

## **General Dental Practice Inspection Announced**

### **Happy Teeth Dental Practice, Monmouth**

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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 Happy Teeth Dental Practice at 29 Monnow Street, Monmouth, NP25 3EF on 12th October 2016.

HIW explored how Happy Teeth 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

Happy Teeth Dental Practice provides private only dental services and is based in Monmouth.

The practice staff team includes one dentist; one receptionist; one hygienist and two nurses.

A range of private dental services are provided.

### 3. Summary

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

What 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 were available
- Staff we spoke with were happy in their roles and understood their responsibilities
- Clinical facilities were well-equipped, visibly clean and tidy
- There were arrangements in place for the safe use of X-rays
- Dental instruments were cleaned and sterilised appropriately.

What the practice could improve:

- Review of risk assessments to be completed
- The five yearly electrical wiring certificate to be updated
- Processes for the maintaining of records to be reviewed
- Clinical staff to have a three yearly updated safeguarding check
- Hazard warning signage to be available where X-ray equipment is used
- Five yearly inoculation checks to be updated.

## 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 universally positive.**

Prior to the inspection, we asked the practice to distribute HIW questionnaires to patients to obtain views on the dental services provided at the practice. In total, 19 questionnaires were completed and returned to us. Patients' comments included:

*"This is an exceptional practice. I am a nervous patient and they always provide reassurance and an excellent service."*

*"All staff are very pleasant and welcoming and put you at your ease. Very happy overall."*

*"Very friendly helpful staff."*

*"I have always been very pleased with any care or treatment from the practice."*

#### Dignified care

We saw evidence to indicate patients were provided with care in a dignified and respectful manner. There was space available for staff to have conversations with patients in a private area, away from other patients, if required. We observed staff speaking to patients in a friendly and professional way. Feedback from the patients who completed HIW questionnaires was universally positive with patients stating they were satisfied with the care and treatment they received at the practice and that they felt welcomed by staff.

There was a range of information about the practice on display and leaflets were available for patients. 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 makes every effort to ensure that care is provided in a timely way. The majority of patients indicated in HIW questionnaires that they had not experienced any delay in being seen by the dentist. The emergency contact

telephone number was displayed on the website and in the window so that patients could access emergency dental care when the practice is closed.

### Staying healthy

All patients who completed the HIW questionnaires told us they received sufficient information about their treatment. We noticed there were good and detailed health promotion leaflets/posters and displays in the waiting area. A seasonal focus had been placed around the 'Stoptober' 2016 campaign relating to smoking cessation. There was a sugar chart, which was child friendly and informative toward improving oral health and we were told that previous patient displays had included mouth cancer awareness. Free samples of toothpaste were available for patients to pick up of their own accord. Health promotion information assists in supporting patients to take responsibility for their own health and well-being and there was a clear focus being placed on this within the surgery.

### Individual care

There was a formal patient questionnaire process in place as a way of assessing the quality of the service provided. The results of the surveys were being considered and actions taken to respond to any suggested improvements. Patient testimonials were posted on the practice's website, which provided some patient feedback. However, we advised that patient questionnaires should be distributed on a periodic basis and that outcomes be provided to patients, demonstrating the actions and learning taken forward, to further strengthen the processes already in place.

The practice had a procedure in place so that patients could raise concerns (complaints). A concerns book was available at reception and we were told that the practice had received no complaints to date. There was also a suggestion box available in the waiting area. From our observations and through discussion with the dentist, it was evident that individual patient needs were well considered

The surgery is situated on the first floor and so does not provide disabled access, but we were told that the surgery refer any clients with mobility needs to an alternative surgery, with a view to their needs being met elsewhere.



## *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.

### **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 around the practice and had been serviced regularly. Contract documentation was in place for the disposal of non hazardous and hazardous waste. Sharps containers were safely stored.

We looked at the risk assessments on Control of Substances Hazardous to Health (COSHH)<sup>1</sup> 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. However, we noted that the risk assessment for safe and secure storage of COSHH items needed to be reviewed.

### **Improvement needed**

#### ***Risk assessments to be reviewed and updated for the safe and secure storage of COSHH substances.***

We saw that portable appliances testing (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. However, the five yearly electrical wiring certificate for the premises required updating. We

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<sup>1</sup> 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>

found that records were not being maintained for the daily checks that were being undertaken for the compressor equipment.

