

General Dental Practice Inspection (Announced)

**Abertawe Bro Morgannwg
University Health Board,
Woods Dental**

7 July 2015

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1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection to Woods Dental, at 65 Walter Road, Swansea, SA1 4PT within the area served by Abertawe Bro Morgannwg University Health Board on 7 July 2015.

During the inspection we considered and reviewed the following areas:

- Patient experience
- Delivery of Health and Care Standards
- Management and leadership
- Quality of environment.

2. Methodology

HIW inspections of General Dental Practices seek to establish how well practices meet the Health and Care Standards¹. 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 2008² and the Private Dentistry (Wales) (Amendment) Regulations 2011³. 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

¹ <http://www.wales.nhs.uk/governance-emanual/how-the-health-and-care-standards-are-st>

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

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

- 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.

3. Context

Woods Dental provides services to patients in the area of Swansea. The practice forms part of dental services provided within the geographical area known as Abertawe Bro Morgannwg University Health Board. It is a mixed practice providing both private and NHS dental services.

The practice employs a staff team which includes three dentists, two therapists, six dental nurses and two reception staff. In addition two visiting specialist dentists (in oral surgery and orthodontics) work at the surgery on a part time basis.

Woods Dental is also a dental foundation training practice that supports newly qualified dentists undertaking their first year in dentistry (following completion of their university degree), with the supervision of an allocated trainer. At the time of our inspection two foundation dentists were also working at the practice.

4. Summary

HIW explored how Woods Dental met the standards of care set out in the Health and Care Standards (April 2015).

Patients who returned completed HIW questionnaires told us they were satisfied with the service provided by the dental practice.

The practice had a system to seek views from patients on their experience. We have asked the practice owners to implement a system to demonstrate that patients' comments have been considered and acted upon.

Suitable arrangements were in place for the safe use of X-rays.

Arrangements were in place to respond to patient emergencies. We found certificates issued to staff in respect of cardiopulmonary resuscitation (CPR) had expired. Whilst training had been arranged, we asked the practice owners to seek advice on what further action they may need to take in this regard.

Arrangements were in place for the safe handling of waste produced by the practice.

The practice had a separate decontamination room as recommended within the national policy and guidance document. Suitable arrangements were in place for the cleaning and sterilisation of dental instruments to reduce cross infection. We have asked the practice to review the arrangements for recording processing dates for dental instruments to take account of national policy and guidance.

The clinical facilities were clean and tidy and equipment was visibly in good condition.

We found the quality of record keeping varied between dentists. Whilst we found some noteworthy practise we have also identified that some dentists need to make improvements in this regard.

The practice owners were responsible for the overall management of the practice. Staff confirmed they had access to training opportunities and told us communication within the team was good.

A range of written policies and procedures were in place with the intention of providing safe care to patients.

We have asked the dentists working at the practice to ensure they display up to date HIW registration certificates to comply with the regulations for private dentistry.

We have also asked the practice owners to make improvements in relation to recording details of how concerns (complaints) have been handled.

The practice building was visibly well maintained and decorated to a high standard throughout. A surgery was available on the ground floor for patients who were unable to use stairs.

5. Findings

Patient Experience

Patients who returned completed HIW questionnaires told us they were satisfied with the service provided by the dental practice.

The practice had a system to seek views from patients on their experience. We have asked the practice owners to implement a system to demonstrate that patients' comments have been considered and acted upon.

Prior to our inspection visit, we asked the practice owners to invite patients to complete HIW questionnaires. In total we received 25 questionnaires that had been completed prior to our inspection visit.

Through our questionnaires we invited patients to provide comments on their experience of using the practice. Overall, the patients who returned questionnaires told us they were satisfied with the service they had received. We did receive some comments (from three patients) that highlighted areas where they felt the service could be improved. These related to the length of time between appointments and provision of information. The practice may like to consider these comments alongside their own patient feedback system to identify whether improvements can be made in this regard.

All patients who returned questionnaires told us the practice team had made them feel welcome with just over half (13 patients) leaving their own comments indicating that they had been made to feel particularly welcome.

Whilst some patients (nine) described experiencing delays in being seen on the day of their appointment they indicated this was minimal and had not caused them a problem. Staff described a process was in place for informing patients promptly should their dentist be running late or unexpectedly absent on the day of their appointment. This meant patients were kept informed so they could make alternative arrangements, or wait, depending on the circumstances on the day.

