

General Dental Practice Inspection (Announced)

**Aneurin Bevan University
Health Board, PA Hawkins
& LA Griffiths Dental
Surgery**

Inspection date: 8 November 2016

Publication date: 9 February 2017

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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

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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 PA Hawkins & LA Griffiths Dental Surgery at 11 Station Terrace, Caerphilly, CF83 1HD on 8 November 2016.

HIW explored how PA Hawkins & LA Griffiths Dental Surgery 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

PA Hawkins & LA Griffiths Dental Surgery provides services to patients in the Caerphilly area of South Wales. The practice forms part of dental services provided within the area served by Aneurin Bevan University Health Board.

PA Hawkins & LA Griffiths Dental Surgery is a mixed practice providing both private and NHS dental services.

The practice staff team includes five dentists, eight nurses and three receptionists.

A range of NHS and private dental services are provided.

3. Summary

Overall, we found evidence that PA Hawkins & LA Griffiths Dental Surgery provided safe and effective care.

This is what we found the practice did well:

- Patients we spoke to were happy with the service provided
- The practice team were committed to ensuring patients had a positive experience
- Dental instruments were cleaned and sterilised appropriately
- Documentation and information was available showing that X-ray equipment was used safely
- Staff told us they felt supported by senior practice staff.

This is what we recommend the practice could improve:

- More frequent checks needed to be done on the emergency drugs and equipment to ensure it is available and safe to use in the event of a patient emergency (collapse)
- Recording of checks on sterilisation equipment needed to be more detailed
- Dentists needed to improve aspects of their record keeping
- A review of some policies and procedures were required.

4. Findings

Quality of the Patient Experience

We saw that patients were treated with dignity, respect and kindness by the practice team. Patients who provided comments indicated that they were very satisfied with the service offered by the practice.

Prior to the inspection, we invited the practice to distribute HIW questionnaires to patients to obtain their views on the dental services provided. In total 82 were completed and returned to us. Patients' comments included:

'Always found this practice very welcoming and helpful and standard of service excellent.'

'The practice go over and above their duty of care.'

'Always happy with my experience, staff are helpful. Never had any delayed appointments and treatment is always thorough and well explained.'

'My family and I have nothing but the highest confidence in the dentists' professional abilities, reinforced by our experiences here. The staff at the practice have always been efficient and appear happy in their work.'

All patients who returned a questionnaire indicated that they were very satisfied with the care and treatment provided to them.

Dignified care

We observed that engagement between the practice team and patients was friendly, respectful and professional.

Completed patient questionnaires showed that all patients were satisfied with the care they received. Patients told us that they had been made to feel welcome by the practice. Some patients added their own positive comments about the level of service received and the attitude and approach of the whole practice team.

The practice provided both private and NHS treatments. Information on NHS dental treatment costs was displayed in reception. This meant patients had access to information on how much their NHS treatment may cost. Prices for private dental treatments were not displayed in the practice. We recommended to the practice that costs for private dental treatments must be displayed for patients to see. The practice agreed to implement this.

Improvement Needed

The practice must display for patients to see a price list for private dental treatments

A practice information leaflet was available in reception for patients to read and take away that provided general information about the practice.

Timely care

We found that the practice made efforts to ensure that patients were seen in a timely manner. The majority of patients who completed questionnaires told us that they had not experienced a delay in being seen by a dentist on the day of their appointment. We were told that patients would be informed about any delay to their appointments by the receptionist.

An out of hours telephone number was available for patients to contact should they require urgent dental treatment. The telephone number was clearly displayed on the front door of the practice, included in the patient information leaflet and on the answer phone message of the practice. The majority of patients who returned questionnaires stated that they knew how to access the out of hours service.

Staying healthy

We saw that there were health promotion leaflets available to patients within the practice, to help promote the need for them to take care of their own oral health and hygiene.

All patients told us that they felt they had been given enough about their dental treatment, some patients provided additional positive comments indicating that explanations about their treatment were detailed and any questions were answered thoroughly by the dentists.

