the practice had taken steps to help ensure the health, safety and welfare of staff and patients. The practice was visibly well maintained and fire extinguishers were placed strategically and had been serviced regularly. Contract documentation was in place for the disposal of non hazardous and hazardous waste. Sharps containers were safely stored and we suggested the practice could also consider wall mounting these for additional safety.

We looked at the risk assessments on Control of Substances Hazardous to Health (COSHH)² and we saw that safety data sheets had been kept for each substance and risk assessments had been completed that were specific to the workplace and environment.

² COSHH is the law that requires employers to control substances that are hazardous to health. More information can be found on the Health and Safety Executive website via the following link <http://www.hse.gov.uk/coshh/index.htm>

We saw that the testing of portable appliances (PAT) had been undertaken to help ensure the safe use of small electrical appliances within the practice and that gas safety certificates were also available. Staff told us that they were in the process of arranging for a new five yearly electrical certificate for the premises and a copy of the new wiring certificate for the premises was subsequently seen by HIW.

Infection control

We were satisfied with the arrangements to protect staff and patients from preventable healthcare associated infections at this dental practice. This is because we saw evidence that there were infection prevention and control measures in place based on the Welsh Health Technical Memorandum 01-05³ (WHTM 01-05) guidelines. Examples included the following:

- A dedicated room for the cleaning and sterilisation of dental instruments with a dedicated hand washing sink
- Availability and use of personal protective equipment (PPE) such as disposable gloves, aprons and eye protection
- The equipment used for the cleaning and sterilisation of instruments was visibly in good condition
- Logbooks for checking sterilisation equipment had been maintained, including daily testing. Records for each sterilisation cycle were kept electronically and backed-up
- Instruments were stored appropriately and dated.

We saw evidence that infection control audits had been completed, as recommended by the Wales specific WHTM 01-05 guidelines. We found that all dental nurses had completed decontamination training, as recommended by the WHTM 01-05.

Emergency drugs and resuscitation equipment

Resuscitation equipment and emergency drugs were available at the practice and there were systems in place to help ensure they were stored safely and

³ <http://www.wales.nhs.uk/sites3/docopen.cfm?orgid=254&id=232444>

available for use in the event of a patient emergency (collapse). Emergency drugs were well organised, with corresponding life support flowcharts for use in specific emergencies.

We saw records to show that staff had received training on how to deal with medical emergencies and how to perform cardiopulmonary resuscitation (CPR). However, CPR training for one staff member required updating.

The practice had an interim arrangement where there was one appointed first aider in the team who had completed relevant training. We were assured that following staff appointments in September 2016, further staff training will be arranged to increase the first aider availability within the team.

We found that the process for the checking and recording of controlled drugs stock required review and updating.

Improvement needed

All staff must receive annual CPR training updates.

The practice must ensure there are sufficient numbers of first aid trained staff.

The process for the checking and recording of controlled drugs stock must be reviewed and maintained.

Safeguarding

We found the practice had taken steps to promote and protect the welfare and safety of children and adults who become vulnerable or at risk. There were safeguarding policies for the protection of children and vulnerable adults in place. However, we found that not all staff had received training in the protection of children and vulnerable adults.

Improvement needed

The practice must ensure that all staff have received training in safeguarding for children and vulnerable adults

Radiographic equipment

A radiation protection file was in place and we saw documentation to show that x-ray machines had been regularly serviced to help ensure they were safe for use. Radiographic control area plans were in place for each surgery. We found that the dentists and dental nurses involved in taking radiographs had all completed the required training. This is in accordance with the requirements of

the General Dental Council⁴ and Ionising Radiation (Medical Exposure) Regulations 2000. We found that the practice completed radiograph audits for quality assurance purposes.

Patient Records

We viewed a sample of dental records and spoke with the two dental practitioners on the day of our inspection. Overall, we found there was a good quality of record keeping and patient care. This included detailed recording of patients' social histories, updating of medical histories and detailing of appropriate checks for clinical examinations of gums (basic periodontal examinations).

Effective care

Patients benefit from a practice that seeks to continuously improve the service provided. There was a clinical audit planner policy in place. We saw that the practice undertook its own internal inspection processes and also completed relevant audits, including infection control and radiographs.

We advised the practice to consider planning peer review audit to further monitor and contribute to the quality of care provided.

⁴ General Dental Council - <http://www.gdc-uk.org/Pages/default.aspx>

Quality of Management and Leadership

The dental practice was efficiently operated by the acting practice manager and a team of experienced, motivated staff. The practice had appropriate clinical procedures and quality assurance processes in place to ensure that patients' care and treatment were delivered safely and in a timely way. Staff told us they were very well supported in their roles.

