

# East Oxford Dental Clinic

## Enter & View Report



**October 2022**

---

# Contents

---

1. Introduction.....	3
1.1 Details of the visit.....	3
1.2 Acknowledgements.....	3
1.3 Disclaimer .....	3
2. What is Enter and View? .....	4
2.1 Purpose of the visit .....	4
2.2 Strategic drivers .....	5
2.3 Methodology .....	5
2.4 Summary of findings.....	5
3. Results of the visit.....	6
3.1 About East Oxford Dental Clinic .....	6
3.2 The clinic environment .....	6
3.3 Staff feedback .....	8
3.4 Patients feedback .....	9
4. Recommendations.....	11
5. Service Provider Response.....	12

# 1. Introduction

## 1.1 Details of Visit

Details of visit:	
<b>Service Address</b>	East Oxford Dental Clinic Manzil Way Oxford OX4 1XD
<b>Service Provider</b>	Oxford Health NHS Foundation Trust
<b>Date and Time</b>	Tuesday 26 <sup>th</sup> July 2022, 1:00 – 3:30 pm
<b>Authorised Representatives</b>	Amier Alagab, Veronica Barry, Carolyn Newbert
<b>Contact details</b>	01865 520520

## 1.2 Acknowledgements

Healthwatch Oxfordshire would like to thank the service provider, patients, and staff for their contribution to the Enter and View programme.

## 1.3 Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

---

## 2. What is Enter and View?

---

Part of the local Healthwatch Oxfordshire programme is to carry out Enter and View visits. Our authorised representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families, and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists, and pharmacies.

Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first-hand.

Healthwatch Oxfordshire Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the CQC where they are protected by legislation if they raise a concern.

### 2.1 Purpose of the visit

- To observe how the facility operates and provides its services.
- To collect views from patients, volunteers, and staff on services.
- To identify 'Best Practice' and highlight any areas of concern.

## 2.2 Strategic drivers

The Enter and View visit to the East Oxford Dental Clinic was part of a program on the health and social care settings and what we heard about dentistry experiences of people living in Oxford. We wanted to hear what is working well as well as where things could be improved.

## 2.3 Methodology

The pre-planning for this visit was carried out by email and telephone with the Misty Dawson, Interim Dental Nurse Team Manager, Oxford Health NHS Foundation Trust. This was followed by an online team meeting with the team manager and Vicki Power, Senior Programme Manager, Thames Valley Community Dental Service.

We carried out a risk assessment before the visit and liaised with the team manager to ensure that we followed any Covid 19 protocols the clinic had in place at the time of our visit.

On arrival at East Oxford Dental Clinic, we were welcomed by the reception team, followed by the Team Manager and a Dentist who has clinical responsibilities and managerial support. The Healthwatch team signed into the visitor's book on arrival to the clinic.

We explained to everyone we spoke to who we are and why we were there, ensuring we obtained consent from everyone we spoke to.

We used guided conversations with questions to capture patient's experiences of using the clinic and asked them if they had any further issues or comments. We used observation sheets to capture information about the environment of the clinic, including observations on health and safety, interaction between patients and staff, and accessibility. There were also staff questionnaires, which asked questions about their work environment, what they enjoyed about their job and challenges they faced, and any recommendations for improvement.

## 2.4 Summary of findings

Please note these findings represent a portrayal of the experiences of the service users and staff on the day that we visited:

- The dental clinic is run by a dedicated clinical and administrative staff team whose aim is to deliver excellent patient dental care services.
- Every patient we spoke to felt listened to by the dentists and other medical professional they consulted.
- Staff were accessible and friendly to patients and easy to talk to.
- Comments from patients about the environment and efficiency of the services, and the attitudes of staff were generally very positive.
- Improving internal communications between staff and as well as with patients may help them to engage with the clinic and enable them to give timely feedback.
- Feedback and complaints procedure need better promotion. This includes use of clear signs highlighting function of the iPads for patients' attention.
- The clinic was warm specially the waiting room and the staff mentioned they have air conditioning mobile units available during the peak summer.

