

DRIVING
IMPROVEMENT
THROUGH
INDEPENDENT AND
OBJECTIVE REVIEW

General Dental Practice
Inspection [Announced]
Powys Teaching Health
Board, Integrated Dental
Holdings (IDH) Crickhowell

20 November 2014

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

Or via

Phone: 0300 062 8163

Email: hiw@wales.gsi.gov.uk

Fax: 0300 062 8387 Website: www.hiw.org.uk

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1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection to IDH Crickhowell at 2 Bank Buildings, Beaufort Street, Crickhowell, Powys, NP8 1AD within the area served by Powys teaching Local Health Board on 20th November 2014.

During the inspection we considered and reviewed the following areas:

- Patient experience
- Delivery of Standards for Health Services in Wales
- Management and leadership
- Quality of environment

2. Methodology

HIW inspections of General Dental Practices seek to establish how well practices meet the standards in *Doing Well, Doing Better: Standards for Health Services in Wales*¹.

During the inspection we reviewed documentation and information from a number of sources including:

- Information held by Healthcare Inspectorate Wales (HIW)
- Interviews of staff including dentists and administrative staff
- Conversations with nursing staff
- Examination of a sample of patient medical records
- Examination of practice policies and procedures
- Examination of equipment and premises

¹ Doing Well, Doing Better: Standards for Health Services in Wales came into force from 1st April 2010. The framework of standards sets out the requirements of what is expected of all health services in all settings in Wales. www.weds.wales.nhs.uk/opendoc/214438

2

Information within the practice information leaflet and website

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 will be 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

IDH Crickhowell provides services to patients in the Crickhowell area of Powys. The practice forms part of dental services provided within the geographical area known as Powys teaching Local Health Board. The practice employs a staff team which includes 3 dentists, 3 dental nurses, a hygienist, a receptionist and shares a practice manager with another IDH practice fairly nearby.

A range of services are provided. These include:

- Check ups
- Emergency appointments in normal opening hours
- Dentures
- Crowns and Bridges
- Extractions and fillings
- Tooth Whitening
- White fillings

4. Summary

HIW explored how IDH meets the standards of care in the Doing Well, Doing Better: Standards for Health Services in Wales.

Overall, we were extremely concerned about the poor standards of hygiene and repair that we saw across all areas of the practice. As a result of our findings we recommended that the practice close and stop offering patient services until they could complete remedial works to address our concerns. The practice agreed with our recommendation and closed immediately following our inspection for a period from Friday to Monday lunchtime. During this time they undertook extensive remedial works and sought professional pest control advice to rectify our immediate concerns. We have made further recommendations in addition to the immediate action required and further details can be found below in the main body of the report.

During this inspection we identified significant concerns about hygiene and cleanliness at the practice. As a result, we have not focussed in detail on the patient experience. It should be noted however, that we received some positive patient feedback in response to our questionnaires. We also received evidence which suggested that the practice need to improve their communication with patients in certain areas.

Overall, we could not be satisfied that the practice was meeting the standards necessary to provide safe dental care to their patient population.

Our inspection took place at a time when new management was in place at the practice. We were able to see the beginnings of practices which could lead to improvements over time but were concerned that the current management arrangement may not be sufficient to resolve the scale and range of issues we identified.

We had serious concerns about the upkeep of the practice environment, finding that all areas were visibly worn and some were unclean. We were also not satisfied with the steps that had been taken following a recent discovery of vermin in the practice.

5. Findings

Patient Experience

Summary

During this inspection we identified significant concerns about hygiene and cleanliness at the practice. As a result, we have not focussed in detail on the patient experience. It should be noted however, that we received some positive patient feedback in response to our questionnaires. We also received evidence which suggested that the practice need to improve their communication with patients in certain areas.

We asked the practice to distribute pre printed questionnaires before our inspection visit and 10 of these were completed and returned to us. We received some positive feedback in the responses to these. All respondents stated that they were made to feel welcome by the practice team and during our time at the practice we observed and overheard the receptionist dealing with a number of patients both in person and on the telephone in a warm, friendly manner.

The majority of patients responded stating that they did not know how to contact out of hours dental services. The majority of questionnaire respondents also did not know how they could make a complaint about the dental services they receive.

Recommendation

The practice must ensure that they provide and display key information for patients on out of hours dental service contacts and how to make a complaint.

A small number of patients also told us that their appointment had been delayed and one patient made the comment that during the wait:

"no-one told me why or what for"

Recommendation

The practice must ensure that patients are kept informed when there are any delays to their appointment times.

Delivery of Standards for Health Services in Wales

Summary

Overall, we could not be satisfied that the practice was meeting the standards necessary to provide safe dental care to their patient population.

