

General Dental Practice Inspection (Announced)

**Abertawe Bro-Morgannwg
University Health Board.**

**Jeremy Isaac - Live Life
Smiling**

29 February 2016

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1. Introduction

Healthcare Inspectorate Wales (HIW) is the independent inspectorate and regulator of all health care in Wales.

HIW's primary focus is on:

- Making a contribution to improving the safety and quality of healthcare services in Wales
- Improving citizens' experience of healthcare in Wales whether as a patient, service user, carer, relative or employee
- Strengthening the voice of patients and the public in the way health services are reviewed
- Ensuring that timely, useful, accessible and relevant information about the safety and quality of healthcare in Wales is made available to all.

HIW completed an inspection to Jeremy Isaac - Live Life Smiling at 68, Commercial Road, Taibach, Port Talbot. SA13 1LP on 29 February, 2016.

HIW explored how Jeremy Isaac - Live Life Smiling met the standards of care set out in the Health and Care Standards (April 2015) and other relevant legislation and guidance.

Dental inspections are announced and we consider and review the following areas:

- Quality of the Patient experience - We speak to patients (adults and children), their relatives, representatives and/or advocates to ensure that the patients' perspective is at the centre of our approach to how we inspect.
- Delivery of Safe and Effective Care - We consider the extent to which services provide high quality, safe and reliable care centred on the person.
- Quality of Management and leadership - We consider how services are managed and led and whether the culture is conducive to providing safe and effective care. We also consider how services review and monitor their own performance against relevant standards and guidance.

More details about our methodology can be found in section 6 of this report.

2. Context

Jeremy Isaac - Live Life Smiling provides services to patients in the Port Talbot area of West Glamorgan. The practice forms part of dental services provided within the area served by Abertawe Bro-Morgannwg University Health Board.

Jeremy Isaac - Live Life Smiling is a mixed practice providing both private and NHS dental services

The practice staff team includes two dentists, one dental hygienist, six dental nurses, two trainee dental nurses, one receptionist and a practice manager who is also a trained dental nurse.

A range of Private and NHS dental services (NHS for children only) are offered at this practice. There is a sister dental practice at 80, Fairwood Drive, Baglan, SA12 8NU which provides NHS treatment.

3. Summary

Overall, we found evidence that Jeremy Isaac - Live Life Smiling provides safe and effective dental care and is well regarded by their patients. We looked at patient records and found that improvements were needed. We recommend that the dentists conduct a clinical records audit together in order to share learning and best practice. Both dentists were awaiting up to date certificates from HIW and would display these prominently at the practice when received. This is what we found the practice did well:

- Patients we spoke to were happy with the service provided
- Staff we spoke to were happy in their roles and understood their responsibilities
- Clinical facilities are well-equipped, visibly clean and tidy
- Investment in the services of a dental business coach promoted development of best practice
- Encouraged staff to develop their practice via training needs log book
- Maintained up to date policies and procedures to protect patient safety
- Provided a web page for patient information

This is what we recommend the practice could improve:

- Certification needed for all x-ray machines
- Recording of patients notes
- Display HIW certificates
- Display complaints process for NHS patients
- Improve storage of dental instruments
- Ensure medical equipment is regularly checked to avoid exceeding expiry dates

4. Findings

Quality of the Patient Experience

We found evidence that the practice is committed to providing a positive experience for their patients. The feedback gained through our patient questionnaire was complimentary about the service provided and the staff themselves. The practice had a system of regularly seeking patient feedback as a way of assessing the quality of the service provided. Detailed information for patients was also displayed via the practice's website.

Prior to the inspection, we invited the practice to distribute HIW questionnaires to patients to obtain views on the dental services provided. A total of fifteen patients completed the HIW questionnaire which the practice had also made available in the Welsh language. Patient comments included:

"Very friendly practice. Always helpful."

"Attention to customer care satisfaction is second to none."

"The dentist is always patient with me as I am always anxious and the girls are always kind."

"Always feel welcome and happy to come."

Dignified care

We saw the staff treat patients in a friendly yet professional manner and had a pleasant rapport with patients in both face to face conversations and on the telephone. Staff told us that if patients needed to talk in private then a room was made available. All fifteen questionnaire respondents stated they were happy/very happy with information given to them about their treatment. Nine respondents had been with the practice for between ten and twenty years and the remainder five years or less. The patients we spoke to told us that they were always treated in a respectful and dignified manner, were made to feel welcome and that staff took time to explain things.

