

# Quality Check Summary

## {my}dentist, Aberystwyth

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# Quality Check Summary

## Our approach

Healthcare Inspectorate Wales (HIW) undertook a remote quality check of {my}dentist, Aberystwyth as part of its programme of assurance work. {my}dentist provides a range of NHS and private general dental services to patients in the Ceredigion area. The practice forms part of Integrated Dental Holdings (IDH Group), known as ‘{my}dentist’, which has a network of dental practices across the UK. The practice forms part of dental services provided within the area served by Hywel Dda University Health Board.

HIW’s quality checks form part of a new tailored approach to assurance and are one of a number of ways in which it examines how healthcare services are meeting the Private Dentistry Regulations (Wales) 2017 (and other relevant regulations and standards). 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 services. 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 assurance and inspections can be found [here](#).

We spoke to the registered manager<sup>1</sup> and the regulatory officer for {my}dentist on 15 June 2021, who provided us with information and evidence about their service. 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> A 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 responded to the challenges presented by COVID-19 and how the service has designed and managed the environment of care to keep it as safe as possible for patients, staff and visitors.

The key documents we reviewed included:

- the procedures for resuming dental services during COVID-19
- the most recent environmental risk assessment

We also questioned the service representatives 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 were told that the practice continued to provide access for patients throughout the pandemic in line with Welsh Government guidelines. Patients received triage and consultations remotely via telephone, or Attend Anywhere<sup>2</sup>. Patients were provided with advice and antibiotics continued to be prescribed where necessary. Patients with severe, urgent or emergency dental conditions were referred to the emergency dental centres operated by Hywel Dda University Health Board.

We saw that a detailed COVID-19 risk assessment had been undertaken at the practice that outlined the measures put in place to help keep patients, staff and visitors safe during the pandemic. This included assessments of the environment and of all stages of the patient journey. We were shown evidence that existing, and newly employed, staff members at the practice had signed the risk assessment to confirm they had read and understood it.

We were provided with policies that had been updated to document changes in standard practice since the onset of COVID-19. This included the 'Environmental cleaning and maintenance' policy, which reflected best practice guidance issued by the Welsh Government throughout the pandemic. We were told that the document was updated centrally by the company each time new updates had been issued, and subsequently shared with staff members locally by the practice manager.

In order to protect staff and patients, 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. All patients are screened for symptoms of COVID-19 24 hours before their appointment, and on arrival before being admitted to the practice. We were informed that staff admitting patients onto the premises wear appropriate personal protective equipment (PPE), and that patients are also required to wear a mask at all times,

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<sup>2</sup> Attend Anywhere is a web-based platform that allows clinicians to speak to patients via a video call.

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unless receiving treatment.

The registered manager described the measures that had been implemented at the practice to ensure it continued to be safe for patients accessing services throughout the pandemic. Leaflets and unnecessary items were removed from the waiting room to reduce the risk of transmission. Chairs were removed from the waiting room to reduce overcrowding and ensure patients could keep a safe distance apart. Stickers and posters to remind patients about social distancing guidelines have been displayed on the floor and walls. Clear screens were installed on the reception desk to help protect staff.

The registered manager confirmed that a system was in place to ensure emergency drugs and emergency resuscitation equipment remain in good condition and safe to use in the event of a medical emergency (patient collapse) at the practice. Daily checks are undertaken on the Automated External Defibrillator (AED), oxygen cylinders and valve masks. Expiry dates of the emergency drugs and equipment are logged and monitored centrally, and the practice is notified when they need to be replaced.

**No areas for improvements were identified.**

## Infection prevention and control

During the quality check, we considered how the service has responded to the challenges presented by COVID-19, and how well it manages and controls the risk of infection to help keep patients, visitors and staff safe.

The key documents we reviewed included:

- the most recent Welsh Health Technical Manual (WHTM) 01-05<sup>3</sup> decontamination audit and the action plan to address any areas for improvement
- surgery cleaning schedules
- records of daily checks of autoclaves
- records of daily checks of ultrasonic bath

**The following positive evidence was received:**

We were provided with a document created by the company that outlined the standard operating procedures for staff to follow when providing dental treatment at the practice during the pandemic. We saw that it incorporated the latest guidance issued by the Welsh Government on areas such as appropriate PPE, and required fallow times following Aerosol

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<sup>3</sup> WHTM 01-05 includes information on an audit of compliance with decontamination. The audit has been developed by dentists in Wales and is supported by the Dental Section at Health Education and Improvement Wales (HEIW).

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Generating Procedures<sup>4</sup> (AGPs). The registered manager confirmed that staff received regular COVID-19 updates via email, WhatsApp<sup>5</sup> group and through regular individual catch ups.

We were told that appointment times have been lengthened to allow for each surgery to be cleaned between patients. We saw evidence that checklists were being completed and maintained for each dental surgery. The checklists outlined the infection prevention and control tasks undertaken at the start, during and end of each session, as well as weekly and quarterly.

The registered manager told us that all staff who are present during AGPs have been provided with FFP3<sup>6</sup> masks, which have been fit tested to ensure the mask fits properly to adequately protect staff. We were told that PPE stock levels have been monitored on a weekly basis to ensure supplies have been sufficient throughout the pandemic.

