

General Dental Practice Inspection (Announced)

Restore Dental, Whitchurch
Road, Cardiff and Vale University
Health Board

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Copies of all reports, when published, will be available on our website or by contacting us:

In writing:

**Communications Manager
Healthcare Inspectorate Wales
Welsh Government
Rhydycar Business Park
Merthyr Tydfil
CF48 1UZ**

Or via

**Phone: 0300 062 8163
Email: hiw@gov.wales
Fax: 0300 062 8387
Website: www.hiw.org.uk**

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Healthcare Inspectorate Wales (HIW) is the independent inspectorate and regulator of healthcare in Wales

Our purpose

To check that people in Wales receive good quality healthcare

Our values

We place patients at the heart of what we do. We are:

- **Independent**
- **Objective**
- **Caring**
- **Collaborative**
- **Authoritative**

Our priorities

Through our work we aim to:

Provide assurance:

Provide an independent view on the quality of care

Promote improvement:

Encourage improvement through reporting and sharing of good practice

Influence policy and standards:

Use what we find to influence policy, standards and practice

1. What we did

Healthcare Inspectorate Wales (HIW) completed an announced inspection of Restore Dental Group at 354 Whitchurch Road, Cardiff, CF14 3NH, within Cardiff and Vale University Health Board on the 30 July 2019.

Our team, for the inspection comprised of two HIW inspectors and a dental peer reviewer.

HIW explored how the service met the Private Dentistry (Wales) Regulations 2017, the Health and Care Standards (2015) and other relevant legislation and guidance.

Further details about how we conduct dental inspections can be found in Section 5 and on our website.

2. Summary of our inspection

Overall, we found evidence that Restore Dental provided a friendly and professional service to their patients.

We saw evidence of strong leadership and the practice had the required policies and procedures in place to support both patients and staff.

In general, the surgeries were maintained to a good standard, as were the waiting areas and education area.

This is what we found the service did well:

- There was evidence of strong management and leadership from the registered manager and good relationships between the staff
- Patients provided positive feedback that they were happy with the service provided
- Appropriate arrangements were in place to ensure the surgeries were kept to a high standard.

This is what we recommend the service could improve:

- The practice must ensure the surgeries are kept clutter free at all times.
- The practice must ensure that patient records are kept to a high standard.

There were no areas of non compliance identified at this inspection.

5. What we found

Background of the service

Restore Dental Group provides services to patients in the Whitchurch and Canton area. The practice forms part of dental services provided within the area served by Cardiff and Vale University Health Board.

The practice has a staff team which includes six dentists, one hygienist, one therapist, eleven dental nurses including five trainees, two receptionists, two clinical managers and one practice manager.

The practice provides a range of NHS and private general dental services.

Quality of patient experience

We spoke with patients, their relatives, representatives and/or advocates (where appropriate) to ensure that the patients' perspective is at the centre of our approach to inspection.

We found Restore Dental was committed to providing a positive experience for their patients. Patients told us that they were treated with dignity and respect by staff at the dental practice.

The practice had a range of information to support patients in making effective choices about good oral health and treatment options when necessary. There was a welcoming atmosphere, and we saw staff making efforts to make patients feel relaxed and at ease from the moment they arrived.

Prior to our inspection the practice distributed HIW questionnaires to patients to obtain their views on the service provided at the practice. In total, we received 23 completed questionnaires. Just over half of the completed questionnaires were from patients who had been a patient at the practice for more than two years.

Overall, patient feedback was positive; the majority of the patients who completed a questionnaire said that they would rate the service provided by the practice as 'excellent' or 'very good'. One patient provided the following comment:

"Since I came to my dentist I have received excellent treatment"

Patients were asked on the questionnaires how the dental practice could improve the service it provides. One patient provided the following comment:

"Keep the dentists for longer"

Staying healthy

Health promotion protection and improvement

All but two of the patients who completed a questionnaire told us that the dental team had spoken to them about how to keep their mouth and teeth healthy.

We saw a wide range of information available to patients within the waiting area, covering private and NHS treatments as well as general information around oral

health for both adults and children. This was a good example of the practice supporting patients to maintain their own oral health and hygiene.

Dignified care

Without exception, all of the patients who completed a questionnaire felt that they had been treated with dignity and respect by staff when visiting the practice.

We observed staff talking to patients in a polite and courteous manner. Staff told us that if there was a need to hold a private conversation with a patient in person or on the telephone, they could use the office or an empty surgery. All dental surgeries had doors which could be closed to provide patients receiving treatment appropriate levels of privacy and dignity.

