

# Quality Check Summary

## Teeth for Life Dental Care, Caldicot

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# Findings Record

## Our Approach

Healthcare Inspectorate Wales (HIW) undertook a remote quality check of Teeth For Life Dental Care, Caldicot as part of its programme of assurance work. Teeth for Life Dental Care provides services to patients in the Monmouthshire area and offers a range of NHS and private dental services. The practice forms part of the dental services provided within the area served by Aneurin Bevan University Health Board.

HIW's quality checks form part of a new tiered approach to assurance and are one of a number of ways in which it examines how healthcare services are meeting the Care Standards Act 2000, Independent Health Care (Wales) Regulations 2011 and other relevant regulations. Feedback is made available to service representatives at the end of the quality check, in a way which supports learning, development and improvement at both operational and strategic levels.

Quality Checks are a snapshot of the standards of care within healthcare settings. They are conducted entirely offsite and focus on three key areas; infection prevention and control, governance (specifically around staffing) and the environment of care. The work explores arrangements put in place to protect staff and patients from COVID-19, enabling us provide fast and supportive improvement advice on the safe operation of services during the pandemic. More information on our approach to inspections can be found [here](#).

We spoke to the registered manager<sup>1</sup> and practice manager on 13 April 2021, who provided us with information and evidence about their setting. We used the following key lines of enquiry:

- What changes have you implemented in light of COVID-19 to ensure infection prevention and control standards are maintained?
- How are you ensuring that all patients (including vulnerable/at risk groups) are able to access services appropriately and safely?
- How has the practice and the services it provides adapted during this period of COVID-19?

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<sup>1</sup> "registered manager" means a person who is registered under Part 2 of the Private Dentistry (Wales) Regulations 2017 as the manager of a private dental practice.

## Environment

During the quality check, we considered how the service has designed and managed the environment of care to keep it as safe as possible for patients and staff. We reviewed recent risk assessments and incident reviews and questioned the setting on the changes they have made to make sure patients continue to receive care and treatment according to their needs.

### **The following positive evidence was received:**

We found that the service has conducted relevant risk assessments and updated relevant policies and procedures to meet the additional demands stemming from the COVID-19 pandemic.

The registered manager informed us that he actively monitors the practice environment on a daily basis to ensure the environment is safe, clean and clutter free.

In order to protect staff and patients at the clinic, the registered manager told us that the front door is locked at all times to prevent members of the public from entering the practice unattended and without an appointment. We were told that appropriate notices and signs are on display at the practice.

Any patients who needed to see the dentist attend the practice by pre-booked appointment only. We were informed that staff admitting patients onto the premises wear appropriate personal protective equipment (PPE), and that all patients who require treatment are screened for symptoms of COVID-19.

The registered manager confirmed that the emergency drugs and equipment are stored securely and in a location making them immediately available in the event of a medical emergency (patient collapse) at the practice. The registered manager confirmed that a system was in place to check the equipment and emergency drugs to ensure they remained in date and ready for use, in accordance with standards set out by the Resuscitation Council (UK).

The registered manager spoke highly of the staff in how they have responded to the needs of the practice, the patients and in supporting each other during the COVID-19 pandemic.

### **The following areas for improvement were identified:**

We were provided with a copy of the practice fire risk assessment report, which was undertaken on 8 July 2019, by an external, independent company. We noted from the report that the risk assessment was due for renewal in July 2020. The registered manager told us that they had been unable to arrange for the company to visit the practice during COVID-19 restrictions. We were told that the fire risk assessment had therefore been reviewed

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internally by the registered manager and no changes or additional risks had been identified. The registered manager informed us that arrangements are in place for a formal review to be undertaken by an external, independent company now that COVID-19 restrictions have eased.

The registered manager should provide HIW with a copy of the independent fire risk assessment report once completed.

## Infection prevention and control

During the quality check, we considered how the practice has responded to the challenges presented by COVID-19. We considered how well the practice manages and controls the risk of infection to help keep patients and staff safe. We reviewed infection control policies, infection rates and risk assessments.

### **The following positive evidence was received:**

The registered manager confirmed that all staff have a clear understanding of the latest Standard Operating Procedure<sup>2</sup> guidance for the dental management of non COVID-19 patients. The guidance is intended for use by all dental care settings in Wales. It was evident throughout our discussions that the registered manager had in-depth knowledge and a clear understanding of the Standard Operating Procedure guidance. We also saw evidence that a COVID-19 Risk Assessment had been completed as required by the Welsh Government's Standard Operating Procedure guidance.

We also saw evidence that staff have received a detailed COVID-19 risk assessment<sup>3</sup> to assess the personal risks of continuing to carry out their role during the COVID-19 pandemic.

The registered manager confirmed that staff have received regular COVID-19 updates via email and any new guidance and procedures are discussed at team meetings. The practice manager also told us that a dedicated COVID-19 file has been developed for staff which contains all the latest COVID-19 guidance and procedures. The registered manager told us that, since the beginning of the COVID-19 pandemic, all team meetings have been conducted over Zoom<sup>4</sup> and are formally recorded. Regular communication has ensured everyone has up to date advice and guidance on COVID-19.

