

General Dental Practice Inspection (Announced)

**Grove Dental Practice
(Ystrad Mynach); Aneurin
Bevan University Health
Board**

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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 Grove Dental Practice at 23 Penallta Road, Ystrad Mynach, Hengoed, CF82 7AN on 7 March 2017.

HIW explored how Grove Dental Practice 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

Grove Dental Practice provides services to patients in the Ystrad Mynach area of South Wales. The practice forms part of dental services provided within the area served by Aneurin Bevan University Health Board.

Grove Dental Practice is a mixed practice providing both private and NHS dental services.

The practice staff team includes four dentists, one hygienist, five dental nurses and three reception staff, one of whom also takes on the role of practice coordinator.

A range of NHS and private dental services are provided.

3. Summary.

Overall, we found evidence that Grove Dental Practice provided safe and effective care.

This is what we found the practice did well:

- Patients told us they were very happy with the service provided
- Patient records were thorough and well documented
- A thorough process for cleaning and sterilising dental instruments was demonstrated by staff
- Documentation and information was available showing that X-ray and decontamination equipment was used with the aim of promoting staff and patient safety
- Staff told us they felt supported by senior practice staff and the practice team.

This is what we recommend the practice could improve:

- Dentists needed to improve some aspects of their record keeping to ensure consistency within the practice
- A review of some policies and procedures was required.

4. Findings

Quality of the patient experience

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

Prior to the inspection, we invited the practice to distribute HIW questionnaires to patients to obtain views on the dental services provided. In total we received 17 completed patient questionnaires. Patient comments included:

“The practice is excellent, and all staff are welcoming and reassuring. The use of technology such as texts for appointment reminders is very welcome.”

“Brilliant surgery and staff”

“From the initial greeting when you arrive to the treatment and care we receive – could not praise them enough”

“All the staff make me feel welcome and offer excellent treatments”

Staying healthy

We saw that there was a variety of health promotion information available to patients within the practice, to help promote the care of their own oral health and hygiene.

The practice’s website also provided additional advice regarding dental treatments for children, anxious and fearful patients, amongst other more general dental topics.

Without exception all patients told us that they felt they had been given enough information about their dental treatment.

Dignified care

We observed that engagement between patients and staff was friendly, professional and respectful.

All patients who returned a questionnaire told us that they were satisfied with the care they had received. Some patients added their own comments demonstrating their level of satisfaction. One patient told us “*The Grove are phenomenal with their service*”.

The practice provided a range of NHS and private dental treatments. Information on prices for private dental treatments was available to view in the waiting area, as were costs for NHS dental treatments. This meant patients had access to information on how much their treatment may cost.

General information about the practice was available on the practice website and also in a practice information leaflet which was available for patients to read and take away from the waiting areas.

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. Those who had, told us that any delay had been minimal and the practice had apologised for any inconvenience. We were told that patients would be informed about any delay to their appointments by the receptionist and an alternative appointment offered if required.

The practice offered a text message reminder service to patients to keep them informed of their appointment time and date.

An out of hours telephone number was available for patients should they require urgent dental treatment. The telephone number was available through a variety of means, including being displayed near the front door of the practice, on the answer phone message, in the practice information leaflet and on the practice website.

Individual care

The practice had arrangements in place so that patients with mobility difficulties could access its services. The practice was located over two floors of a two storey building, one surgery being located on the ground floor and two surgeries on the first floor.

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.

We saw that the practice had a written complaints procedure. Information for patients on how to raise a concern (complaint) was displayed in the reception

and waiting rooms of the practice. We recommended that the full contact details for HIW should be included in the complaints procedure to ensure compliance with the regulations. The practice agreed to do this.

Improvement Needed

The practice's complaints procedure must include the full contact details for Healthcare Inspectorate Wales.

We were told that the practice had received very few formal (written) complaints. A process for maintaining detailed records of both verbal and written complaints was demonstrated, allowing the practice to review concerns, take steps to resolve any issues and feedback appropriately to patients.