We noted that the nine principles as set out by the General Dental Council (GDC)¹ were displayed in the waiting area where it was clearly available to patients.

Patient information

Where applicable, all but one of the patients who completed a questionnaire told us that they felt involved, as much as they wanted to be, in any decisions made about their treatment. They also said that they had received clear information about available treatment options and all but two of the patients told us the cost was always made clear to them before they received any treatment.

Information detailing the costs of both NHS and private treatments was displayed for patients throughout the practice.

The practice Patient Information Leaflet was made available to patients. The leaflet gave comprehensive information about the practice and included all the information required by the Private Dentistry Regulations.

¹ <https://standards.gdc-uk.org> The GDC has set out nine principles that apply to all registered dental professionals that outlines the standards, performance and ethics that patients can expect from a dental professional

Outside the building we saw that the practice's opening hours were displayed. The emergency contact telephone number was also displayed inside the practice.

Communicating effectively

Almost every patient who completed a questionnaire told us that they were 'always' able to speak to staff in their preferred language.

Patients are able to communicate in their chosen language within the practice. Some members of staff were Welsh speakers, and written information was also available in both languages. The practice was also aware of the language line should a non-English or Welsh speaker need translation services.

Timely care

Just under a quarter of the patients who completed a questionnaire said they would not know how to access the out of hours dental service if they had an urgent dental problem.

The majority of the patients who completed a questionnaire felt that it was 'very easy' or 'fairly easy' to get an appointment when they needed it.

Details of how patients could access emergency dental care when the practice was closed was made available to patients in the reception, in the patient leaflet and on the practice's website.

The practice made efforts to ensure patients were seen in a timely manner. Staff told us that if a dentist was running late they would advise the patient waiting of any delay and allow them to reschedule should they need to.

Individual care

Planning care to promote independence

Where applicable, all but one of the patients who completed a questionnaire confirmed that the dentist enquires about their medical history before undertaking any treatment.

During the inspection we noted that treatment options had been recorded on all relevant records we reviewed. This provided assurance that patients were supported to make choices about their treatment options.

People's rights

The practice was accessible for wheelchair users as it had a surgery located on the ground floor. However, as there was a small step in to the surgery we recommended that a ramp was placed in there, instead of lifting the chair. This was acquired during the inspection.

We found that there were a number of policies in place to support staff and patients, including a patient acceptance policy and equal opportunities policy. This meant that the practice was able to deliver on its commitments under the Equality Act 2010.

Listening and learning from feedback

We found there was a complaints policy in place that was compliant with NHS Putting Things Right² and the Private Dentistry Regulations. There was a responsible individual allocated to deal with complaints. Patients can give feedback via questionnaires that were available, and make informal suggestions. Feedback from these was provided to staff and any changes made as a result were reported back to patients where appropriate.

²http://www.wales.nhs.uk/sites3/Documents/932/Healthcare%20Quality%20-%2030166_Putting%20Things%20Right_a5%20leaflet_English_WEB%20VERSION%20-%20FINAL%20-%202017%2003%2001.pdf

Delivery of safe and effective care

We considered the extent to which services provide high quality, safe and reliable care centred on individual patients.

Overall, we found evidence that patients were provided with safe and effective dental care.

We saw that the clinical facilities were well equipped, and there were arrangements in place for the safe treatment of patients. We saw that generally the practice was well maintained to a good standard. However one of the surgeries must undergo a de-cluttering exercise to ensure it is compliant with WHTM 01-05.

Medical records need to be improved and updated to include more detail of the care provided to patients.

Safe care

Managing risk and promoting health and safety

There were no concerns given by patients over the cleanliness of the dental practice. Every patient that completed a questionnaire felt that in their opinion, the dental practice was 'very clean'.

Overall we found the practice to be maintained to a high standard. We found arrangements were in place to protect the safety and well-being of staff working at, and people visiting the practice. The practice was spread over two buildings across a road; however efforts were made to ensure patients regularly attended the same site to minimise the need for patients to cross the road. The outside of the buildings appeared to be well maintained and clean. Inside, the buildings were light, tidy and spacious.

We saw there were a number of comprehensive policies relating to the fitness of the premises. These included a health and safety policy and risk management policy and emergency contingency policy. Policies and risk assessments were readily available to all staff and noted at team meetings. There was a sufficient environmental risk assessment in place to help protect both staff and patients.

We saw fire extinguishers were available at various locations around the buildings, and we noted that servicing had been carried out in the last twelve

months. The practice had a fire safety risk assessment in place as well as a fire policy. All staff had received appropriate fire training, however as is recommended in the risk assessment, regular fire drills were not undertaken. We recommended that these are conducted regularly.