Individual care

The practice is located in a converted terrace house arranged over two floors. Two surgeries were located on the ground floor, with a further four located on the first floor of the practice accessibly only via stairs. There was one step leading into the practice and support was offered from staff to patients who may need assistance accessing the building via wheelchair. We were told that patients with mobility difficulties would be offered an appointment with their own dentist in one of the ground floor surgeries.

The practice made information available to patients on how they could raise a concern (complaint) and had systems in place for patients to provide feedback through a suggestions box.

We saw that the practice had a written complaints procedure. Information for NHS and private patients on how to raise a concern (complaint) was displayed in the reception areas. We recommended that the complaints process for private patients needed to be updated to include the practice's own complaints process for private patients. The policy also required updates to include the contact details for HIW. We saw that the practice had received one written and one verbal complaint and the practice had maintained details of actions taken. This allowed the practice to review concerns, take steps to resolve any issues and feedback to patients. This meant that the practice was learning from concerns with a view to improve practise and patient experience.

Improvement Needed

The practice's complaints procedure must include information for private patients on how to raise a complaint with the practice

The complaints procedure for private patients must include the correct contact details for Healthcare Inspectorate Wales

We saw that patients were able to provide feedback on the services provided through a suggestions box in the reception area of the practice. We saw that one dentist had carried out a patient satisfaction survey of their own patients and identified areas for improvement. We recommend that the practice may wish to consider implementing a patient satisfaction survey across the whole practice. The practice agreed to consider this suggestion.

Delivery of Safe and Effective Care

We found the practice provided patients with safe and effective care. The practice premises were visibly well maintained both internally and externally.

A thorough process for cleaning and sterilising dental instruments was demonstrated. We saw that improvements need to be made in the recording of checks on the sterilisation equipment.

We saw that checks on emergency drugs and equipment, whilst being carried out, needed to be done more regularly.

Documentation and information was available to demonstrate that X-ray and decontamination equipment was being used safely.

Safe care

We found that the practice had arrangements in place to protect the safety and well being of staff working at, and people visiting the practice.

The building appeared to be well maintaining internally and externally. During a tour of the building we saw that all areas were clean, tidy and free from obvious hazards.

We saw that fire safety equipment was available at different locations around the practice. We also saw evidence that the practice had a contract in place for annual servicing of the equipment to ensure it was working properly.

A contract was in place for the safe transfer and disposal of hazardous (clinical) waste produced by the practice. We saw hazardous waste was being stored in a lockable container whilst waiting to be collected by the contractor company. Amalgam separator equipment was installed so amalgam (a form of dental substance containing mercury) particles from dental fillings could be removed from waste water before being disposed of safely. Arrangements with the local council were described for the disposal of non hazardous (household) waste.

We considered a sample of records within the practices COSHH¹ (Control of Substances Hazardous to Health) file. We saw that the file had not been recently reviewed. We recommended to the practice that a detailed risk assessment of all substances used within the practice should be carried out to ensure that potentially hazardous substances had been appropriately considered and safeguarded. The practice agreed to do this.

Improvement Needed

The practice should undertake a full COSHH review to ensure that substances used within the practice have been fully risk assessed

We looked at all the clinical facilities (surgeries) within the practice. These were clean and tidy. Floors and surfaces within surgeries were easily cleanable to reduce cross infection. We were told that there were plans in place to refurbish two of the older dental surgeries in 2017 to maintain standards within the practice.

A separate decontamination room was set up and met the principles set out within the Welsh Health Technical Memorandum (WHTM) 01-05 (Revision 1)² guidance document. Decontamination equipment appeared in good condition on inspection. Three autoclaves³ were in use and installation/inspection certification was available showing they were safe to use. We saw that daily checks were being carried out and logbooks maintained, as recommended by WHTM 01-05, of tests on cleaning and sterilisation equipment to show it remained safe to use. We saw that information recorded in some of the logbooks were incomplete. We recommended that the practice should consider implementing a recognised logbook associated to the specific autoclave to ensure that all relevant information is recorded. The practice agreed to implement this.

