

## **General Dental Practice Inspection (Announced)**

Hywel Dda University  
Health Board

Portfield Dental Surgery

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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 a follow up inspection to Portfield Dental Surgery, 11 Portfield, Haverfordwest SA61 1BN on 19 October 2016.

HIW explored how Portfield Dental Surgery had made improvements to meet 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

Portfield Dental Surgery provides services to patients in the Haverfordwest area. The practice forms part of dental services provided within the area served by Hywel Dda University Health Board.

Portfield Dental Surgery is a mixed practice providing mainly private with some NHS dental services.

Portfield Dental Surgery is one of two practices in West Wales owned by Petra Dental Group (one other has recently been sold).

The practice staff team includes two dentists, one therapist, six nurses, one receptionist and one practice manager.

A range of general dental services are provided.

### 3. Summary

This visit was a follow up to an inspection undertaken on 12 January 2016. The purpose of our visit, on this occasion, was to consider the extent of the progress made in addressing the improvements highlighted within our earlier report. Whilst this report concentrates mainly on the developments made since our previous visit. We did not identify any further areas for improvement on this occasion.

With regard to the patient's experience, there were three improvements identified in the initial report. Whilst at the practice we took the opportunity to review the environment and speak with staff. We were pleased to see that the practice had addressing the improvements needed.

There were a number of areas identified for improvement in the initial report. We were pleased to find that there had been a significant improvement regarding the delivery of safe and effective care. There were no new areas identified for improvement.

During this inspection we saw that there had again been a significant improvement in the management and clinical arrangements in the practice. This has given us the assurance that the services provided are safe and appropriately managed.

## 4. Findings

### *Quality of the Patient Experience*

**With regard to the patient's experience, there were three improvements identified in the initial report. Whilst at the practice we took the opportunity to review the environment and speak with staff. We were pleased to see that the practice had addressed the improvements needed.**

We saw that the patient notice board had been tidied up and only had relevant information leaflets, which were easily visible to read. We were shown the updated complaints procedure which included the relevant contact addresses and the complaint procedure was visible at the reception desk.

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## *Delivery of Safe and Effective Care*

**There were a number of areas identified for improvement in the initial report. We were pleased to find that there had been a significant improvement regarding the delivery of safe and effective care. There were no new areas identified for improvement.**

We looked at the required improvements from the last report with regard to protecting the health, safety and welfare of patients and staff. We were satisfied that the practice had addressed all issues because;

We found that the practice had positioned fire extinguishers in areas suitable for increased patient safety. We also saw that instructions to follow in the event of a fire were visible on the walls in the staff room and front reception. The practice manager told us and showed us the written evidence that the fire officer had visited to advise on the second fire exit door. We also saw that all thoroughfares and doorways were free from obstruction. This meant that in the case of an emergency, patients and staff could exit the building in a timely manner.

We saw that appropriate bins were now in place for clinical waste and that the outside storage bins had been replaced. The practice had also made appropriate arrangements for the removal of feminine hygiene waste.

We were shown the new Control of Substances Hazardous to Health (COSHH) file, which the practice manager told us was a work in progress because as they purchased new hazardous substances the file was amended or updated.

We saw that the decontamination room had been de-cluttered and rearranged which allowed easier flow of dirty to clean instruments. There had been improved storage areas and the room arrangements were significantly improved. There was a new hand washing sink and two identified bowls for washing and rinsing used instruments. Clean instruments were now stored appropriately within sealed and dated bags. The decontamination policies and procedures had been updated in line with the WHTM 01-05.

We saw current maintenance certificates and that records of regular testing, before use, of cleaning equipment were now in use. The decommissioned sterilising machine had now been removed from the premises.

The practice had undertaken numerous audits since our initial inspection these included the WHTM 01-05 infection control, x-ray and antibiotic audit.

All emergency drugs are now available at the practice with individual algorithms (guides) to aid staff in an emergency situation. These were all stored together with



the First Aid kit and are now checked and recorded every Monday for dates and quantity.

Prescription pads are locked in the practice manager's office every evening and collected for use each morning. During surgery hours the prescriptions pads are stored in the surgeries with the practitioners.

We saw in staff files that CPR training had been accessed on the 15/3/16 and five members of staff had also received first aid training.

Safeguarding policies and protocols had been updated and contained the relevant information and contact details for referrals should the need arise.

We reviewed the Radiation Protection File and saw that it contained all the required documentation. We saw that all staff (who required) had recently received the appropriate training in ionising radiation.

During the initial inspection there was a piece of radiographic equipment (OPG) which needed to be removed from the premises as it was no longer in use. We saw that this had been addressed and in the room there were now cupboards that stored the emergency and first aid equipment.

Signage was seen to ensure staff and patients did not enter controlled areas (where they could be exposed to radiation). We also saw safer and improved practice conditions.

Checks were now in place for the processing chemicals for x-ray films, although the practice manager told us that the practice may move towards digital x-rays in the future. We saw, in patients' records, justification for taking x-rays, the findings from the x-rays and the quality of the images were now graded and audited.

With regard to patient records we saw that these had improved with; clear recording of social histories, medical histories were countersigned and updated, smoking cessation advice was offered, mouth cancer screening was recorded and the details regarding the discussion about treatment options was seen.

Arrangements were now in place with the neighbouring dental practice to undertake peer auditing of x-rays and patient records. The practice had also contacted the Deanery to discuss peer reviewing arrangements for the practice.

## *Quality of Management and Leadership*

**During this inspection we saw that there had been a significant improvement in the management and the clinical arrangements in the practice; this has given us the assurance that the services provided are safe and appropriately managed.**

We saw that there were clear management arrangements to ensure the creation, review and regular update of all policies and procedures in line with the current regulations and guidelines. There was a file which stored these policies together which was easily accessible to all staff.

We read the minutes of the new staff meetings which included monitoring of compliance with regulations and standards.

## 5. Next Steps

Findings from this inspection did not result in the need for the practice to complete an improvement plan.

## 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 2008<sup>1</sup> and the Private Dentistry (Wales) (Amendment) Regulations 2011<sup>2</sup>. Where appropriate we consider how the practice meets these regulations, as well as the Ionising Radiation Regulations 1999, the Ionising Radiation (Medical

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

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

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
- 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.