

General Dental Practice Inspection (Announced)

Hywel Dda University
Health Board

Tenby Dental Haven

Inspection Date: 19 October 2016

Publication date : 20 January 2017

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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 a follow up inspection to Tenby Dental Haven at Warren St, Tenby SA70 7JY on 19 October 2016.

HIW explored how Tenby Dental Haven had made improvements to meet the action 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

Tenby Dental Haven provides private only dental services to patients in the Tenby area of Pembrokeshire.

Tenby Dental Haven is one of two practices in West Wales owned by Petra Dental Group (one has been sold since the initial inspection).

The practice staff team includes one dentist, one nurse, one hygienist and a practice manager.

A range of general dental services are provided, including dental implants.

3. Summary

This visit was a follow up to an inspection undertaken on 17 February 2016. The purpose of our visit, on this occasion, was to consider the extent of the progress made in addressing the improvements highlighted within our 2015 report. Whilst this report concentrates mainly on the developments made since our previous visit; we did have a tour of the practice and speak with staff. We did not identify any further areas for improvement on this occasion.

With regard to the patient's experience, there were three improvements identified in the initial report. Whilst at the practice we took the opportunity to review the premises and speak with staff. We were disappointed to see that the practice had started addressing the improvements but not completed on two of the three areas. These need to be addressed as a matter of urgency and we were satisfied that the practice manager would undertake these as soon

There were a number of areas identified for improvement in the initial report regarding the safe and effective treatment of patients. We were pleased to find that there had been a significant amount of improvement regarding the delivery of safe and effective care. There were no new areas identified for improvement.

During the initial inspection, we were concerned that there was a need for more effective management arrangements to ensure that all working practices were compliant with the relevant professional guidance and regulations. However during this inspection we saw that there had been a significant improvement in the management and clinical arrangements now in place in the practice and this had given us the assurance that the services provided were safe and appropriately managed.

4. Findings

Quality of the Patient Experience

With regard to the patient's experience, there were three improvements identified in the initial report. Whilst at the practice we took the opportunity to review the premises and speak with staff. We were disappointed to see that the practice had started addressing the improvements but not completed on two of the three areas. These need to be addressed as a matter of urgency and we were satisfied that the practice manager would undertake these as soon

We were told that the practice team had attended a course on smoking cessation and we saw that information to support patients to stop smoking was available in the practice.

We were given a sample of the new practice information leaflet which met with the standards required. The practice assured HIW that they had a meeting with the website designer on the 21/3/16, however on checking the website it had not been updated. This needs to be completed.

We looked at the complaints procedure and this again remained unchanged. We spoke with the practice manager and highlighted the areas which required revising. We were assured that this would be addressed immediately.

Delivery of Safe and Effective Care

There were a number of areas identified for improvement in the initial report. We were pleased to find that there had been a significant area of improvement regarding the delivery of safe and effective care. There were no new areas identified for improvement.

We looked at the required improvements from the last report with regard to protecting the health, safety and welfare of patients and staff. We were satisfied that the practice had addressed all issues because:

We found that the practice had positioned fire extinguishers in areas suitable for increased patient safety. We also saw that instructions to follow in the event of a fire were visible on the walls in the staff room and front reception.

A copy of the gas maintenance certificate was forwarded to HIW and we saw the original certificate in the practice.

The health and safety poster had been updated and was visible in the staff room and the office. We also saw a new accident book for recording any untoward incidents.

There was a new accident book being used which complied with the requirements of the Data Protection Act 1998. There was also a file for completed reports to be stored securely.

We saw a new needle disposal system which should significantly reduce the number of needle stick injuries sustained by staff

The fire service had been contacted and advice taken on reviewing the risk assessments and completing the outstanding records. These files were available for out scrutiny on the day.

We saw the new Control of Substances Hazardous to Health (COSHH) file, which the practice manager told us was a work in progress because as they purchased new hazardous substances the file was amended or updated.

We saw that the practice had a new contract with the waste company for the safe removal from the premises of; extracted teeth, gypsum and feminine hygiene waste. However on checking the feminine hygiene waste disposal unit, we saw that it was not the appropriate unit. The practice manager stated that this would be changed with the waste disposal company immediately.

With regard to the safe and effective decontamination of instruments we now found that;

The infection control policies and procedures were up to date, were consistent with the Welsh Health Technical Memorandum 01-053 (WHTM 01-05) guidelines and stored in a file which was easily accessible to all staff.

An infection control audit had been commenced which was the audit tool suggested by the WHTM 01-05.

The steriliser which did not have a current maintenance certificate had been disposed of and was no longer in the surgery.

We saw evidence of daily recordings of housekeeping tasks, steriliser and ultrasonic machine checks. There was also a robust system for recording these checks and tests which were consistent with WHTM 01-05 guidelines.

Staff now used heavy duty gloves for the manual cleaning of instruments.

The practice no longer used the endodontic dental instruments more than once. We were told that they were single use and disposed of immediately after treatment.

Staff told us and we saw the certificates to confirm that all staff had attended decontamination training since the initial inspection.

We were told and saw the certificate to confirm that the Principal dentist had attended First Aid training and was the dedicated First Aider for the practice. We also saw that staff had received CPR training. The practice nurse now had responsibility for checking the resuscitation equipment on a regular basis and there were records of the checks undertaken for us to see.

Safeguarding policies and protocols had been updated and contained the relevant information and contact details for referrals should the need arise.

We asked to see evidence of radiographic (x-ray) audits and a random sample of patient notes. There was an improvement in the information detailed in the records with consistent and correct recordings of the areas identified in the initial inspection

Quality of Management and Leadership

During the initial inspection, we were concerned that there was a need for more effective management arrangements to ensure that all working practices were compliant with the relevant professional guidance and regulations. However during this inspection we saw that there had been a significant improvement in the management and clinical arrangements now in place in the practice and this had given us the assurance that the services provided were safe and appropriately managed.

We saw that there were clear management arrangements to ensure the creation, review and regular update of all policies and procedures in line with the current regulations and guidelines. There was a file which stored these policies together which was easily accessible to all staff.

Staff appraisals were seen and were undertaken regularly.

All staff had recently received blood tests to ensure that they were sufficiently protected against Hepatitis B and records of their immunity status were available. We suggested that these records be stored within individual staff files.

We read the minutes of the new staff meetings but were told that they practice still maintained the daily morning informal meetings.

5. Next Steps

Findings from this inspection did not result in the need for the practice to complete an improvement plan.

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 2008¹ and the Private Dentistry (Wales) (Amendment) Regulations 2011². Where appropriate we consider how the practice meets these regulations, as well as the Ionising Radiation Regulations 1999, the Ionising Radiation (Medical

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

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

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 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.