¹ <http://www.hse.gov.uk/coshh/>

² [The Welsh Health Technical Memorandum \(WHTM 01-05\) \(Revision 1\)](#) document provides professionals with guidance on decontamination in primary care practices and community dental practices.

³ An autoclave machine is a pressure chamber used to sterilize equipment and supplies by subjecting them to high pressure saturated steam.

Improvement Needed

The practice must ensure that all information relating to the daily tests of the autoclaves are recorded in accordance with WHTM-01-05

A thorough decontamination process was demonstrated by staff and we saw certificates showing nursing staff had attended training on decontamination.

Instruments were being stored in sealed bags to prevent cross contamination. The dates by which instruments must be used or reprocessed (cleaned and sterilised) had been recorded on packaging in accordance with WHTM 01-05.

We saw that the practice had recently conducted an infection control audit to identify areas for improvement and development as part of the overall quality assurance monitoring activity.

We saw that equipment and drugs were available for use in a patient emergency (collapse). We were told that the drugs and equipment were being checked on a monthly basis by the dentists. We recommended to the practice that weekly checks should be undertaken (and recorded) on emergency drugs and equipment in accordance with the Resuscitation Council (UK)⁴. The practice provided verbal assurance that this would be addressed.

Improvement Needed

The practice must make suitable arrangements to ensure that they have a system in place for conducting regular checks on the emergency equipment in accordance with the quality standards set out by the Resuscitation Council (UK)

Staff had easy access to a series of flowcharts describing the action to take, and drugs to use, should a patient emergency be identified. These were stored securely in plastic wallets, together with the drugs to be used to facilitate easier access in an emergency. We saw training records that indicated staff training in cardiopulmonary resuscitation (CPR) was up to date.

We concluded that the practice had arrangements in place for the safe use of radiographic (X-ray) equipment. This is because the required documentation

⁴ [The Resuscitation Council \(UK\)](#) exists to promote high-quality, scientific, resuscitation guidelines that are applicable to everybody, and to contribute to saving life through education, training, research and collaboration.

and information on the safe use of the X-ray equipment was available and up to date. We saw training certificates demonstrating that the dentists were up to date with their ionising radiation training and were meeting guidance set out by the General Dental Council.

Whilst we saw records to show that other clinical staff had received ionising radiation training, we advised that the practice seek advice on whether this training was sufficient, taking into account staff members' involvement using X-ray equipment and General Dental Council guidance.⁵

Improvement Needed

The practice must ensure that all staff receive ionising radiation training in accordance with the requirements set out by the General Dental Council

We saw that image quality audits of X-rays had been completed regularly as part of the quality assurance monitoring activity. These audits identify possible issues with the taking of X-rays and indicate where improvements should be made if required.

The practice had a procedure in place to promote and protect the welfare of children and adults who become vulnerable or are at risk. We recommended that the safeguarding procedures for both adults and children should be updated to ensure that the contact details were correct and up to date for the relevant Local Authority. The practice agreed to do this. All staff had completed training on child and adult protection and we saw training certificates that demonstrated this.

Staff we spoke to confirmed they felt able to raise any work related concerns they may have with senior practice staff and were confident these would be acted upon.

⁵ <http://www.gdc-uk.org/Newsandpublications/Publications/Publications/Continuing%20Professional%20Development%20for%20Dental%20Professionals.pdf>

Effective care

Discussions with the principal dentists demonstrated a commitment by the team to provide safe and effective care to patients.

We saw that the practice carried out a range of clinical audits to monitor the quality and safety of the care and treatment provided to patients. These included clinical audits to identify areas for improvement and checks on equipment to make sure it was working effectively.