Under the Control of Substances Hazardous to Health (COSHH) Regulations 2002³, employers need to either prevent or reduce staff exposure to substances that are hazardous to their health. We saw that the practice had a COSHH protocol and a mercury handling policy. We saw that contracts were in place for the safe transfer and disposal of hazardous (clinical) and non-clinical waste. Clinical waste was stored appropriately.

Improvement needed

The practice should undertake regular fire drills

Infection prevention and control

The practice had a designated room for the cleaning and sterilisation (decontamination) of dental instruments within the surgery on each site, as recommended by the Welsh Health Technical Memorandum (WHTM) 01-05⁴. The rooms were visibly clean and tidy.

We saw evidence that the protocol for checking the sterilisation equipment was available and up to date, and there was an infection control policy and a sharps safety policy for staff, meaning both staff and patients were being sufficiently protected from needle stick injuries and infection. The practice also had a cleaning schedule for staff to follow to ensure all areas were kept clean and tidy.

³ http://www.hse.gov.uk/foi/internalops/ocs/200-299/273_20/

⁴ 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.

Staff had access to, and used personal protective equipment (PPE) when undertaking decontamination activities.

We saw evidence that all staff had undertaken up to date infection control training, however this did not meet the five hour requirement set out by the General Dental Council. We recommended that an additional set of training must be undertaken to ensure all staff meet their minimum training requirements.

We saw evidence that the practice carried out regular infection control audits in accordance with WHTM 01-05.

We noticed that there was some clutter within the first floor rear surgery of the original site. Within this surgery we also noted that the drawer liners were old and deteriorating. This could inhibit effective cleaning, and we recommended that these were replaced as soon as possible.

Improvement needed

The practice must ensure that all staff have undertaken at least five hours of infection control training.

The practice must ensure the first floor rear surgery is free of clutter, and replacement drawer liners are provided.

Medicines management

The practice had procedures in place to deal with patient emergencies, including a resuscitation and medical emergency procedure. All staff had received training within the last twelve months, on how to deal with medical emergencies and how to perform cardiopulmonary resuscitation.

The practice had two appointed first aiders, ensuring staff and patients had appropriate access to first aid care in the event of an accident or injury.

The practice's first aid kit was complete and in date. The practice had policies and procedures in place which had been agreed by all staff, to ensure appropriate obtaining, handling, using, storing and disposal of medicines. We noted that the practice had a comprehensive process for stock checks of emergency equipment used.

The emergency drugs and equipment were stored in a cupboard and were all in line with Resuscitation Council (UK) guidance.

Safeguarding children and adults at risk

We saw that the practice had comprehensive policies and procedures in place to promote and protect the welfare of children and vulnerable adults, containing the contact details for the relevant safeguarding agencies.

At the time of the inspection, all staff had appropriate safeguarding training for child protection and protection of vulnerable adults. A safeguarding lead was also in place.

Medical devices, equipment and diagnostic systems

We saw that the surgeries contained appropriate equipment for the safety of patients and the dental team.

In accordance with the regulations, the practice had a maintenance and safety of facilities policy that included the testing of equipment, the undertaking of appropriate risk assessments and the reporting of incidents.

The radiological equipment (X-ray) was in working order and controlled areas had been identified. We saw documentation to show that the X-ray machines were regularly serviced. The radiation protection file was maintained and comprehensive, containing all the essential information. We saw that the local rules⁵ were displayed in the surgeries.

In accordance with the requirements of the General Dental Council⁶ and Ionising Radiation (Medical Exposure) Regulations (IR(ME)R) 2017⁷ all clinical staff had completed the required training

Effective care

Safe and clinically effective care

We saw evidence that the practice had a number of clinical audits in place to help demonstrate keeping up to date with professional standards. Results of the audits

⁵ Local rules (or safe working procedures) should reflect safe working practices and relate to the day-to-day safety management of lasers, IPL systems and LEDs.

⁶ General Dental Council - <http://www.gdc-uk.org/Pages/default.aspx>

⁷ http://www.legislation.gov.uk/ukxi/2000/1059/pdfs/ukxi_20001059_en.pdf

will help to identify areas for improvement and support any changes to dental team practises.

The practice had appropriate arrangements set out within the Statement of Purpose for the acceptance, assessment, diagnosis and treatment of patients. The practice also had a range of policies available to support these functions.

We found evidence throughout the course of the day that professional, regulatory and statutory guidance, such as NICE guidelines⁸, were given due consideration and followed where appropriate.