Timely care

Patients we talked to told us that they rarely experienced delays and if this should happen an explanation and apology was always given. Information from the HIW questionnaires showed that the majority of patients had not experienced delays, and knew how to contact 'out of hours' (emergency) dental services. The practice had a flexible appointment system and staff told us that every effort was made to see patients who needed emergency treatment.

Staying healthy

All patients completing the HIW questionnaires stated that they received enough information to help maintain good dental health and were satisfied with the service received. We did not see any notices displayed in the waiting areas of the practice but there was a plentiful supply of leaflets giving patients information in relation to good dental hygiene and products that can help maintain good dental health. Health promotion information assists in supporting patients to take responsibility for their own health and well-being. The practice also has a website 'Jeremy Isaac - Live Life Smiling' which gives information about services the practice offers and complies with the General Dental Council's Guidance on Advertising.

Individual care

The patient responses from HIW questionnaires showed they were always made to feel welcome and the majority stated that they knew how to make a complaint. We saw a price list and details of the complaints procedure displayed on the reception desk. However, the practice's complaints procedure did not include the arrangements for NHS patients, which are different to the complaint regulations for private dentistry.

Assurance that all patients know how to make a complaint is advocated by Health & Care Standard 6.3.

Improvement needed:

Notices to be displayed showing details of the complaints process for NHS patients, as set out in 'Putting Things Right' which is the complaint arrangements for NHS services in Wales.

Patients told us that the staff took time to listen to them and offered advice about any concerns or questions they had. The practice also used their own questionnaires to obtain feedback from patients and any concerns that arose were explored in the monthly meetings. Staff told us that when a patient made a request or expressed a concern, this was recorded in the patient's notes and also discussed at the monthly staff meetings.

Wheelchair users were able to access the premises easily but toilet facilities were not wide enough to manoeuvre around. We asked about this and were told that the recent purchase of an adjoining building would improve the toilet access for wheelchair users. We noted that there was a lack of sanitary disposal in the toilets which contravenes the Workplace (Health, Safety and Welfare) Regulations 1992.

Improvement needed:

Facilities to be available for sanitary disposal in toilets.

We also noted a lack of signage on any of the doors in the practice. We saw that the practice layout and facilities were of a very modern standard but lack of signage meant that patients needed to be guided to the appropriate room for treatment. We discussed this with the senior dentist who stated he would look at signage that would fit in with current décor and accepted our comments regarding lack of these. There were however signs to indicate radiation zones and fire exits.

Delivery of Safe and Effective Care

Overall, we found evidence that the practice provided patients with safe and effective dental care in a modern, clean and comfortable environment. Staff were focused on providing safe and effective care by having appropriate policies in place such as infection control; were compliant with Control of Substances Hazardous to Health (COSHH) regulations and also adult and child protection regulations.

The practice also needs to ensure that the appropriate documentation for three of the four x-ray machines is obtained and evidence forwarded to HIW as discussed.

Safe care

We found that the practice took steps to help ensure the health, safety and well-being of staff and patients. The premises were very well maintained, furnished and decorated to a very high standard. Fire extinguishers were strategically placed throughout and we saw a fire equipment maintenance contract for the premises.

We saw that testing of portable appliances (PAT) testing had been undertaken to ensure the safe use of these appliances at the practice. Contracts were in place for the safe storage and removal of both hazardous and non-hazardous waste products. We noted that the practice had conducted a risk assessment of the premises in line with the Health & Safety Executive guidelines. We looked at the accident book kept by the practice and saw that there were several incidents of needle stick injuries relating to the practice of re-sheathing needles. We discussed this with the staff and were informed that this practice had now been changed and only the dentist, and not the nurses, removed needles using an appropriate device. Medical care for needle stick injuries was via the local NHS Occupational Health Service.

Infection Control

We were satisfied that this practice took steps to protect staff and patients from preventable healthcare associated infections exemplified by the following:-

- Dedicated room for the cleaning and sterilisation of dental instruments
- Dedicated hand washing sink

- Use of personal protective equipment (PPE) such as eye protection, aprons and gloves when performing procedures
- Clinical waste stored in locked containers outside the rear of the premises.

We also saw that the practice had an infection control policy adapted from the guidelines of the Welsh Health Technical Memorandum 01-05 (WHTM 01-05) and had completed an infection control audit.