We looked at a sample of patient records during our inspection and found variability in the quality and completeness of recording. It seemed that the same statements worded in the same way were appearing in different patient notes and we understood from conversations with dental staff that electronic records are updated by cutting and pasting words if possible to cut down on time. We also noted that in one case a medical history had not been updated on electronic records despite the dentist having signed to confirm that the paper update (with details of changes to the patient history) had been read. We found that initial medical histories and updated medical histories were not consistently present in the records we saw.

Recommendation

Obtaining medical histories from patients is a matter of safety and these must be consistently obtained and then consistently acted on to ensure the delivery of safe dental care.

In the waiting area of the practice we noted a sign telling patients that hygienist services were provided by the NHS. We could not be certain however, from the evidence we found in patient notes, that patients who required hygienist treatment for gum disease were receiving this as an NHS service or being required to pay additionally despite their documented clinical need.

Recommendation

The practice must ensure that their working policy on access to hygienist treatment on the NHS is accurately reflected in any information given to patients.

We saw that the practice had all policies in place for the day to day running of the practice and to cover safe use of equipment and safe systems of work. These documents were not created locally by staff at the practice as all IDH practices are required to follow policies which are company wide. (IDH is a large company which owns a large number of dental practices across the United Kingdom.) The practice manager explained to us that she used staff meetings to present any policy updates and we saw evidence of this from

minutes of the meetings, indicating that these were gradually beginning to be worked through.

Despite the availability of the full range of policies, we found evidence that the systems of work in place did not ensure that the policies were being adhered to. We found poor standards of daily maintenance and management of the three dental surgeries. We found out of date medication and out of date filling materials in all three surgeries. We also found a bottle of mouthwash in one surgery which was being used on patients. It had been prescribed for a member of the practice staff who was named on the label. We could not be clear of the reasons for doing this but what we found indicated that on this occasion the practice had been inappropriately prescribing and therefore not paying for this as a stock item.

Recommendation

The practice must develop daily routines which involve checking levels and expiry dates of equipment, medication and materials in the surgeries, findings and actions taken must be documented and checked by management. Prescribing practice must be reviewed to ensure there are no anomalies such as that described above.

Within the decontamination room we found instruments which had been sterilised but would need to be re-sterilised before use in order to comply with latest guidelines on how long sterilised equipment lasts.

Recommendation

The practice must ensure that there is a system which effectively ensures that equipment is only used during the time it is considered to be sterile and re-sterilised as soon as this is necessary.

We also noted that a sink in the decontamination room was leaking and spilling potentially contaminated / dirty water over clean items. Despite the availability of infection control policies which, had they been applied to this scenario, would have highlighted it as an issue requiring urgent action, staff were continuing to use the room and had not taken any remedial steps to remove clean items which were becoming contaminated.

Recommendation

The practice must ensure that staff are reminded of good infection control procedures and are retrained if this is identified as a need. Standards of cleanliness within the decontamination room should be made explicit so

that staff know what must be adhered to and when to take action if it falls below the expected standards.

Management and Leadership

Summary

Our inspection took place at a time when new management was in place at the practice. We were able to see the beginnings of practices which could lead to improvements over time but were concerned that the current management arrangement may not be sufficient to resolve the scale and range of issues we identified.

On the IDH website for Crickhowell practice, amongst other statements, patients are promised that the practice will:

"Exceed all requirements for safety and sterility..."

A number of our findings indicated that safety of patients and sterility of the equipment and environment were being compromised by poor working standards and upkeep of the premises.

The practice manager had been in post at Crickhowell for approximately three months and is an experienced practice manager. However, she has a dual role and covers another practice some distance away. As a result she has to split her time to cover both locations. Considering the range of issues we identified at this inspection we cannot be confident that this dual-site management arrangement will be sufficient to resolve the problems as quickly as necessary.

Recommendation

IDH are to review the current management arrangement and if it is deemed sufficient to meet the current needs of the practice at Crickhowell are to provide HIW with an action plan specifying how and when the current practice manager will work on improving overall standards of service delivery.

Also, HIW has, via its immediate concerns process, separately corresponded with Integrated Dental Holdings (IDH) as a result of the issues identified during this inspection, setting out our particular concerns that neither the owners of the practice, and the dental professionals working within it, had been sufficiently proactive to ensure compliance with relevant regulations and standards. it is the responsibility of the practice owners and the dental professionals who work there to ensure that any risks related to the health, welfare and safety of patients and others are identified, assessed and effectively managed. Also, that effective arrangements are put in place so that the quality of the services provided are regularly assessed and monitored.

HIW has received written assurance that Integrated Dental Holdings (IDH) has many procedures in place that provide practices with the measures to monitor the quality of the service; this includes clinical and managerial audits/checklists. IDH has also committed to ensuring that this practice continues to introduce/conduct the audits as specified in its procedures as a means to highlight where improvements are required, with actions plans put in place to address any concerns. The company is also providing support to the new manager in order for this to be achieved.

