

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

**Lodwig Villa Dental  
Practice, Bangor**

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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 an inspection to Lodwig Villa Dental Practice, Holyhead Road, Bangor, LL57 2DP on 7 February 2017.

HIW explored how Lodwig Villa 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

Lodwig Villa Dental Practice, Bangor provides private only dental services and is based in Bangor.

The practice staff team includes 3 dentists, 1 hygienist, 6 dental nurses, 2 receptionists and a Practice Manager.

A range of private dental services are provided.

### 3. Summary

Overall, we found evidence that Ludwig Villa Dental Practice provided safe and effective care. We observed the warm, friendly and professional approach shown towards patients by the dental team and receptionists. Patients who completed the HIW questionnaires told us that they were very satisfied with the care and treatment they receive at Ludwig Villa Dental Practice.

This is what we found the practice did well:

- The practice is committed to providing a positive experience for patients, and staff we spoke to were happy in their roles and understood their responsibilities, were polite, caring and listened to patients.
- Patients were provided with enough information to make an informed decision about their treatment and we saw evidence that patients were satisfied with the treatment and service received.
- The practice had a system in place for seeking the views of patients.
- Clinical facilities were well-equipped, visibly clean and tidy and well organised.
- Patients' records were of a good standard.
- Systems for governance and monitoring the quality of the service against the requirements of the regulations are in place.
- Policies and procedures regularly reviewed with version controls.

This is what we recommend the practice could improve:

- The practice was advised to ensure that sanitary disposal bin was provided in both the staff and patient toilets.
- Two bowls to be made available in the decontamination sink.
- The practice to ensure that the HIW registration certificates for all dentists at the practice is displayed as required by the regulation.
- Child and adult safeguarding policies to be updated to include contact details for the local safeguarding team.

## 4. Findings

### *Quality of the Patient Experience*

***We found evidence that this practice was committed to providing a positive experience for their patients. The care was given in a timely and dignified manner.***

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

*“Always very good and very efficient”*

*“As a very nervous patient, I always leave happy and feel better as the treatment here from the dentist is brilliant”*

*“Excellent service – very friendly and helpful”*

*“I am completely satisfied with the treatment and respect I receive always”*

*“Lovely staff, very welcoming”*

*“[Named staff] has been extremely reassuring and competent in his work, and I am delighted with his work”*

*“Nice, relaxed atmosphere, which helps the patient relax and feel confident about the treatment they are receiving”*

#### Dignified care

All patients stated they were satisfied with the care and treatment they had received at the practice and felt welcomed by the staff. We also observed the warm, friendly and professional approach adopted by staff towards the patients.

#### Timely care

The practice tries to ensure that dental care is provided in a timely way and of the completed questionnaires only three patients indicated that they had ever experienced any minor delays, and that these had not been an issue.

Nine patients told us that they did not know how to access out of hours care. There was a sign on the outside entrance of the premises giving the emergency contact details and this was also provided on the practice’s answer phone.

Details are also provided within the patient information leaflet. We suggested to the practice that they consider other ways of ensuring all patients are made aware of the out of hours contact details in case of an emergency.

### Staying healthy

Of the 16 questionnaires completed, 12 patients told us that their language needs were met. There were ample dental health promotion leaflets available at reception and the waiting room which meant patients had access to information on how to care for their own oral hygiene. Price lists were also clearly on display in the waiting area.

### Individual care

Responses from patients' questionnaires showed that all patients felt they were given enough advice about their individual treatment and were very happy with the service they received. Patients told us that they are always made to feel very welcome. It was evident from the questionnaires that staff always take time to listen to patients and advise them about any concerns or questions they may have.

The practice is located over two floors. The reception, waiting area, two dental surgeries and the therapist surgery are accessible for wheelchair users. The practice also has a dedicated disabled parking and access to the building.

There was one unisex toilet for use by patients and one toilet for staff, both located on the ground floor. Both facilities were clearly signposted and visibly clean; however, no sanitary disposal bin was in place for either facility.

### ***Improvement needed***

***The practice was advised to ensure that sanitary disposal bin was provided in both the staff and patients toilets.***

We saw that the practice had a complaints procedure in place. We noted that the procedure did not include the contact details of the registration authority which the practice amended immediately following our visit.

The complaints procedure was clearly displayed in reception, waiting area and also displayed in each surgery. However, despite these measures, we identified from the questionnaires that more than half the patients stated they did not know how to make a complaint. We suggested that the practice consider other ways of ensuring all patients are aware of how to make a complaint.