We did however notice that some of the dental instruments were stored loosely in drawers. We were told that these were not being used but being stored for future use. We advised staff that dental instruments in use must be stored in accordance with WHTM 01-05, 2.4 j. Where packaging is not applied, instruments should be used within that treatment session. This is defined as no more than one operational day. Unpacked instruments will then need to be reprocessed within that specified period whether used or not.

Improvement needed.

Stored dental instruments must be sealed, bagged and dated. Where instruments are unpacked and not used within one treatment session, they must be reprocessed whether used or not.

Emergency drugs, resuscitation equipment and medicines management

We were satisfied with this practice's management of medicines and their cardio pulmonary resuscitation training (CPR) which was completed by all clinical staff via the Welsh Deanery. We saw that emergency drugs were held in accordance with local requirements, were in date and that the practice kept a log book to show that regular checks of drugs was undertaken. We did however notice that one of several artificial airways was out of date. This was subsequently removed and we were assured that a replacement would be obtained.

Improvement needed:

All artificial airways to be checked regularly to ensure they remain within their expiry date.

Safeguarding

We found the practice had taken steps to promote and protect the welfare and safety of children and adults who may be vulnerable or at risk. There were safeguarding policies for the protection of children and adults. All clinical staff had received training in child protection and the practice had organised an 'in

house' adult protection training morning for 18 March 2016, during which time the practice would be closed.

Staff told us they were aware of their obligation to act in accordance with the practice's safeguarding policy should they become aware of any child or adult safeguarding issues.

Not all of the staff had pre-employment checks as they had been employed at the practice for many years. Regarding the two trainee dental nurses, we were told that pre-employment checks for both would have been undertaken by 'Learn Kit Ltd'. This was the company responsible for co-ordinating the learning needs of both trainees.

Radiographic equipment

We saw that both dentists responsible for taking radiographs had completed the required training, in accordance with the requirements of the Ionising Radiation (Medical Exposure) Regulations 2000.

We asked to see a notification letter to the Health and Safety Executive regarding radiological checks for the four x-ray machines used at the practice. At the time of inspection, the dentist provided a certificate for only one of the four x-ray machines but told us that a critical assessment of the remaining three machines had been undertaken. We advised that certificates for the remaining three x-ray machines were needed and that confirmation be forwarded to Healthcare Inspectorate Wales (HIW) within forty-eight hours as failure to do so may constitute a reason to instigate the 'immediate assurance' process. It is a legal requirement that dental practices notify the Health and Safety Executive of their intention to work with radiation. This is in accordance with regulation 6 of the Ionising Radiation Regulations, 1999 (IRR1999) and also to meet Ionising Radiation (Medical Exposure) regulations 2000 (IR(ME)R 2000).

Following our inspection the practice complied with our request to forward the evidence of certification of the three remaining x-ray machines to HIW.

Effective care

Patients benefit from a practice that seeks to continuously improve the service provided. We saw that the practice engages in some relevant audits such as infection control, had completed a Care of Substances Hazardous to Health (COSHH) audit and had safety data sheets for all products within this category. We also saw policies for manual handling and how the practice used the Health and Safety Executive guidelines to assess risk within the workplace.

Patient records

We looked at five patient records for each of the two dentists. Whilst we found that overall, records were quite detailed; there were areas where improvements needed to be made as follows:

We noted that initial medical histories for patients were not always signed by the patient nor countersigned or dated. Whilst countersigning is not mandatory, the practice must have a consistent system for ensuring each medical history is checked by the dentist.

Social history relating to smoking habit and alcohol consumption was not always explored or screening for cancer where there was a risk.

BPE (Basic Periodontal Examination) recording was inconsistent and was not updated regularly.

The justification, clinical findings and grading of radiographs (x-rays) was not always recorded in patient records.

Improvement needed:

Initial medical history needs to be signed, dated and countersigned.

Include details of social history i.e. smoking, alcohol consumption and cancer screening for patients deemed to be at risk. Give smoking cessation advice where applicable.

Record BPE consistently and regularly.

All dentists must record the justification, clinical findings and grading of every x ray in patient records.

Quality of Management and Leadership

We found evidence of effective management and leadership at this practice. Staff we spoke to were happy in their roles, many of whom had been in post for a number of years. Staff understood their responsibilities and felt supported by both of the dentists and each other. Collectively, the staff seemed a happy, confident and cohesive group. The practice had a number of policies and procedures in place to promote best practice which enabled staff to provide safe care to patients. Both dentists were awaiting up to date certificates from HIW and would display these prominently at the practice when received.

