

Inspection Summary Report

Symbiosis Dental practice

Inspection date: 17 October 2023

Publication date: 17 January 2024



This summary document provides an overview of the outcome of the inspection

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We observed a visibly clean, modern and safe practice, with patients agreeing they were provided with safe care and that the practice was clean and tidy. We found there were areas to improve around the management of emergency medical equipment and the recording of comprehensive patients notes. We saw robust processes for the decontamination of equipment and the practice managed risks effectively. We found information available to patients was comprehensive and patients told us that treatments were explained in a manner which they could understand.

We saw a supportive and clear structure of management, which included routine practice meetings and regular staff appraisals. We saw a friendly and professional workforce that told us they felt supported by their management and were trained above all mandatory requirements.

Staff records were well maintained and suitably overseen by practice management. We found improvements were required around some quality assurance activities. We heard from staff they felt comfortable raising concerns and understood the process they would follow to do so.

These inspection findings relate to the point in time that the inspection was undertaken.



What we did

Full details on how we inspect the NHS and regulate independent healthcare providers in Wales can be found on our [website](#).

Healthcare Inspectorate Wales (HIW) completed an announced inspection of Symbiosis Dental Practice on 17 October 2023.

Our team for the inspection comprised of a HIW Healthcare Inspector and a Dental Peer Reviewer.

This summary version of the report is designed for members of the public.

A full report, which is designed for the setting, and describes all findings relating to the provision of high quality, safe and reliable care that is centred on individual patients can be found on our [website](#).



Quality of Patient Experience



Overall Summary

- All respondents to the HIW questionnaire felt they were treated with dignity and respect and we saw staff treating patients in a professional manner. We found information available to patients was comprehensive and patients told us that treatments were explained in a manner which they could understand. We saw training being provided to staff to enhance their knowledge and understanding of protected characteristics, equality and diversity.

What we found this service did well

- Patient feedback was positive, with all patients rating the service as ‘very good’
- We saw staff wearing ‘Iaith Gwaith’ badges and a bilingual service offered to patients.

Patients told us:

“Always excellent service over decades. Friendly staff, relaxed atmosphere.”

“Excellent practice. Having lived in many countries, this is by far the best dental practice I have ever used.”

“This practice offers excellent dental service and all staff are extremely friendly and helpful.”

“I am delighted to have found this dental surgery. I wish I had found them sooner! The receptionists, hygienists and [clinicians] are all outstanding.”

“I have been a patient with the Morgan family and have received excellent care for over 20 years.”

We asked what could be done to improve the service. Comments included the following:

“I would like the option to have confirmation of appointments by email or text or postal letter.”

Delivery of Safe and Effective Care



Overall Summary

- We observed a visibly clean, modern and safe practice, with patients agreeing they were provided with safe care and that the practice was clean and tidy. We found there were areas to improve around the management of emergency medical equipment and the recording of comprehensive patients notes. We saw robust processes for the decontamination of equipment and the practice managed risks effectively.

Where the service could improve

- Ensuring that emergency equipment is ready for use at all times
- Review, record and date all practice policies ensuring updates are routine
- To keep accurate, comprehensive and complete patient records at all times.

What we found this service did well

- The design and layout of the decontamination areas was of a high standard
- Staff were trained to a higher level of first aid than is mandatory
- The assessment of risks and fire safety checks were robust.

Quality of Management and Leadership



Overall Summary

- We saw a supportive and clear structure of management, which included routine practice meetings and regular staff appraisals. We saw a friendly and professional workforce that told us they felt supported by their management and were trained above all mandatory requirements.

Staff records were well maintained and suitably overseen by practice management. We found improvements were required around some quality assurance activities. We heard from staff they felt comfortable raising concerns and understood the process they would follow to do so.

Where the service could improve

- Increase quality improvement and clinical audit activities.

What we found this service did well

- Staff felt able to, and did, undertake training above mandatory requirements and had an appropriate set of skills for the care being provided.

Next steps

Where we have identified improvements and immediate concerns during our inspection which require the service to take action, these are detailed in the appendices of the full inspection report.

When we identify concerns that pose an immediate risk to patient safety we ask the service to undertake urgent action. These concerns are outlined in the appendices and outline the action taken by the service to protect patient safety and approved by us. We also provide a detailed table of improvements identified during the inspection where we require the service to tell us about the actions they are taking to address these areas and improve the quality and safety of healthcare services. In addition, we outline concerns raised and acknowledge those resolved during the inspection.

At the appropriate time HIW asks the service to confirm action has been taken in line with management responses documented in the improvement plan. We also ask services to provide documented evidence of action taken and/or progress made.