Prior to the quality check we were provided with mandatory training statistics for the clinical team. We saw that all clinical staff had received up-to-date training in infection prevention and control and decontamination. The registered manager also confirmed that staff had received extra training during the pandemic on topics such as the donning, doffing and safe disposal of PPE, and on the new air filtration systems installed in the dental surgeries.

We saw evidence that an infection control and decontamination audit had been completed using recognised audit tools, including the Health Education and Improvement Wales<sup>7</sup> audit tool which checks for compliance with 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.

We saw evidence that the practice had a daily maintenance programme for checking the sterilisation equipment was working as required. A logbook was in place for the autoclave<sup>8</sup> and the ultrasonic bath<sup>9</sup> evidencing that the start and end of the day safety checks were taking place.

**No areas for improvements were identified.**

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<sup>4</sup> Fallow time is the length of time taken for particles to settle following aerosol generating procedures that use instruments such as drills, ultrasonic scalers and air polishers.

<sup>5</sup> WhatsApp is a cross-platform instant messaging application that allows smartphone users to exchange text, image, video and audio messages for free.

<sup>6</sup> FFP3 respirators are designed to protect the wearer from breathing in small airborne particles which might contain viruses.

<sup>7</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>8</sup> Autoclaves are items of equipment that are used in dental practices to sterilise all of the instruments and all of the materials used in professional procedures.

<sup>9</sup> Ultrasonic baths clean instruments by using sound waves generated by electrical energy.

## Governance / Staffing

As part of this standard, HIW questioned the service representatives about how, in the light of the impact of COVID-19, they have adapted their service. We explored whether management arrangements ensure that staff are suitable in their roles and are appropriately trained in order to provide safe and effective care.

The key documents we reviewed included:

- Patient Information Leaflet
- Statement of Purpose
- Ionising Radiation (Medical Exposure) Regulations (IRMER) audit
- Record card audit
- Business continuity plan
- Mandatory training completion rates for all staff

**The following positive evidence was received:**

We were provided with a copy of the patient information leaflet and statement of purpose<sup>10</sup>, which both included relevant information about the services being offered in line with the regulations.

From discussions with the registered manager and the regulatory officer, 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, such as antibiotic prescribing, patient records and X-rays. All audits had been completed and, where required, an action plan developed and maintained.

We were provided with a sample of policies and procedures in place at the practice. We saw that these had been reviewed during the year and we also saw that they contained a review date. We were also sent a copy of a business continuity plan, which outlined the arrangements in place to ensure the safe running of the practice in the case of an emergency or natural disaster.

The registered manager told us that all staff have received a detailed COVID-19 risk assessment<sup>11</sup> to assess the personal risks of continuing to carry out their role during the COVID-19 pandemic. This was particularly important for Black, Asian and Minority Ethnic staff working at the practice. We were sent evidence to show that all risk assessments had been carried out, with suitable alternative arrangements identified for vulnerable staff. We were told that the practice has not experienced any prolonged staff absences as a result of COVID-19, which

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<sup>10</sup> Every service provider registered with HIW is required by the Private Dentistry (Wales) Regulations 2017 to have a Statement of Purpose, which sets out specific details about the practice.

<sup>11</sup> The risk assessment helps 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.

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has meant there has been no impact on the delivery of services. If required, staff members working at other {my}dentist locations fill staff absences such as illness or annual leave at the practice, rather than utilising agency staff.

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

We were provided with training statistics for the clinical team which showed that almost all staff were up to date with their mandatory training. However, we noted that the hygienist had not yet renewed their safeguarding with children training; the practice must ensure this training is completed as soon as possible.

We were informed that arrangements were in place for the registered provider to visit the practice during June 2021, as required by the Private Dentistry (Wales) Regulations 2017. The practice must provide HIW with a copy of the report to evidence the way the quality of the service provided is being managed and assessed in line with the requirements of the regulations and relevant standards.

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# What next?

Where we have identified areas for improvements during our quality check and require the service to tell us about the actions taken to address these, an improvement plan providing details will be provided at the end of this quality check summary.

Where an improvement plan is required, it should:

- 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 areas for improvements 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 the areas for improvements 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.

If no areas for improvement were identified during this quality check, an improvement plan will not be required, and only the quality check summary report will be published on HIW's website.

# Improvement plan

Setting: {my}dentist, Aberystwyth

Date of activity: 15 June 2021

The table below includes improvements identified during the 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 hygienist must complete safeguarding children training as soon as possible.	The Private Dentistry (Wales) Regulations 2017 14(b)	Safeguarding children level 1 & 2 completed 13 <sup>th</sup> June 2021		Completed
2	The practice must provide HIW with a copy of the report following the registered provider's visit to the practice in June 2021.	The Private Dentistry (Wales) Regulations 2017 16(3)	A provider visit was completed 23 <sup>rd</sup> June 2021, a report will be written and issued to the practice by 31 <sup>st</sup> July 2021	Sarah-Jane Davies (Regulatory Officer)	31 July 2021

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: George Johnson

Date: 14 July 2021