The practice had a patient suggestion box in the waiting areas of the practice, allowing patients to provide ad-hoc and anonymous feedback about the care and treatment provided to them. We also saw that the practice had undertaken a patient satisfaction survey within the last year. We saw a detailed analysis of the results of the survey and a practice action plan looking to address any issues raised.

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.

Patients' records were detailed and demonstrated care and treatment had been planned to promote patient safety and well being.

A thorough process for cleaning and sterilising dental instruments was demonstrated.

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 practice was nearing the completion of a refurbishment process and the facilities and equipment were modern and new. 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 and we saw evidence that the practice had a contract in place for annual servicing of the equipment to ensure it was working properly.

Portable Appliance Testing (PAT) of electrical equipment within the practice had been carried out within the past 12 months, to help ensure equipment was safe to be used.

We saw that detailed written risk assessments had been completed that identified potential hazards and actions to reduce risk.

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 securely whilst waiting to be collected by the contractor company. Non hazardous (household waste) was collected through arrangements with the local county council. 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.

We looked at all the clinical facilities (surgeries) within the practice, which had recently been refurbished. These were modern, clean and tidy. Floors and surfaces within surgeries were easily cleanable to reduce cross infection.

A separate decontamination room was set up and met the principles set out within the Welsh Health Technical Memorandum (WHTM) 01-05 (Revision 1)¹ guidance document. Sterilisation equipment appeared in good condition on inspection. Two autoclaves² 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 records maintained, as recommended by WHTM 01-05, of tests on sterilisation equipment to show it remained safe to use.

We found that the practice manually cleaned dental instruments prior to processing through the autoclave machines. Staff demonstrated a thorough decontamination process and we saw certificates showing staff had attended training on decontamination.

Whilst manual cleaning is an acceptable method of cleaning dental instruments, we recommended that the practice may wish to consider introducing an automated cleaning method as recommended in WHTM 01-05. The practice agreed to consider doing this.

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.

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 recommended that the practice may want to consider using the audit tool specifically aligned to WHTM 01-05 in the future as part of their quality improvement activity. The practice agreed to do this.

We saw that equipment and drugs were available for use in a patient emergency (collapse). We also saw records showing that the drugs and equipment had been checked regularly, in accordance with standards set out

¹ [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.

² An autoclave machine is a pressure chamber used to sterilize equipment and supplies by subjecting them to high pressure saturated steam.

by the Resuscitation Council (UK)³, to ensure they remained safe to use should they be needed. We saw training records that showed all staff were up to date with cardiopulmonary resuscitation (CPR) training.

We concluded that the practice had arrangements in place for the safe use of radiographic (X-ray) equipment. This is because the required documentation and information on the safe use of the X-ray equipment was available and up to date. We recommended that the practice should highlight in each surgery that X-ray equipment is in use in the practice, by the means of a visual aid. The practice agreed to do this.

Improvement Needed

The practice must ensure that the use of X-ray equipment within the surgeries is made clear by the use of visual clues.

We saw training certificates demonstrating that all staff were up to date with their ionising radiation training and were meeting guidance 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 practice should review and update their procedure to include relevant contact details for the local authority safeguarding teams for both adults and children, in case of need. The practice agreed to do this. All staff had completed training on child and adult protection and we saw training certificates that demonstrated this.

Improvement Needed

The practice should review their safeguarding policies to ensure contact details are included for local authority safeguarding teams.

³ [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.

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.

Effective care

We found that the practice team were committed to providing safe and effective care to patients.

The practice carried out a range of 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 were assured that a range of audits were being undertaken by the practice. It was unclear however, that there was a systematic approach identifying when specific audits would be carried out. We recommended that the practice should formalise the process for undertaking audit activity throughout the year. The practice agreed to implement this.