We were told that there were now regular team meetings in place; on a weekly basis the practice manager met informally with staff and more formally and minuted on a monthly basis. We saw examples of some of these minutes and could see that the new practice manager was using these to go through policies and introduce any policy changes to staff. This formal input is a positive finding, however the shortcomings we identified suggest that staff urgently need to be reminded of a number of key policies and this current approach may not be sufficiently quick enough.

Recommendation

The practice manager must review staff's competence and familiarity with key policies and procedures (training needs analysis) and take immediate steps to refresh knowledge where gaps are identified. HIW should be provided with evidence of this analysis and the subsequent plan that is produced.

Quality of Environment

Summary

We had serious concerns about the upkeep of the practice environment, finding that all areas were visibly worn and some were unclean. We were also not satisfied with the steps that had been taken following a recent discovery of vermin in the practice.

Our findings about the environment and the upkeep of the practice at this inspection were largely negative and are as follows:

- There had recently been vermin discovered in the practice. Whilst these
 had been immediately and appropriately dealt with, we saw that there
 were still vermin traps set to the rear of the property, the practice could
 not provide any evidence of additional vigilance against further vermin
 activity and as findings below show, we still found cluttered, visibly dirty
 areas throughout the premises.
- The waiting room carpet was worn and stained in many places
- There were portable air conditioning / heating units in each dental surgery. Water collected by these was piped into open containers next to them and we could not find evidence that these had been considered as part of the legionella risk assessments for the premises
- The decontamination room had a leaking sink which was contaminating the clean materials stored underneath it. Both the sink and contaminated materials were still being used.
- There was a camera installed to the ceiling of the reception area and in one surgery room. Staff did not believe that these were actively recording but could not provide any written evidence of their purpose or that they were not in use.
- There was a used instrument and a used glove discarded on the windowsill in the decontamination room. The windowsill was dirty and covered with dust.

We raised all of the above in our immediate action instructions to the practice and they have reported to us that these were all put right whilst the surgery was closed and have provided their assurance that these are therefore no longer an issue.

- The door to the patient toilet did not close or lock properly
- Chairs in dental surgeries were dusty underneath
- Patient sink bowls in surgeries were not kept clean throughout the day
- We noted used chewing gum on the floor of one surgery which was there throughout the day

Recommendation

The cleaning schedule and daily maintenance of clean surgeries must be sufficient to ensure that standards are kept high at all times.

 The area to the rear of the building where waste was stored was dirty and cluttered with some paper and cardboard which had been put there for disposal but not sealed in a bag

Recommendation

The waste storage area should be used more carefully and kept clean and tidy. HIW require written details of how this will be achieved.

There was food left uncovered in the staff kitchenette area.

Recommendation

Staff must be reminded of good food hygiene practices and maintain high standards of cleanliness within kitchen areas.

6. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan in respect of Patient Experience, Delivery of Standards for Health Services in Wales, Management and Leadership and Quality of Environment. 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 IDH Crickhowell 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: IDH Crickhowell

Date of Inspection: 20th November 2014

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
	Patient Experience			
	The practice must ensure that they provide and display key information for patients on out of hours dental service contacts and how to make a complaint.			
	The practice must ensure that patients are kept informed when there are any delays to their appointment times.			
	Delivery of Standards for Health Services in Wales			
	Obtaining medical histories from patients is a matter of safety and these must be consistently obtained and then consistently			

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
	acted on to ensure the delivery of safe dental care.			
	The practice must ensure that their working policy on access to hygienist treatment on the NHS is accurately reflected in any information given to patients.			
	The practice must develop daily routines which involve checking levels and expiry dates of equipment, medication and materials in the surgeries, findings and actions taken must be documented and checked by management.			
	The practice must ensure that there is a system which effectively ensures that equipment is only used during the time it is considered to be sterile and re-sterilised as soon as this is necessary.			
	The practice must ensure that staff are reminded of good infection control procedures and are retrained if this is identified as a need. Standards of cleanliness within the decontamination room should be made explicit so that staff know what must be adhered to and when to take action if it falls below the expected standards.			

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
	Management and Leadership			
	IDH are to review the current management arrangement and if it is deemed sufficient to meet the current needs of the practice at Crickhowell are to provide HIW with an action plan specifying how and when the current practice manager will work on improving overall standards of service delivery.			
	The practice manager must review staff's competence and familiarity with key policies and procedures (training needs analysis) and take immediate steps to refresh knowledge where gaps are identified. HIW should be provided with evidence of this analysis and the subsequent plan that is produced.			
	Quality of Environment			
	The cleaning schedule and daily maintenance of clean surgeries must be sufficient to ensure that standards are kept high at all times.			
	The waste storage area should be used more carefully and kept clean and tidy. HIW require			

Page Number	Recommendation	Practice Action	Responsible Officer	Timescale
	written details of how this will be achieved.			
	Staff must be reminded of good food hygiene practices and maintain high standards of cleanliness within kitchen areas.			

Practice Representative:		
Name (print):		
Title:		
Signature:		
Date:		