We discussed the practice's mechanism for actively seeking patient feedback; which the practice does by providing questionnaires to their patients in the reception area. We saw evidence that the practice has acted upon and used the feedback to influence changes at the practice. We did advise the practice to display patients' feedback analysis, demonstrating that their individual feedback has been captured and acted upon to enhance learning and improvement at the practice.

## *Delivery of Safe and Effective Care*

**We found that patients were provided with safe and effective dental care. The surgery contained all relevant equipment and had been designed and organised to help the team work efficiently and was visibly very clean and in good condition. Patients' records were of a good standard.**

### Safe care

We found that the practice was being run with the intention of meeting the Private Dentistry (Wales) Regulations 2008 and the Private Dentistry (Amendment) Regulations 2011 and other relevant legislation and guidance to ensure the health, safety and welfare of patients and staff. The practice provided a clean environment and the surgeries were light and airy.

We looked at the clinical facilities in the surgeries and found that they contained relevant equipment for the safety of patients and the dental team. We noted that the surgeries were visibly very clean and in good condition. They had also been designed and organised to help the team work efficiently.

We saw evidence that suitable arrangements were in place for the safe use of radiographic (X-ray) equipment and evidence of up-to-date ionising radiation training for the dental surgeons. During our visit, the notification letter to Health and Safety Executive (HSE) regarding radiological protection was not available; however, confirmation that the practice is registered with the HSE was sent immediately to HIW following our visit. Servicing of the radiological equipment had only recently taken place at the practice and as such the certificates were not available on the day of inspection. However, we saw an email from the company confirming the servicing and the certificates have since been sent to HIW.

The certificate for servicing one of the compressors could not be located for us to view; however it has since been sent to HIW.

We were informed by the practice that portable appliance testing (PAT) was undertaken on a two-yearly basis on all electrical equipment ensuring small appliances were safe to use. However, the certificate was not available for us to view and has since been sent to HIW. Fire extinguishers were in place throughout the building and we saw evidence of a current fire equipment maintenance contract. Directions for the emergency exits were clearly visible and the Health and Safety poster was clearly on display.

We found that all chemicals were kept securely and none were left in public areas. There was a file available containing a number of data sheets relating to

Control of Substances Hazardous to Health (COSHH) and relevant risk assessments in place which had been recently reviewed.

General health and safety risk assessments were seen on the day, and these had been recently reviewed.

The practice had procedures in place showing how to respond to patient medical emergencies. We saw records that indicated that the team had received all relevant training and the practice had two appointed first aiders.

The emergency drugs were stored securely and immediately available in the event of a medical emergency (patient collapse) at the practice. We saw evidence that an effective system was in place to check the equipment and emergency drugs to ensure they remained in date and ready for use.

The practice had dedicated facilities for the cleaning and sterilisation (decontamination) of dental instruments as recommended by the Welsh Health Technical Memorandum (WHTM) 01-05 and we saw records that showed the practice undertakes audits of infection control on an annual basis. The practice had two dedicated facilities for cleaning and sterilisation of their dental instruments and it was noted that both facilities only contained one decontamination sink in both facilities. As recommended by the WHTM 01-05, two dedicated sinks should be available for decontamination work, one for washing and cleaning of the instruments, the second for rinsing. The practice informed us that plans are in place to install two sinks in the decontamination room, possibly during August 2017. Until two sinks are installed, we recommended to the practice that two bowls should be put in place because after cleaning instruments in the first sink or bowl, the operator can efficiently rinse the cleaned instruments in the second sink or bowl which will reduce the risk of re-contaminating the instruments with cleansing agents or detergents.

### ***Improvement needed***

#### ***Two bowls to be made available in the decontamination sink.***

We could see that the practice had a system in place to manage waste appropriately and safely. Contract documentation was in place for the disposal of hazardous (clinical) and non-hazardous (household) waste. We also saw that the waste had been segregated into the designated coloured bags / containers in accordance with the correct method of disposal.

We saw that all staff had completed training in the protection of children and vulnerable adults. We saw that the practice had a safeguarding policy in place for both children and vulnerable adults; however, the policies were in need of updating to include the contact details for the local safeguarding team.

### ***Improvement needed***

***Both the child and adult safeguarding policies to be updated to include contact details for the local safeguarding team.***

#### Effective care

It was evident that the practice is seeking to continuously improve the service provided. We were able to see that relevant audits had been completed by the practice, including infection control, health and safety, patients' records and radiographic audits.