We invited patients to make any additional comments about their experience. The following is a sample of those received:

'Great dentists friendly and knowledgeable.'

'Have found the team to be very helpful and caring.'

'...I am put at ease and given all the information and advice that is required.'

'There is a long waiting list for appointments some times.'

'Very clean and well presented practice.'

The practice owners explained that the practice team received feedback from annual patient satisfaction surveys conducted on behalf of the dental payment plan provider. A copy of the latest survey findings was available on the day of our inspection.

We were also told patients were able to provide feedback about their experience via a comments box. We saw this was available at reception. This meant patients had the opportunity to provide comments on their experience so these could be considered by the practice team with a view to making service improvements as appropriate.

We looked at a random sample of comments that had been received and overall positive comments had been made. We found that there was no formal system in place to regularly review the comments slips received. This could result in some comments not being considered by the staff team in a timely manner. The practice owners were receptive to our suggestion that comments made via the suggestion box be considered at the regular practice meetings and notes maintained to demonstrate they had been considered and acted upon.

Improvement needed

The practice owners should implement a suitable system to demonstrate that comments/suggestions made by patients have been considered by the practice team and acted upon as appropriate.

Details of the NHS pricing bands for treatment were clearly displayed together with information on the criteria for receiving free NHS treatment. Prices for private dental services were also displayed. This meant patients visiting the practice had easy access to information on payment for their dental treatment.

The practice had a website which required some updating to reflect the staff team currently working at the practice.

Some health promotion leaflets were available. This meant patients had access to information and advice to help them care for their own oral hygiene and health.

Delivery of Health and Care Standards

Suitable arrangements were in place for the safe use of X-rays.

Arrangements were in place to respond to patient emergencies. We found certificates issued to staff in respect of cardiopulmonary resuscitation (CPR) had expired. Whilst training had been arranged, we asked the practice owners to seek advice on what further action they may need to take in this regard.

Arrangements were in place for the safe handling of waste produced by the practice.

The practice had a separate decontamination room as recommended within the national policy and guidance document. Suitable arrangements were in place for the cleaning and sterilisation of dental instruments to reduce cross infection. We have asked the practice to review the arrangements for recording processing dates for dental instruments to take account of national policy and guidance.

The clinical facilities were clean and tidy and equipment was visibly in good condition.

We found the quality of record keeping varied between dentists. Whilst we found some noteworthy practise we have also identified that some dentists need to make improvements in this regard.

Radiographic Equipment/Documentation

We found arrangements were in place for the safe use of radiographic (X-ray) equipment. The required documentation and information on the safe use of X-ray equipment used at the practice was available within the practice's Radiation Protection File. Safety check certificates for each X-ray machine used at the practice were available and up to date. Training certificates we saw indicated staff had attended ionising radiation training within the last five years as required. Not all certificates were available on the day of our inspection but the practice owners provided copies of these within 24 hours of our inspection visit.

Digital X-rays were used and we were told quality assurance audits of the image quality had been conducted. The aim of this process was to identify recurring issues with a view to making adjustments as necessary to ensure X-rays were of a suitable quality.

Resuscitation and First Aid / Emergency Drugs

Staff had access to resuscitation equipment and emergency drugs in the event of a patient emergency (collapse) at the practice. A series of flowcharts was available to guide staff on the appropriate steps to take should a patient emergency be identified. The practice owners may wish to consider keeping the relevant flowcharts together with the emergency drug(s) to be used (for that particular emergency to which the flowchart relates) in separate plastic wallets to facilitate quick and easy access in an emergency.

We saw training certificates that indicated staff had received training on how to administer cardiopulmonary resuscitation (CPR). However, these indicated training had been attended more than 12 months previously and so had expired. The practice owners explained a reason for this and provided a verbal assurance that training had been arranged for December 2015. We recommended that the practice owners seek advice from the training provider on any additional action they needed to take, prior to staff attending update training, so that staff can administer CPR in an emergency. The practice owners agreed to address this. Staff we spoke with were aware of their particular roles in the event of a patient emergency.

Improvement needed

The practice owners need to confirm to HIW the action they have taken to ensure staff can administer CPR in an emergency.

We found a suitable system was in place to identify and replace expired drugs and to regularly check emergency equipment held at the practice. A written logbook had been maintained that demonstrated this process.

Handling, Storage and Disposal of Hazardous and Non- Hazardous Waste

We found that arrangements were in place for the safe disposal of hazardous and non hazardous waste produced at the practice. Waste had been segregated into different coloured bag/containers and these were stored securely whilst waiting to be collected by the waste collection service.

