

Quality Check Summary

{My}dentist, Wrexham

Activity date: 16 September 2021

Publication date: 21 October 2021



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Quality Check Summary

Our approach

Healthcare Inspectorate Wales (HIW) undertook a remote quality check of {My}dentist, Kingsway House, Wrexham as part of its programme of assurance work. {My}dentist, Kingsway House provides services to patients in the Wrexham 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 Betsi Cadwaladr University Health Board. The practice provides a range of NHS and private general dental services.

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 Health and Care Standards 2015 and the Private Dentistry (Wales) Regulations 2017 (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 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 manager¹ and the regulatory officer for {My}dentist on 16 September 2021 who provided us with information and evidence about their service. We used the following key lines of enquiry:

- What changes have been implemented in light of COVID-19 to ensure infection prevention and control standards are maintained?
- How is the practice ensuring that all patients (including vulnerable/at risk groups) are able to access services appropriately and safely?
- How does the practice meet the needs of Welsh speaking patients when accessing healthcare services in the medium of Welsh?
- How has the practice and the services it provides adapted during this period of COVID-19?
- How does the practice ensure that equality and a rights based approach are embedded across the service?

¹ “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 practice risk assessment for COVID-19 Aerosol Generating Procedure (AGP)² and non AGP procedures
- Most recent fire risk assessment and action plan
- Most recent health and safety risk assessment and action plan.

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 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.

We saw that the practice had undertaken a detailed COVID-19 risk assessment which included assessments of the environment, patient journey and the health, safety and wellbeing of staff and patients visiting the practice. We saw evidence showing staff had signed the risk assessment to confirm they had read and understood it.

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. We were told that appropriate notices and signs are displayed.

Patients who needed to see the dentist attend the practice by invitation and 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

² An aerosol generating procedure (AGP) is a medical procedure that can result in the release of airborne particles (aerosols) from the respiratory tract when treating someone who is suspected or known to be suffering from an infectious agent transmitted wholly or partly by the airborne or droplet route.

emergency (patient collapse). 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 practice 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 registered manager also told us that the practice has been fully supported by the central corporate team of IDH Group.

The registered manager confirmed that all leaflets and signs displayed at the practice are bilingual. We were told that the lead receptionist is a fluent Welsh speaker and other staff can communicate with patients at a basic level, which helps to meet the needs of Welsh speaking patients who wish to communicate in their preferred language. We were informed that the lead receptionist identifies herself as a Welsh speaker by wearing the Iaith Gwaith badge. The Iaith Gwaith brand is an easy way of promoting Welsh services by identifying Welsh speakers. Furthermore, we were also told that some staff can also communicate with patients in Polish, Hindi and Hungarian.

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:

- COVID-19 policy
- Environmental cleaning and maintenance policy
- The most recent Welsh Health Technical Manual (WHTM) 01-05³ decontamination audit and the action plan to address any areas for improvement
- Surgery cleaning schedules
- Surgery daily cleaning checklists
- Records of daily checks of autoclaves
- Records of daily checks of ultrasonic bath and washer disinfectant.

The following positive evidence was received:

The registered manager confirmed that all staff have a clear understanding of the latest Standard Operating Procedure⁴ for the dental management of non COVID-19 patients. The

³ 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, HEIW.

⁴ <https://gov.wales/dental-management-non-covid-19-patients>

guidance is intended for use by all general dental care settings in Wales.

The registered manager confirmed that staff have received regular COVID-19 updates via a dedicated WhatsApp⁵ group and by email. Any new guidance and procedures are discussed at formal team meetings, which are recorded. The registered manager told us that all team meetings are now conducted face to face as ample room for safe social distancing is available. Regular communication has ensured everyone has up to date advice and guidance on COVID-19.

The registered manager confirmed that all staff have received various internal training or guidance on topics such as recognising COVID-19 symptoms, the management of patients with COVID-19 symptoms, 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 also confirmed that all staff using FFP3⁶ masks have been fit tested to ensure the mask fits properly and will offer adequate protection.

The registered manager confirmed that all staff have received a detailed COVID-19 risk assessment⁷ to assess the personal risks of continuing to carry out their role during the COVID-19 pandemic. The registered manager also informed us that all staff have received their COVID-19 vaccinations.

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 Wales⁸ 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 cleaning schedules for the surgeries have been increased. We also saw evidence that completed cleaning checklists were maintained for each of the surgeries.

We saw evidence that the practice has a daily maintenance programme for checking the sterilisation and the washer disinfectant equipment. A logbook was in place for the autoclave⁹

⁵ WhatsApp Messenger is a cross-platform instant messaging application that allows iPhone, BlackBerry, Android, Windows Phone and Nokia smartphone users to exchange text, image, video and audio messages for free. In addition to basic messaging, WhatsApp provides group chat and location sharing options.

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

⁷ '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.

⁸ 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.

⁹ Autoclaves are items of equipment that are used in dental practices to sterilize all of the instruments and all

and the ultrasonic bath¹⁰ evidencing that the start and end of the day safety checks were taking place.

No areas for improvements were identified.

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:

- Statement of Purpose
- Patient Information Leaflet
- Ionising Radiation (Medical Exposure) Regulations (IRMER) audit
- Record card audit
- Informed consent policies / procedures
- COVID-19 policy
- Business continuity plan
- Mandatory training completion rates for all staff
- The Regulation 23 (responsible individual visit) report.

The following positive evidence was received:

The practice manager of {My}dentist, Kingsway is the registered manager.

We were provided with evidence which confirmed that all clinical staff have attended training on a range of topics relevant to their roles and in order to meet the Continuing Professional Development (CPD) requirements.

We were provided with a sample of the practice's policies and procedures. We saw that these had been reviewed during the year and we also saw that they contained a review date.

From the key documents we reviewed, 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 cross infection, clinical notes and X-rays. All audits had been completed and, where required, an action plan developed and

of the materials used in professional procedures.

¹⁰ Ultrasonic cleaner removes bioburden by using sound waves generated by electrical energy. As the sound waves move through the liquid cleaning solution, they cause the formation and bursting of millions of small bubbles.

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.

The registered manager explained that due consideration is given to equality and patients' rights. We were told that, pre COVID-19, the practice implemented dedicated sessions, twice per year, for patients diagnosed with autism to receive treatment in a calming environment. We were told that extra time is set aside for each appointment, lights would be dimmed and the radio volume lowered. We were also told that there were sensory toys, light blocking glasses and ear defenders available for patients to use.

We were informed that these sessions were temporarily put on hold during the pandemic and the practice plans to resume these sessions from December 2021 onwards.

We saw evidence that staff have undertaken training on equality and diversity, Mental Capacity Act, legal and ethical issues, information governance and managing complaints.

No areas for improvements were identified.

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.