### **Improvements needed**

**The five yearly electrical wiring certificate to be updated and a copy to be sent to HIW.**

***Maintain a record of the daily checks for the compressor.***

#### *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 (WHTM) 01-05<sup>2</sup> 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
- 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.

However, we found that there was inconsistency in how the autoclave checks were being stored and maintained. We advise that the hygienist ensure that

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<sup>2</sup> <http://www.wales.nhs.uk/sites3/docopen.cfm?orgid=254&id=232444>

their records are kept in line with the process followed by the dentist at the practice.

Also we found that five yearly inoculation checks required updating for three staff members. Records of immunity must be maintained and up to date and/or evidence of life long immunity where that applies.

***Improvements needed***

***Maintain a consistent approach to the record keeping of the autoclave checks.***

**5 yearly inoculation checks should be undertaken with records maintained and/or life long immunity records kept at the practice.**

***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 available for use in the event of a patient emergency (collapse). We saw records to show that staff had received training on how to deal with medical emergencies and how to perform cardiopulmonary resuscitation (CPR). The practice had sufficient and up to date first aid trained staff within in the team.

Emergency drugs were well organised, with corresponding life support flowcharts for use in specific emergencies. We advised that the record book for checking the emergency drugs stock be kept alongside the emergency drugs. The security of the location of the emergency drugs needed consideration.

***Improvements needed***

***Risk assessments to be reviewed and updated to consider the security of access to the emergency drugs to reduce the risk of access by unauthorised persons***

***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. All staff had received training in the protection of children and vulnerable adults. We were told there were arrangements in place for staff to raise any concerns. We were told that pre-employment checks of any potential members of staff are undertaken before they join the practice with Disclosure and Barring Service (DBS) certificates included as part of those checks.

Whilst DBS refreshers 3 yearly are not a requirement for all staff, the dentist should consider how they assure themselves that safeguarding is assured in the absence of regular 3 yearly DBS checks. Dentists registered with HIW to provide private dental services, however, should maintain a 3 yearly DBS check and we found that DBS renewal was required for the dentist.

***Improvement needed***

**Safeguarding checks to be renewed for the dentist, on a 3 yearly basis and records maintained.**

***Radiographic equipment***

A radiation protection file was in place and we saw documentation to show that X-ray machines had been serviced to help ensure they were safe for use. However, the service documentation did not clearly indicate the service and calibration intervals and next due date. Whilst there was a valid service contract agreement in place, which was for a period of three years, for fullness and clarity the dentist should ensure that the radiology service certificate clearly indicates the calibration and service date period.

***Improvement needed***

***Clarification of the next service date for the radiology equipment is required from the service contract provider for consistency and fullness and a copy of this to be forwarded to HIW.***

Radiation control area plans were in place. We found that the dentist and dental nurses involved in taking radiographs had all completed the required training. This is in accordance with the requirements of the General Dental Council<sup>3</sup> and Ionising Radiation (Medical Exposure) Regulations 2000. We found that radiographic quality assurance audits were being conducted by the dentist. This is a requirement of the Ionising Radiation (Medical Exposure) Regulations 2000 (IR(ME)R).

We found that signage was required to indicate the location of the X-ray controlled areas for the health and safety of patients.

***Improvement needed***

***Hazard signage to be available for the X-ray controlled areas.***

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<sup>3</sup> General Dental Council - <http://www.gdc-uk.org/Pages/default.aspx>

### *Patient Records*

We viewed a sample of dental records and spoke with the dental practitioner 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.

## ***Quality of Management and Leadership***

**The dental practice was efficiently operated by a small team of experienced, professional and 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.

We confirmed that all relevant staff were registered with the General Dental Council. HIW certificates were being displayed in accordance with the private dentistry regulations.

The Dentist has overall responsibility for the day to day operation of the practice. The practice team were well established and there was a low turn over of staff. Staff we spoke to were committed to providing high quality care to patients. We saw an example of records to show that staff were able to access training relevant to their role and for their continuing professional development (CPD). Each member of the dental team had clear individual responsibility for particular aspects of the service.