We considered a sample of 15 patients' dental records to assess the quality of record keeping. Patient records were in paper format. Overall the notes made were sufficiently detailed. However we did identify some common themes where improvement should be made. These were:

- Patients' alcohol and tobacco use had not always been noted by the dentists. This would demonstrate that dentists had assessed patients for their risk of developing oral cancer and provided advice on how this could be reduced
- The outcomes of BPE (Basic Periodontal Examination) checks were inconsistently recorded within patient records, and not in accordance with recommended guidelines
- The recording of soft tissue examinations was limited, including cancer screening. We were told that this was being carried out for all patients at each appointment, but was not being recorded as a separate check
- The reasons for timescales between patient appointments were not consistently recorded meaning justification for different patient recall times could not be explained
- Recording of patient consent to treatment was inconsistently recorded. We were told that verbal consent was agreed at each appointment, but not always documented.

Improvement needed

The dentists working at the practice must make suitable arrangements to ensure patient dental records completed by them are maintained in accordance with regulatory requirements and professional standards for record keeping

In addition, the reason for taking X-rays and the dentists' findings from them had not always been recorded as required by the Ionising Radiation (Medical Exposure) Regulations (IR(ME)R) 2000.

Improvement needed

The dentists working at the practice must ensure they record the justification for taking X-rays and their findings as required by the Ionising Radiation (Medical Exposure) Regulations 2000

Quality of Management and Leadership

A management structure with clear lines of reporting and accountability was demonstrated. Staff told us they felt well supported by the whole practice team. Staff told us they had the opportunity to attend relevant training and were supported and encouraged by the management team.

PA Hawkins and LA Griffiths Dental Surgery is managed by three dentists. The dentists are supported by a team of two associate dentists, dental nurses and receptionists. Clear lines of accountability and reporting were described by all of the practice team. Where we identified areas for improvement, the practice demonstrated a willingness and commitment to address these promptly.

Staff working on the day of our inspection told us that they felt well supported in their roles by all members of the practice team. We found that staff were clear and knowledgeable about their roles and responsibilities. Staff told us that they felt communication within the practice was good. We saw that team meetings were held regularly within the practice and staff told us they felt able to discuss any issues during these meetings.

We saw that there were a range of policies and procedures in place with the aim of ensuring the safety of staff and patients. We majority of the policies we saw were not signed by staff, did not have review dates or a version number. This meant that we were unable to see whether all staff had read and understood the policies and procedures in place and whether the most up to date version was available. We recommended to the practice that they should annotate all policies and procedures with a date of review, version number and staff signatures.

Improvement Needed

The practice should ensure that they have a system in place to review policies and procedures and demonstrate that these have been communicated appropriately to staff

We saw certificates that demonstrated staff had attended training on a variety of topics relevant to their role. Staff also confirmed that they were supported and encouraged by the management team to access training opportunities.

We saw evidence that staff had received an appraisal of their performance within the last year.

We found that dentists and nursing staff were registered with the General Dental Council to practise and had indemnity insurance cover in place.

Records were available that demonstrated staff had received immunisation against Hepatitis B to protect patients and themselves against infection. Occupational health advice and support was available from the health board.

The dentists working at the practice provided private dental services. Their HIW registration certificates were prominently displayed as required by the regulations for private dentistry. One certificate required updating to include HIW's correct address. The dentists agreed to contact HIW so that updated certificates could be issued. Up to date Disclosure and Barring Service (DBS) certificates were not available for all of the dentists working at the practice. The regulations for private dentistry require that all dentists providing private dental services in Wales have a DBS certificate issued within the previous three years.