There was evidence that patients' records were of a good standard, which demonstrated that care had been planned and delivered to ensure patients' safety and wellbeing.

A sample of fifteen patients' records were reviewed, which included records completed by each of the dentists and hygienist. Overall, we found that patient care entries contained sufficient information regarding discussions held about treatment planning, options for treatment and the risks and benefits. There was also evidence that all patients are given a treatment plan and patient consent was obtained.

The dentists also undertake cancer screening of all their patients and oral health and smoking cessation advice is given to patients as needed during their appointment. We advised the clinical staff to record, within patients' notes, that cancer screening has been carried out.

## *Quality of Management and Leadership*

**We found evidence that this was a very well run service with effective systems to support overall practice management and leadership. A range of relevant policies and procedures were in place. The staff team appeared happy in their roles and were competent in carrying out their responsibilities.**

We found the practice to have good leadership and clear lines of accountability. Since most of the staff had worked together for many years, there was good rapport amongst them.

We saw completed staff induction folders and these were well planned. We saw evidence of annual staff appraisals and we also saw that all staff had accessed a wide variety of training; meeting CPD<sup>1</sup> requirements.

We saw evidence that formal team meetings were held on a monthly basis where these were minuted and recorded. The practice informed us that the nurses' weekly meetings were not recorded; however, arrangements will be put in place for these to be minuted and recorded.

We confirmed that all relevant staff had undertaken a Disclosure and Barring Service (DBS) check, all clinical staff were registered with the General Dental Council and we saw confirmation of indemnity cover.

Two of the dentists' HIW registration certificates were on display, as required by the Private Dentistry (Wales) Regulation 2008. However, one of the dentists' certificate was not on display and could not be located. We advised the practice to contact the Registration Team at HIW in order for a replacement certificate to be issued, which the practice did immediately on the day.

### ***Improvement needed***

***The HIW registration certificate for one of the dentists to be displayed as required by the regulation.***

We saw records relating to Hepatitis B immunisation status for all clinical staff working in the practice.

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<sup>1</sup><https://archive.gdc-uk.org/Dentalprofessionals/CPD/Pages/default.aspx>

We looked at the policies and procedures in place and found that they reflected actual practice, had been reviewed and contained review dates and / or were version controlled. However, there was no system in place to evidence that staff had reviewed these policies following any changes. We therefore advised the practice to introduce a system to record staff signatures.

## 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 Ludwig Villa Dental Practice, Bangor 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>2</sup> and the Private Dentistry (Wales) (Amendment) Regulations 2011<sup>3</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.

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<sup>2</sup> <http://www.legislation.gov.uk/wsi/2008/1976/contents/made>

<sup>3</sup> <http://www.legislation.gov.uk/wsi/2011/2686/contents/made>

Dental inspections capture a snapshot of the application of relevant regulations at the practice visited on the day of the inspection.

## Appendix A

**General Dental Practice: Improvement Plan**

**Practice: Lodwig Villa Dental Practice, Bangor**

**Date of Inspection: 7 February 2017**

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
<b>Quality of the Patient Experience</b>					
Page 6	The practice should ensure that sanitary disposal bin are provided in both the staff and patients' toilets.	Regulation 14 (1) (d)	The practice has provided sanitary disposal bins in both the staff and patients toilets.	Sally Mason Practice Manager	Completed 9 <sup>th</sup> March 2017
<b>Delivery of Safe and Effective Care</b>					
Page 9	Two bowls should be made available in the decontamination sink.	WHTM 01-05, Section 2.4 (r) plus footnote	The practice has provided two bowls for each decontamination sink.	Sally Mason Practice Manager	Completed 9 <sup>th</sup> March 2017
Page 10	Both the child and adult safeguarding policies should be updated to include contact details for the local safeguarding	Health and Care Standard 2.7	The practice policies for safeguarding both child and adults has been update to include the contact details for the local safeguarding team.	Sally Mason Practice Manager	Completed 9 <sup>th</sup> March 2017

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
	team.				
<b>Quality of Management and Leadership</b>					
Page 11	The HIW registration certificate for one of the dentists must be displayed as required by the regulation.	Regulation 8	The certificate has now been displayed.	Sally Mason Practice Manager	Completed 21st March 2017

**Practice Representative: Sally Mason**

**Name (print): Mrs Sally Mason**

**Title: Practice Manager**

**Date: 15<sup>th</sup> March 2017**