Dental care was delivered to the patients in a clean, modern environment. The practice had acquired the premises next door, with the intention of increasing facilities for staff and patients.

The practice benefited from a professional dental business coach who helped staff develop themselves professionally and also gave advice relating to practice development. The practice kept a 'training log book' and also had a 'training needs' board placed in the kitchen area for staff to state their training needs to help develop their practice. Arrangements were then made by the practice manager to accommodate these needs whenever possible. We talked to the staff and they felt this system worked quite well.

We saw records relating to Hepatitis B immunisation status for all clinical staff employed at the practice and that all staff had indemnity cover.

We confirmed that all relevant staff were registered with the General Dental Council but noted a lack of HIW certificates which needed to be displayed for both dentists. In accordance with the private dentistry regulations, a certificate of registration for private dentistry 'must be kept affixed in a conspicuous place.' We asked about this and were told that they were awaiting updated ones from HIW. We advised of the necessity to ensure that these were displayed prominently when received from HIW.

We looked at the policies and procedures in place and saw evidence that they had been reviewed regularly and were well organised. We saw records of the practice's monthly meetings for all staff. A system was also in place for the senior management team, comprising both dentists and the practice manager, to meet fortnightly. There was also what the staff termed 'middle meetings' for any issues that may need immediate attention. We saw how staff appraisals were conducted and also saw an induction programme for all new staff.

5. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan (Appendix A) to address the key findings from the inspection.

The improvement plan should clearly state when and how the findings identified at Jeremy Isaac- Live Life Smiling will be addressed, including timescales.

The action(s) taken by the practice in response to the issues identified within the improvement plan need to be specific, measureable, achievable, realistic and timed. Overall, the plan should be detailed enough to provide HIW with sufficient assurance concerning the matters therein.

Where actions within the practice improvement plan remain outstanding and/or in progress, the practice should provide HIW with updates to confirm when these have been addressed.

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

6. Methodology

The new Health and Care Standards (see figure 1) are at the core of HIW's approach to inspections of the NHS in Wales. The seven themes are intended to work together. Collectively they describe how a service provides high quality, safe and reliable care centred on the person. The standards are key to the judgements that we make about the quality, safety and effectiveness of services provided to patients.

Figure 1: Health and Care Standards



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 2008¹ and the Private Dentistry (Wales) (Amendment) Regulations 2011². 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

¹ <http://www.legislation.gov.uk/wsi/2008/1976/contents/made>

² <http://www.legislation.gov.uk/wsi/2011/2686/contents/made>

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
- 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.

Appendix A

General Dental Practice: Improvement Plan

Practice: Jeremy Isaac - Live Life Smiling

Date of Inspection: 29 February 2016

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
Quality of the Patient Experience					
6	Notices to be displayed showing details of the complaints process for NHS patients set out in 'Putting Things Right'.	Health & Care Standard 6.3	Displayed at reception area	L Morris	Complete
6	Facilities to be available for sanitary disposal in toilets.	Workplace (Health, Safety and Welfare)	Sanitary disposal unit in place	L Morris	Complete

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
		Regulations 1992			
Delivery of Safe and Effective Care					
9	Stored dental instruments must be sealed, bagged and dated. Where instruments are unpacked and not used within one treatment session, they must be reprocessed whether used or not.	WHTM 01-05 2.4 j	Protocol and systems put into place Monitoring by cross infection lead	S L Williams	Complete Ongoing
9	All artificial airways to be checked regularly to ensure they remain within their expiry date.	Health & Care Standard 2.9	Checklist put into place and entry onto electronic diary system	G John	Immediate
10	Initial medical history needs to be signed, dated and countersigned	GDC guidelines 4.1.1; 4.1.2.		L Morris	Immediate
11	Include details of social history i.e. smoking, alcohol consumption and cancer screening for patients deemed	Health & Care Standards	Include action onto new medical history forms	L Morris	3 Months

Page Number	Improvement Needed	Regulation / Standard	Practice Action	Responsible Officer	Timescale
	to be at risk. Give smoking cessation advice where applicable.	4.2.			
	Record BPE consistently and regularly.		Clinical Audit 3 Monthly to monitor	L Morris	Ongoing
	All dentists must record the justification, clinical findings and grading of every x ray in patient records.		Clinical Audit to monitor	L Morris	Ongoing
Quality of Management and Leadership					
	No areas for improvement needed.				

Practice Representative:

Name (print): ...LAURA MORRIS.....

Title: ...Practice Manager.....

Date:24/06/2016.....