Improvement Needed

All dentists working at the practice and registered with HIW to provide private dental services must have an up to date DBS certificate and make this available for inspection by HIW

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 PA Hawkins & LA Griffiths Dental Surgery 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 2008⁶ and the Private Dentistry (Wales) (Amendment) Regulations 2011⁷. 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

⁶ <http://www.legislation.gov.uk/wsi/2008/1976/contents/made>

⁷ <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: PA Hawkins & LA Griffiths Dental Surgery

Date of Inspection: 8 November 2016

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
Quality of the Patient Experience					
Page 6	The practice must display for patients to see a price list for private dental treatments <i>General Dental Council Standards for the Dental Team, Standard 2</i>	The Private Dentistry (Wales) Regulations 2008 (as amended) Regulation 14 Health and Care Standards	A price list for private dental treatments has been produced and will be displayed	P.Hawkins	Immediately

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
		April 2015 Standard 4.2			
Page 7	<p>The practice's complaints procedure must include information for private patients on how to raise a complaint with the practice.</p> <p>The complaints procedure for private patients must include the correct contact details for Healthcare Inspectorate Wales</p>	<p>The Private Dentistry (Wales) Regulations 2008 (as amended)</p> <p>Regulation 15</p>	The practice complaints policy has been amended to include all relevant details	P.Hawkins	Immediately
Delivery of Safe and Effective Care					
Page 9	The practice should undertake a full COSHH review to ensure that substances used within the practice have been fully risk assessed	Health and Care Standards April 2015 Standard 2.1	A full revised COSHH review is being carried out.	P.Hawkins	End February 2017
Page 10	The practice must ensure that all information relating to the daily tests	Health and Care Standards	All required information relating to daily tests are currently recorded	P.Hawkins	Completed

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
	of the autoclaves are recorded in accordance with WHTM-01-05 <i>Welsh Health Technical Memorandum WHTM 01-05 Revision 1 – February 2014 Section 4</i>	April 2015 Standard 2.4			
Page 10	The practice owner must make suitable arrangements to ensure that they have a system in place for conducting regular checks on the emergency equipment in accordance with the quality standards set out by the Resuscitation Council (UK) <i>Resuscitation Council (UK), Quality Standards for cardiopulmonary resuscitation practice and training, Primary Care</i>	The Private Dentistry (Wales) Regulations 2008 (as amended) Regulation 14 Health and Care Standards April 2015 Standard 2.9	A system of weekly checks of emergency equipment is in place	P.Hawkins	Completed
Page 11	The practice must ensure that all staff receive ionising radiation training in accordance with the requirements set	Health and Care Standards April 2015	Radiation training for staff in line with GDC requirements are in place	P.Hawkins	Completed

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
	out by the General Dental Council <i>General Dental Council Standards for the Dental Team</i>	Standard 7.1			
Page 12	The dentists working at the practice must make suitable arrangements to ensure patient dental records completed by them are maintained in accordance with regulatory requirements and professional standards for record keeping <i>General Dental Council Standards for the Dental Team, Standards 3 and 4</i>	Regulations 2008 (as amended) Regulation 14 Health and Care Standards April 2015 Standard 3.5	Patient dental records are now maintained in accordance with regulatory requirements	P.Hawkins	Completed
Page 13	The dentists working at the practice must ensure they record the justification for taking X-rays and their findings as required by the Ionising Radiation (Medical Exposure) Regulations 2000 <i>General Dental Council Standards for</i>	The Ionising Radiation (Medical Exposure) Regulations 2000 Health and Care Standards	Justification for taking X-rays are now fully documented	P.Hawkins	Completed

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
	<i>the Dental Team, Standard 4.1</i>	April 2015 Standard 3.5			
Quality of Management and Leadership					
Page 14	The practice should ensure that they have a system in place to review policies and procedures and demonstrate that these have been communicated appropriately to staff <i>General Dental Council Standards for the Dental Team, Standard 6</i>	Health and Care Standards April 2015 Governance , leadership and accountability	A system to review policies and communicate appropriately to staff will be devised	P.Hawkins	End February 2017
Page 15	All dentists working at the practice and registered with HIW to provide private dental services must have an up to date DBS certificate and make this available for inspection by HIW	The Private Dentistry (Wales) Regulations 2008 (as amended) Regulation 13 schedule	Dentists that do not already have up to date DBS certifications have reapplied to HIW	P.Hawkins	Immediately

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
		2			

Practice Representative:

Name (print):P.A.Hawkins.....

Title:Dentist.....

Date:30.11.16.....