Within the surgeries, bags for non hazardous (domestic) waste were being used. We suggested that this arrangement be reviewed to minimise the risk of inadvertently placing hazardous waste in these bags. The practice owners agreed to give this consideration.

Some containers in use for the disposal of sharps (e.g. needles) were stored on the floor. Consideration should be given to storing these in accordance with

guidance⁴ issued by the Health and Safety Executive to reduce the risk of them being knocked over or being accessed by children.

The practice had amalgam separators⁵ so amalgam (fillings) particles could be removed from waste water and disposed of safely.

Decontamination of Instruments and Compliance with Welsh Health Technical Memorandum 01-05 (Revision 1)

We found an appropriate process was in place for the cleaning and sterilisation of instruments. The practice had a separate decontamination room as recommended within Welsh Health Technical Memorandum (WHTM) 01-05⁶ (Revision 1). This, together with the use of appropriate control procedures aims to reduce the risk of cross contamination of instruments.

The equipment being used for the cleaning and sterilisation of instruments was visibly in good condition.

Comprehensive records had been maintained demonstrating appropriate checks had been conducted on the autoclave machines⁷. Up to date safety inspection certification for the autoclaves was available.

We saw that instruments were appropriately packaged to reduce the risk of being contaminated when stored. Whilst stored instruments had the date they had to be used by recorded on their packaging, the dates they were processed (cleaned and sterilised) had not been recorded. The practice owners should make suitable arrangements to ensure the processing dates are also recorded to comply with WHTM 01-05.

⁴ <http://www.hse.gov.uk/biosafety/blood-borne-viruses/avoiding-sharps-injuries.htm>

⁵ A device that removes particles of mercury amalgam (found in some dental fillings) from waste water before it enters the sewer system.

⁶ [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.

⁷ An autoclave machine is a pressure chamber used to sterilize equipment and supplies by subjecting them to high pressure saturated steam.

Improvement needed

The practice owners should make arrangements to ensure processing dates are recorded on the packaging of cleaned and sterilised dental instruments in accordance with WHTM 01-05.

We saw staff had started an infection control audit using a recognised tool specifically aligned to WHTM 01-05. When complete this will mean the dental team will have self-assessed their practice against the policy and guidance set out within WHTM 01-05. The practice team should then identify areas for improvement and regularly monitor progress.

Clinical Facilities

We looked at each of the clinical facilities within the practice. We found these to be clean and tidy and overall furnished to facilitate easy and effective cleaning. We found that the floors within some of the surgeries were not completely sealed between the floor and the walls. The practice owners should make arrangements to ensure these areas are effectively sealed to prevent debris and dust accumulating in crevices.

Equipment and instruments were clean and visibly in good condition. Hand washing facilities and disposable protective equipment were available to reduce the risk of cross infection.

Local rules for the safe use of X-ray equipment were displayed in each surgery.

We were provided with a verbal assurance by staff that daily checks were conducted on the compressor⁸ used at the practice.

Patient Records

We considered a sample of 20 patient dental records and found the quality of record keeping varied between the dentists.

The sample of records for two of the dentists was very comprehensive and we considered these to be examples of noteworthy practise.

Within the remainder of the sample we identified improvement was needed. Specifically this related to dentists not recording the justification for taking X-rays, not recording patients' alcohol and tobacco use and whether health

⁸ A compressor pressurises air for use in dental procedures.

promotion advice was indicated/offered (this would also demonstrate whether the patient was identified at risk of oral cancer and being monitored) and not recording baseline basic periodontal examination (BPE)⁹ scores.

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.

The practice owners should consider conducting a whole practice audit of patient records as part of the practice's overall quality assurance process.

⁹ The BPE is a screening tool which is used by dentists to identify gum disease. Recording BPE scores would demonstrate a patient's risk of gum disease had been assessed by the dentist.

Management and Leadership

The practice owners were responsible for the overall management of the practice. Staff confirmed they had access to training opportunities and told us communication within the team was good.

A range of written policies and procedures were in place with the intention of providing safe care to patients.

We have asked the dentists working at the practice to ensure they display up to date HIW registration certificates to comply with the regulations for private dentistry.

We have also asked the practice owners to make improvements in relation to recording details of how concerns (complaints) have been handled.