We found that the security of records needed to be further considered to ensure compliance with data protection. The dentist gave assurance that key pad access to the area where some records are kept would be arranged so as to improve on the current arrangements for the security of records.

### **Improvement needed**

***Risk assessments to be reviewed, updated and arrangements put in place to promote the security of records***

## 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 Happy Teeth 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 2008<sup>4</sup> and the Private Dentistry (Wales) (Amendment) Regulations 2011<sup>5</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 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 relevant regulations at the practice visited on the day of the inspection.

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<sup>4</sup> <http://www.legislation.gov.uk/wsi/2008/1976/contents/made>

<sup>5</sup> <http://www.legislation.gov.uk/wsi/2011/2686/contents/made>



## Appendix A

**General Dental Practice: Improvement Plan**

**Practice: Happy Teeth Dental Practice**

**Date of Inspection: 12 October 2016**

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
<b>Quality of the Patient Experience</b>					
	No improvement plan required				
<b>Delivery of Safe and Effective Care</b>					
7	Risk assessments to be reviewed and updated for the safe and secure storage of COSHH substances. <i>The Control of Substances Hazardous to Health Regulations 2002</i>	Private Dentistry (Wales) Regulations 2008 Regulation 14 (1) (d)	Risk Assessments reviewed and updated	Marina Taylor	Completed
8	The five yearly electrical wiring certificate to be updated and a copy to be sent to HIW.	Private Dentistry (Wales) Regulations	Wiring test booked for 26 <sup>th</sup> Nov	Marina Taylor	Certificate will be sent as soon as

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
	<i>The Electricity at Work Regulations 1989 (HSE)</i>	2008 Regulation 14 (1) (d)			received.
8	Maintain a record of the daily checks for the compressor.  <i>Pressure Systems Safety Regulations 2000</i>	Private Dentistry (Wales) Regulations 2008 Regulation 14 (3) (b)	Record book now being maintained daily.	Caroline Morgan	Completed
9	Maintain a consistent approach to the record keeping of the autoclave checks  <i>WHTM 01-05</i>	Private Dentistry (Wales) Regulations 2008 Regulation 14 (3) (b)	Hygienist now has same system as nurses.	Caroline Morgan	Completed
9	Five yearly inoculation checks should be undertaken with records maintained and/or life long immunity records kept at the practice.  <i>General Dental Council (GDC) Guidance 1.5.2</i>	Private Dentistry (Wales) Regulations 2008 Regulation 14 (1) (b) and 14 (6)	Checks had already been completed. Paperwork was sent to Inspector the day after the inspection.	Marina Taylor	Paperwork resent to HIW today.

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
9	Risk assessments to be reviewed and updated to consider the security of access to the emergency drugs to reduce the risk of access by unauthorised persons <i>Dental Practitioners Formulary</i>	Private Dentistry (Wales) Regulations 2008 Regulation 14 (1) (b)	Risk assessment reviewed and locks installed on doors.	Marina Taylor	Completed
10	Safeguarding checks to be renewed for the dentist, on a 3 yearly basis and records maintained. <i>GDC Guidance 6.1.6</i>	Private Dentistry (Wales) Regulations 2008 Regulation 13 (2)	Application sent to Disclosure barring services	Marina Taylor	In the system
10	Clarification of the next service date for the radiology equipment is required from the service contract provider for consistency and fullness and a copy of this to be forwarded to HIW.	Private Dentistry (Wales) Regulations 2008 Regulation 14 (3) (b)	Letter was sent to Inspector the day after the inspection.	Marina Taylor	Letter attached again.
10	Hazard signage to be available for the X-ray controlled areas.	Private Dentistry (Wales) Regulations 2008 Regulation 14	Signs obtained and mounted	Marina Taylor	Completed

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
		(1) (d)			
<b>Quality of Management and Leadership</b>					
12	Risk assessments to be reviewed, updated and arrangements put in place to promote the security of records  <i>Data Protection Act 1998</i>	Private Dentistry (Wales) Regulations 2008  Regulation 14 (1) (b)	Risk assessment reviewed and lock placed on doors	Marina Taylor	Completed

**Practice Representative:**

**Name (print):** .....Marina Taylor.....

**Title:** .....Principal dentist.....

**Date:** .....21/11/2016.....