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<sup>2</sup> <https://gov.wales/dental-management-non-covid-19-patients>

<sup>3</sup> 'This Risk Assessment Tool has been developed to help people working in the NHS and Social Care in Wales to see if they are at higher risk of developing more serious symptoms if they come into contact with the COVID-19 virus.

We want to help you understand whether you may be at greater risk and to help you and your line manager to choose the right actions for you based on your level of risk'.

<sup>4</sup> Zoom is a cloud-based video communications app that allows you to set up virtual video and audio conferencing, webinars, live chats, screen-sharing, and other collaborative capabilities.

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The registered manager verbally confirmed that all staff have received various internal training / guidance on topics such as recognising COVID-19 symptoms, the management of patients with COVID-19 symptoms, hand hygiene, correct use of PPE, including the donning, doffing and safe disposal of used equipment and medical emergencies during the COVID-19 pandemic.

The registered manager confirmed that the practice uses reusable P3<sup>5</sup> masks. We were told that all staff who are currently using P3 masks, have been fit tested to ensure the mask fits properly and will adequately protect them.

We were told that the use of PPE has been optimised with adequate stocks sourced and monitored on a weekly basis by a member of the dental nursing team.

We saw evidence that an infection control audit has been completed using recognised audit tools, including the Health Education and Improvement Wales<sup>6</sup> audit tool which is aligned to the Welsh Health Technical Memorandum (WHTM) 01-05 guidance. We recognised this as good practice due to the comprehensive scope of the audit. We saw evidence that the resulting action plan was in place and being monitored.

**No improvements were identified.**

## Governance

As part of this standard, HIW explored whether management arrangements ensure that there are sufficient numbers of appropriately trained staff available to provide safe and effective care. We reviewed staffing and patient levels, staff training and absences, management structures, practice functions and capacity, incidents and a variety of policies.

**The following positive evidence was received:**

The owner / principal dentist of Teeth for Life Dental Practice is the registered manager and the nominated responsible individual<sup>7</sup>.

The registered manager confirmed that all clinical staff had attended training on a range of

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<sup>5</sup> P3 respirators are designed to protect the wearer from breathing in small airborne particles which might contain viruses.

<sup>6</sup> Health Education and Improvement Wales (HEIW) is dedicated to transforming the workforce for a healthier Wales. They are a Special Health Authority within NHS Wales and sit alongside Health Boards and Trusts.

<sup>7</sup> “responsible individual” means an individual who is the director, manager, secretary or other officer of the organisation and is responsible for supervising the management of a private dental practice (Private Dentistry regulations 2017)

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topics relevant to their roles and in order to meet the Continuing Professional Development (CPD) requirements.

We were provided with a sample of policies and procedures the practice had in place. We saw that these had been reviewed during the year and we also saw that they contained a review date. The registered manager verbally confirmed that all policies and procedures contain review dates and / or are version controlled and are reviewed annually.

From discussions with the registered manager, it was evident that the practice was seeking to continuously improve the service provided to patients. We were provided with copies of relevant audits that had recently been completed by the practice manager, such as cross infection, clinical notes and X-rays. All audits had been completed and, where required, an action plan developed and maintained.

We were provided with the most recent responsible individual report, as required by The Private Dentistry (Wales) Regulations 2017. The report evidenced the way the quality of the service provided is being managed and assessed to ensure that they meet the requirements of the regulations and relevant standards.

We were provided with a copy of the statement of purpose and patient information leaflet which included relevant information about the services being offered.

**No improvements were identified.**

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## What next?

Where we have identified improvements during our check, which require the service to take action, these are detailed in the improvement plan below.

Where an improvement plan is required, it should:

- Clearly state how the findings identified will be addressed
- Ensure actions taken in response to the issues identified are specific, measurable, achievable, realistic and timed
- Include enough detail to provide HIW and the public with assurance that the findings identified will be sufficiently addressed
- Ensure required evidence against stated actions is provided to HIW within three months of the Quality Check.

As a result of the findings from this quality check, the service should:

- Ensure that findings are not systemic across other areas within the wider organisation
- Provide HIW with updates where actions remain outstanding and/or in progress, to confirm when these have been addressed.

The improvement plan, once agreed, will be published on HIW's website.



# Improvement plan

Service: Teeth for Life Dental Care, Caldicot

Date of activity: 13 April 2021

The table below includes improvements identified during the Tier 1 Quality Check, where we require the service to complete an improvement plan telling us about the actions they are taking to address these areas.

Please note, all actions are expected to be complete within three months of the Quality Check and the final version of the Improvement Plan is to be submitted via Objective Connect once complete.

Reference Number	Improvement needed	Standard/Regulation	Service Action	Responsible Officer	Timescale
1	The registered manager should provide HIW with a copy of the independent fire risk assessment report once completed.	Standard 2.1, Managing Risk and Promoting Health and Safety; Regulation 22, Fitness of premises	Instruct independent company to carry out fire risk assessment and provide HIW with report	Adam Lody	Carried out on 27/4/2021, awaiting report.

The following section must be completed by a representative of the service who has overall responsibility and accountability for ensuring the improvement plan is actioned.

Name: Adam Lody

Date: 4/5/2021