At the time of our inspection, the principal dentists (practice owners) were responsible for the overall management of the practice.

The practice owners confirmed that all clinical staff working at the practice were registered with the General Dental Council and had indemnity cover in place. The sample of records we saw supported this.

Staff explained they were able to access training relevant to their role and for their continuing professional development (CPD). The sample of staff training certificates we saw supported this. This meant that patients were treated by staff who had appropriate skills and up-to-date training.

Records were also available confirming clinical staff working at the practice had received Hepatitis B vaccinations. This meant staff had taken appropriate steps to ensure their and patients' safety against blood borne viruses.

Dentists working at the practice provided private dental services and we were assured from HIW records that all were registered as required by the regulations for private dentistry. Whilst HIW registration certificates were prominently displayed for most dentists working at the practice, there were two dentists who did not have certificates available. The practice owners were already aware of this and gave an assurance that action was being taken to address this. In addition, we found that certificates for two dentists required updating to reflect HIW's current contact details. The practice owners agreed to address this.

Improvement needed

All dentists working at the practice and registered with HIW to provide private dental services must make arrangements to prominently display their up to date HIW registration certificates at the practice.

At the time of our inspection, Disclosure and Barring Service (DBS) certificates were not available for all dentists registered to provide private dental services as required by the private dentistry regulations. We were assured by the practice owners that action was being taken to address this.

Staff told us regular practice meetings were held. We saw notes from practice meetings had been maintained. Staff told us they felt communication within the practice team was good and they would be comfortable raising any work related concerns with senior practice staff.

The practice had a range of relevant policies and procedures with the intention of ensuring patient care and treatment was delivered safely. These included those in respect of safeguarding vulnerable adults and children, infection control and waste storage and disposal. The policy in respect of safeguarding vulnerable adults would benefit from having the details of local safeguarding teams included for ease of reference. We informed the practice owners of this so that arrangements could be made to include this information.

The practice provided both NHS and private care and treatment and had written procedures in place for patients to raise concerns (complaints). Overall, these met the *Putting Things Right*¹⁰ arrangements, covering concerns about NHS care and treatment in Wales, and met the requirements of the private dentistry regulations. For concerns about NHS care, the written procedure needed to include the contact details of the local Community Health Council. We informed the practice owners of this so the appropriate contact details could be added.

Whilst we saw that records had been maintained of formal/written complaints these did not clearly demonstrate the responses provided or the action taken by the practice to resolve the complaints. This meant it was unclear whether these complaints had been handled in accordance with the practice's own procedures

¹⁰ 'Putting Things Right' are the arrangements in place for handling and responding to concerns (complaints) about care and treatment provided by the NHS in Wales

and the relevant regulations¹¹. We discussed this with the practice owners who accepted improvement was needed in this regard.

Improvement needed

The practice owners should implement a system to demonstrate how complaints have been handled and how learning from complaints has been used to make service improvements as appropriate.

There was no clear system for recording informal/verbal complaints. We discussed this with the practice owners and suggested that consideration be given to implementing a suitable system. This is with a view to identifying any common themes that may emerge so that service improvements can be made as appropriate.

Information for patients on how to raise a concern (complaint) was displayed at the practice. However 16 patients who completed questionnaires told us they were not aware of the process to follow. Therefore the practice owners may wish to explore how patients' awareness of the procedure can be improved.

¹¹ The Private Dentistry (Wales) Regulations 2008 and The National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011.

Quality of Environment

The practice building was visibly well maintained and decorated to a high standard throughout. A surgery was available on the ground floor for patients who were unable to use stairs.

Woods Dental operates from premises located near Swansea City centre. We were told that the premises had been used as a dental practice for more than 70 years. The current owners have owned the practice since 2009.

The exterior of the practice was visibly in good condition and was clearly signposted. The names and qualifications of the dentists working at the practice were displayed outside together with the opening hours and emergency contact number. This meant patients visiting the practice had information on who may be providing treatment and a number to call should they require dental treatment in an emergency when the practice was closed. One of the dentists listed had left the practice and therefore the list of names displayed should be updated to reflect this.

The practice did not have designated parking. However, (time) restricted parking was available along the road directly outside. Unrestricted parking was available in side streets in the vicinity.

Access to the practice entrance was via steps or a ramp. Handrails were also installed to assist those patients who may need them. Whilst a ramp was in place there was a small step from the pavement to this ramp which may cause some patients who use wheelchairs difficulty. We discussed this with the practice owners who explained this had been considered when the practice was refurbished but at the time no further alteration could be made. However they agreed to revisit this to establish whether anything further could be done to make access easier.