Quality improvement, research and innovation

As detailed above, we saw evidence that the practice has completed a range of clinical audits and due consideration is given to professional guidance.

We were told that the practice used the Welsh Deanery Maturity Matrix Dentistry practice development tool⁹ as their quality improvement tool. These are team development tools that encourages the team to focus on best practice and legislative requirements, and also about how they work together.

Information governance and communications technology

We found that patient information was stored securely, ensuring that personal and sensitive information was protected. Electronic records were regularly backed up to protect patient information and help prevent loss.

The practice had a number of appropriate policies and procedures in place including a data protection and data security policy. This meant that staff had access to suitable guidance with regard to their day to day work.

Record keeping

1. ⁸ <https://www.nice.org.uk/.../oral-and-dental-health>

⁹ <https://dental.walesdeanery.org/improving-practice-quality/maturity-matrix-dentistry>

We reviewed a sample of patient records. We found that the records did not contain the detail that is required. We found there were significant omissions in a number of records, namely in the following areas:

- Inconsistent six point periodontal charting¹⁰
- Patient medical history forms were scanned on to the system before they were countersigned by the dentist
- Inconsistent smoking cessation advice.

The practice must ensure patient records are completed in line with professional standards for record keeping.

Improvement needed

The practice must ensure patient records are completed in line with professional standards for record keeping.

¹⁰ Periodontal charting allows dental professionals to record gingival and overall oral conditions relating to oral and periodontal health or disease

Quality of management and leadership

We considered how services are managed and led and whether the workplace and organisational culture supports the provision of safe and effective care. We also considered how services review and monitor their own performance against the Health and Care Standards.

We found evidence of good management and leadership in the practice.

The practice had a comprehensive range of relevant policies and procedures in place that were reviewed annually.

There were robust management procedures in place for the benefit of staff, including annual staff appraisals and regular staff meetings.

We found that all staff had received the necessary training for their roles and responsibilities.

Governance, leadership and accountability

Restore Dental Surgery is owned by the Registered Manager¹¹ who also acted as the Responsible Individual¹² and the principle dentist. The Registered Manager is supported by a wider team of clinical and non-clinical staff.

The practice manager provides the day to day management of the practice. We found the practice to have good leadership and staff understood their roles and responsibilities.

¹¹ “Registered Manager” means a person who is registered under Part 2 of the Act as the manager of a private dental practice.

¹² “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;

We found there was a wide range of policies and procedures in place to ensure the safety of both staff and patients. The Statement of Purpose and Patient Information Leaflet contained all the relevant information required by the regulations.

All of the staff told us they worked well together and this was evidenced by their rapport and their interaction with the patients. Staff were aware of the whistleblowing policy and told us that they were confident in raising any issues or concerns about the delivery of care to patients, either directly with the dentist/s or practice manager, or an alternative appropriate body if required.

The Registered Manager confirmed that he was aware of his duties regarding notifications, including serious injury to patients and absence or changes to the Registered Manager, which must be sent to HIW¹³.

All clinical staff were registered to practise with the General Dental Council and had appropriate indemnity insurance cover in place. We saw the practice's public liability insurance certificate was displayed in the reception area.

Staff and resources

Workforce

The practice had a number of human resources related policies and procedures in place including a recruitment policy. Staff also completed regular appraisals and all had personal development plans for the upcoming year.

We saw certificates that evidenced all clinical staff had attended training on a range of topics relevant to their roles and meeting the Continuing Professional

¹³ Under regulations 25-29 of the Private Dentistry (Wales) Regulations 2017, the registered provider must notify HIW of significant events, including serious injury to patients and absence or changes to the registered manager.

Development (CPD) requirements. We were told that the practice holds team meetings regularly. We saw minutes relating to these meetings and staff unable to attend were updated by the practice manager.

The Regulations for Private Dentistry require that at the time of registration, all dentists providing private dental services in Wales have a Disclosure and Barring Service (DBS) Certificate issued within the previous three years. We saw evidence that DBS clearance checks had been carried out for all staff.

6. What next?

Where we have identified improvements and immediate non compliance issues during our inspection which require the service to take action, these are detailed in the following ways within the appendices of this report (where these apply):

- Appendix A: Includes a summary of any concerns regarding patient safety which were escalated and resolved during the inspection
- Appendix B: Includes any immediate concerns regarding patient safety where we issued a non compliance notice asking the service to tell us about the urgent actions they are taking
- Appendix C: Includes any other improvements identified during the inspection where we require the service to complete an improvement plan telling us about the actions they are taking to address these areas

Where we identify any serious regulatory breaches and concerns about the safety and wellbeing of patients using the service, the registered provider of the service will be notified via a non-compliance notice. The issuing of a non compliance notice is a serious matter and is the first step in a process which may lead to civil or criminal proceedings.