We found that the dental surgery was well run. We were able to confirm those arrangements by looking at a variety of records and policies and through discussions with members of the dental team. We were told there were arrangements in place for staff to raise any concerns and staff told us they felt able to do this in practice. We saw that pre-employment checks were being carried out, including Disclosure and Barring Service (DBS) clearance.

The practice manager has overall responsibility for the day to day operation of the practice. Staff leave and vacancy cover arrangements were in place, with roles being covered appropriately across the team and agency staff cover in place for the interim. We saw evidence that agency staff had received induction training and were assured that relevant employment checks had been undertaken. Each member of the dental team had clear individual responsibility for particular aspects of the service.

In general we found that staff training was being maintained and kept up to date. However, there were staff training areas which required updating, specifically safeguarding and CPR.

There were several policies discussed with the practice during the inspection which made reference to the Care Quality Commission (CQC) and Health Technical Memorandum (HTM) which do not apply to Welsh practices. All policies should refer to Welsh specific organisations and guidance.

Improvement needed

The practice should ensure that all policies are compliant with Welsh legislation and guidance.

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 Fairlight Dental Practice 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

Any dentist working at the practice who is registered with HIW to provide private dentistry will be subject to the provisions of the Private Dentistry (Wales) Regulations 2008⁵ and the Private Dentistry (Wales) (Amendment) Regulations 2011⁶. 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 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, nursing staff and administrative 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
- 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 relevant regulations at the practice visited on the day of the inspection.

⁵ <http://www.legislation.gov.uk/wsi/2008/1976/contents/made>

⁶ <http://www.legislation.gov.uk/wsi/2011/2686/contents/made>

Appendix A

General Dental Practice: Improvement Plan

Practice: Fairlight Dental Practice

Date of Inspection: 1 September 2016

| Page Number | Improvement Needed | Regulation / Standard | Practice Action | Responsible Officer | Timescale |
|--|--|--|--|---------------------|------------|
| Quality of the Patient Experience | | | | | |
| 7 | The complaints policies available to patients need to be consistent and in line with the regulations; including HIW contact details and complaint response time targets. | Private Dentistry (Wales) Regulations 2008 Regulation 16 | Updated on 1/9/16 when the inspectors were on the premises and available to view | Sarah Merrill | 1/9/2016 |
| Delivery of Safe and Effective Care | | | | | |
| 10 | All staff must receive annual CPR training updates. <i>Resuscitation Council UK guidelines GDC Guidance 1.5.3</i> | Private Dentistry (Wales) Regulations 2008 | One staff members CPR training updated October 2016. All staff aware that it is compulsory to attend in-house CPR training which is provided annually. | Sian Jones | 31/10 2016 |

| Page Number | Improvement Needed | Regulation / Standard | Practice Action | Responsible Officer | Timescale |
|-------------|---|---|--|---------------------|-----------|
| | | Regulation 14 (1) (b) | | | |
| 10 | The practice must ensure there are sufficient numbers of first aid trained staff. <i>Health and Safety (First Aid) Regulations 1981</i> | Private Dentistry (Wales) Regulations 2008 Regulation 14 (1) (d) | Staff hired with first aid training. We were actively recruiting at the time of the inspection. We have a full time receptionist who is first aid trained as well as existing trained staff. | Sian Jones | Completed |
| 10 | The process for the checking and recording of controlled drugs stock should be reviewed and maintained. <i>Misuse of Drugs (safe Custody) Regulations 2001</i> | Private Dentistry (Wales) Regulations 2008 Regulation 14 (1) (b) | The stock take of drugs was pinned to the cupboard door where the prescription and controlled drugs were kept. A controlled drug form is used to keep a running total and this is checked monthly. A process of stock control continues with the addition of a bound book kept with the drugs which includes batch numbers and expiry dates. This is checked weekly. | Sian Jones | Completed |
| 10 | The practice must ensure that all staff have received training in safeguarding for children and | Private Dentistry (Wales) Regulations | This was arranged and completed on the day of the inspection. Certificates were available for inspection. These will be checked | Sarah Merrill | Completed |

| Page Number | Improvement Needed | Regulation / Standard | Practice Action | Responsible Officer | Timescale |
|---|---|---|---|---------------------|-----------|
| | vulnerable adults <i>GDC Guidance 4.3.3 and 8.5</i> | 2008 Regulation 14 (1) (a) | and updated annually. | | |
| Quality of Management and Leadership | | | | | |
| 12 | The practice should ensure that all policies are compliant with Welsh legislation and guidance. | Private Dentistry (Wales) Regulations 2008 Regulation 14 (1) (a) | All policies have been checked and updated where appropriate. | Sarah Merill | Completed |

Practice Representative:

Name (print): Sian Jones

Title: Principle Dentist

Date: 14/2/2017