Internally, the practice was decorated to a very high standard and all areas we saw were clean, tidy, well lit and ventilated. Waiting areas were located on the ground and second floor and the size of these appeared appropriate given the number of surgeries and patients attending. In total there were five surgeries arranged over three floors. For patients who were unable to use stairs or found these difficult to navigate, a surgery was located on the ground floor. During our inspection, we saw a patient was offered to be seen in the ground floor surgery due to finding using the stairs difficult.

Toilets were provided for both staff and patients. The toilet on the ground floor was suitable for patients using wheelchairs. We found these areas were clean

and hygienic and contained hand washing and drying facilities to minimise the risk of cross infection.

Fire exits were clearly signposted and instructions to follow in the event of a fire were clearly visible. Fire fighting equipment was available throughout the building and we found these had been checked within the last year. This meant in the event of a fire, patients and staff had an identified safe evacuation route and staff had access to fire fighting equipment that had been appropriately maintained.

6. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan in respect of the patient experience, the delivery of *Health and Care Standards* and management and leadership. The details of this can be seen within Appendix A of this report.

The improvement plan should clearly state when and how the findings identified at the Woods Dental practice will be addressed, including timescales.

The improvement plan, once agreed, will be published on HIW's website and will be evaluated as part of the ongoing dental inspection process.

Appendix A

General Dental Practice: Improvement Plan

Practice: Woods Dental

Date of Inspection: 7 July 2015

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
Patient Experience				
8	The practice owners should implement a suitable system to demonstrate that comments/suggestions made by patients have been considered by the practice team and acted upon as appropriate. (The Health and Care Standards, Standard 6.3)	Patient comments/suggestions will be collated and discussed at Monthly practice meetings.	Christopher Woods	Immediate
Delivery of Health and Care Standards				
10	The practice owners need to confirm to HIW the action they have taken to ensure staff can safely administer CPR in an emergency. (The Health and Care Standards, Standard	In Practice training was already booked at time of inspection. In the interim online Basic life support for Dentists is being carried out.	Richard Woods	Immediate

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
	7.1)			
12	<p>The practice owners should make arrangements to ensure processing dates are recorded on the packaging of cleaned and sterilised dental instruments in accordance with WHTM 01-05.</p> <p>(The Health and Care Standards, Standard 2.4; WHTM01-05, Paragraph 2.4(k))</p>	<p>Processing date and expiry date should be recorded on packaging. In-House training to be administered and reinforced</p>	Christopher Woods	Immediate
13	<p>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.</p> <p>(The Health and Care Standards, Standard 3.5; GDC Standards for the Dental Team, Standard 4.1)</p>	<p>Feedback noted. All clinicians have been informed of the HIW findings and feedback received. Standard of record keeping discussed and what improvements are required. FGDP guidelines on record keeping to be adhered to.</p> <p>Internal audit to be carried out by practice principals to ensure note keeping is of adequate standard.</p>	Christopher Woods	Immediate
Management and Leadership				
15	<p>All dentists working at the practice and registered with HIW to provide private dental services must make arrangements to prominently display their up to date HIW registration certificates at the practice.</p> <p>(The Private Dentistry (Wales) Regulations 2008, Regulation 4)</p>	New updated HIW certificates requested.	Richard Woods	Immediate

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
16	<p>The practice owners should implement a system to demonstrate how complaints have been handled and how learning from complaints has been used to make service improvements as appropriate.</p> <p>(The Health and Care Standards, Standard 6.3; The Private Dentistry (Wales) Regulations 2008, Regulation 15(1) and 16; The National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011, Regulation 10 and 49)</p>	<p>Feedback noted. New system in place to log complaints and response.</p> <p>Complaints investigated and consideration given to:</p> <ul style="list-style-type: none"> • What went wrong? • Why it went wrong? • Whether it could happen again? • What would prevent it from reoccurring? • Whether those involved require training or empowering to make decisions. <p>Complaints are to be discussed as a team and logged at practice meetings. Involving others in this analysis means that the experience is shared; we are less likely to apportion blame and more likely to achieve a constructive outcome.</p>	Christopher Woods	Immediate
Quality of Environment				
	None			

Practice Representative:

Name (print): Alan Richard Woods and Christopher Alan Woods

Title: Practice Owners

Date: 01/09/15