The improvement plans should:

- Clearly state when and how the findings identified will be addressed, including timescales
- 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.

As a result of the findings from this inspection 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.

7. How we inspect dental practices

Dental practice inspections are usually announced. Dental practices receive up to twelve weeks' notice of an inspection. This is so that arrangements can be made to ensure that the practice is running as normal, and that the inspection causes as little disruption to patients as possible.

Feedback is made available to practice representatives at the end of the inspection, in a way which supports learning, development and improvement at both operational and strategic levels.

We check how dental practices are meeting the [Health and Care Standards 2015](#) and, where private dentistry is provided, the [Private Dentistry \(Wales\) Regulations 2017](#). Where appropriate we consider how the practice meets these regulations, as well as the [Ionising Radiations Regulations 1999](#), the [Ionising Radiation \(Medical Exposure\) Regulations 2000](#) and any other relevant professional standards and guidance such as the [General Dental Council Standards for the Dental Team](#).

These inspections capture a snapshot of the standards of care within dental practices.

Further detail about how HIW inspects [dental practices](#) and the [NHS](#) can be found on our website.

Appendix A – Summary of concerns resolved during the inspection

The table below summaries the concerns identified and escalated during our inspection. Due to the impact/potential impact on patient care and treatment these concerns needed to be addressed straight away, during the inspection.

Immediate concerns identified	Impact/potential impact on patient care and treatment	How HIW escalated the concern	How the concern was resolved
We identified that there was not a disabled ramp in to the surgery which was designated as a disabled surgery on the ground floor	This could put the patient, staff and chaperones at risk of injury if helping a disabled person in to the room.	HIW escalated the risk to the registered manager and recommended that if this room was to continue to be used as a disabled friendly surgery, then a ramp would need to be installed.	A ramp was found and installed during the course of the inspection.

Appendix B – Immediate improvement plan

Service: Restore Dental Group

Date of inspection: 30 July 2019

The table below includes any immediate non-compliance concerns about patient safety identified during the inspection where we require the service to complete an immediate improvement plan telling us about the urgent actions they are taking.

Description of non compliance/ Action to be taken	Regulation	Service action	Responsible officer	Timescale
No immediate non compliance issues were identified on this inspection				

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.

Service representative:

Name (print):

Job role:

Date:

Appendix C – Improvement plan

Service: Restore Dental Group

Date of inspection: 30 July 2019

The table below includes any other improvements identified during the inspection where we require the service to complete an improvement plan telling us about the actions they are taking to address these areas.

Improvement needed	Standard/ Regulation	Service action	Responsible officer	Timescale
Delivery of safe and effective care				
The practice should undertake regular fire drills	2.1 Managing Risk and Promoting Health and Safety; Private Dentistry Regulations Section 22	A fire drill has been carried out and recorded. This will be in place to do every 6 months	Charlotte Chapman	Immediately
The practice must ensure that all staff have undertaken at least five hours of infection control training.	2.4 Infection Prevention and Control (IPC) and	All existing staff will be required to complete an additional 1.5 hours infection control training by 25 th October 2019. All new staff will be given 5 + hours	Charlotte Chapman	25 th October 2019

Improvement needed	Standard/ Regulation	Service action	Responsible officer	Timescale
The practice must ensure the first floor rear surgery is free of clutter, and replacement drawer liners are provided.	Decontamination, WHTM 01-05	<p>compulsory infection control training to complete as part of our company Induction.</p> <p>The rear surgery has been de-cluttered - all paperwork etc no longer stored by pc to make sure this area can be easily cleaned. Drawer liners have been replaced.</p>	Charlotte Chapman	Immediately
The practice must ensure patient records are completed in line with professional standards for record keeping.	3.5 Record keeping; Private Dentistry Regulations Section 20	Paperwork completed by patients will be checked by reception prior to scanning on to their electronic file. In the example of Medical History's these must be countersigned by the dentist prior to scanning on to file. Training and advice has been given to clinicians by Raid Ali with regards to checking Six point periodontal charting and consistent smoking cessation advice. All managers are attending smoking cessation course 14 th October and all 3 practices have registered to participate in smoking cessation audit.	Raid Ali, Supervised by Charlotte Chapman	Immediately

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.

Service representative

Name (print): Charlotte Chapman

Job role: Practice Manager

Date: 16/09/2019