We considered a sample of patient dental records to assess the quality of record keeping. Patient records were in electronic format. The notes made were detailed and demonstrated that care and treatment had been planned to promote the wellbeing and safety of patients. We did however identify where improvement should be made to ensure a consistent high standard of record keeping across all dentists. These were:

- Whilst we were told that cancer screening was carried out verbally for all patients, it was recorded inconsistently amongst practitioners
- Recording of patient verbal consent to treatment was inconsistently recorded.

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 professional standards for record keeping

In accordance with the Ionising Radiation (Medical Exposure) Regulations (IR(ME)R) 2000, the reason for taking X-rays and the dentists' findings from them had been recorded.

Quality of management and leadership

The dental practice was efficiently managed and operated by the practice coordinator and practice owner, and a team of experienced and motivated staff. A management structure with clear lines of reporting and accountability was demonstrated.

Staff told us they felt well supported by senior practice staff and the wider team. They also told us they had opportunities to attend relevant training.

Grove Dental Practice is an established dental practice and is owned by two dentists. Grove Dental Practice has a sister practice in Nelson, and some members of staff provide dental services at both dental practices. A practice coordinator was responsible for the day to day management, and we found that there were effective and efficient systems in place to support the running of the practice. Where we identified areas for improvement, the practice owner and practice coordinator demonstrated a willingness and commitment to address those 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. This was demonstrated within well documented minutes of team 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 saw that the practice had a process in place to ensure that staff had read and understood the policies.

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 certificates to evidence that all clinical staff had completed training in areas 'highly recommended' by the General Dental Council.

We were told that staff have appraisals on an annual basis and we saw evidence of personal development plans for all staff for the 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 displayed as required by the regulations for private dentistry. We saw up to date Disclosure and Barring Service (DBS) certificates for the dentists working at the practice. These had been issued within the last three years as required by the regulations.

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 Grove 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

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 2008⁴ and the Private Dentistry (Wales) (Amendment) Regulations 2011⁵. 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

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

⁵ <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: Grove Dental Practice

Date of Inspection: 7 March 2017

Page number	Improvement needed	Regulation / Standard	Practice action	Responsible officer	Timescale
Quality of the patient experience					
Page 7	The practice's complaints procedure must include the full contact details for Healthcare Inspectorate Wales	The Private Dentistry (Wales) Regulations 2008 (as amended) Regulation 16	Policy updated	Louise Liston	Completed 07/03/17
Delivery of safe and effective care					
Page 10	The practice must ensure that the use of X-ray equipment within the surgeries is made clear by the use of visual clues	The Ionising Radiation (Medical Exposure) Regulations 2000 Regulation 6	Radiation warning signs obtained and hung over surgery thresholds	James O'Shea	Completed 17/03/17

Page number	Improvement needed	Regulation / Standard	Practice action	Responsible officer	Timescale
Page 10	The practice should review their safeguarding policies to ensure contact details are included for local authority safeguarding teams <i>General Dental Council Standards for the Dental Team, Chapters 4, 8</i>	Health and Care Standards April 2015 2.7	Policy updated	Louise Liston	Completed 07/03/17
Page 11	The dentists working at the practice must make suitable arrangements to ensure patient dental records completed by them are maintained in accordance with professional standards for record keeping <i>General Dental Council Standards for the Dental Team, Standards 3 and 4</i>	Health and Care Standards April 2015 Standard 3.5 The Private Dentistry Regulations 2008 (as amended) Regulation 14	Meeting scheduled to standardise record taking, with emphasis on x ray justification, grading and reporting in a standardised format, recording our routinely carried out oral cancer checks and recording of consent obtained for each and every treatment and process. These dimensions are to be added to scheduled record keeping audit (due Nov 2017)	James O'Shea	31/03/2017
Quality of management and leadership					
	No improvement identified				

Practice Representative:

Name (print): James O'Shea

Title: Dr

Date: 17/03/2017