---

## 3. Results of the visit

---

### 3.1 About East Oxford Dental Clinic

East Oxford Dental Clinic provides specialised dental care services to a wide range of both referred children and adult patients, who are unable to receive care from a General Dental Practitioner, but do not necessarily need to be seen in a hospital. Patients need to be referred to Oxfordshire Community Dental Service (OCDS) and they cater for a range of people with medical conditions, learning or physical disabilities, anxiety or phobia, mental health issues and those who require special care dentistry, including orthodontics.

The clinic working hours are:

08:30 am – 04:30 pm,

Monday to Friday.

### 3.2 The clinic environment

It was not easy to find the clinic, from perspective of someone visiting for the first time, the signage was not clearly marked outside the building and on the ground

floor of the medical centre building. The signage board on the ground floor was written in very small letters. At the entrance to dental clinic the signage was however clear and visible with the opening and closing time displayed. The main entrance door to the clinic was under the receptionist's control and visitors had to give their names and reason for coming via the intercom before entering for security purpose.

All patients and visitors were required to wear face masks on entry to the clinic and if they did not have one then reception staff provided one for them. There were clear markers on the floor inside the clinic for Covid social distancing. There was hand gel available. However, we noticed some visitors not wearing face masks and the visitors were not reminded by the reception staff to keep them on.

The building was very clean with smell of bleach, the windows were kept open, yet the environment seemed warm in the waiting room and quite stuffy. A baby changing room was available. Background music was playing Smooth radio "relaxing" channel. The chairs in the waiting room were available in different sizes.

Electronic devices for feedback and comments about the service were available with 2 iPads (one for adults and one for children) on the left-hand side corner when leaving the clinic. Patients could leave their comments on "*I want great care*". However, there was nothing to explain to visitors what the iPads were for. There needs to be a bold poster above the ipads, to flag up what they are for and inviting patients to "*give your feedback on your treatment today*" or "*we want to hear from you*" or similar. Meanwhile, patients could also be reminded by the reception team before leaving - that this facility is there and encouraged to give their comments.

Staff pictures were displayed, and there was a patient feedback board display of reviews from last month up to end of June. There was monthly data on feedback for child, adult, day and emergency clinics.

Staff dealing with visitors were friendly, welcoming, and professional. They welcomed patients by name and one member of staff was observed welcoming a little child in a very friendly way.

The service informed us that language line for telephony interpreting and absolute interpreting and translation is limited for face-to-face interpreting services. There were no posters to indicate to visitors that this service was available.

### 3.3 Staff feedback

We spoke to nine members of staff on site and received two completed questionnaires by post from staff who were not on duty at the day of the visit, including the team manager, dentists, NHS nurses, agency nurses and receptionists. We also left paper surveys with 'prepaid' envelopes to be distributed for other staff who might wish to complete one and return it to Healthwatch Oxfordshire.

The staff we met were working from: 08:30 - 16:30, Monday - Friday, having 30 mins lunch break 12:30 - 13:00.

We heard from staff that the clinic dealing with the special needs patients and patients who are referred by general dental practitioners or GPs for an appointment.

The follow up appointment for future treatments if required are sorted by reception team at the clinic.

All the staff we interviewed told us they enjoyed team working and felt there was a good team ethos across the clinic. Most staff said they got satisfaction from their job, enjoyed the challenges they faced day to day and always tried to get the best possible outcome for the patients.

Staff told us they love what they are doing specially the quality patient care and range of treatments available, personal and profession development, new challenges, support from other team members. They mentioned that they were able to treat and sort out cases where patients were unable to be treated in primary dental care.

We heard frustration about the impact of staff shortages on the day to day running of the clinic.

We heard from staff about inappropriate referrals from general dental practitioners, and they mentioned that many of the patients' cases could be treated in general dental practice instead of referring them to the East Oxford Dental clinic service. Staff also expressed a sense of frustration and powerlessness with the overall lack of access to NHS dental care in Oxford and beyond. The clinic received many calls a day from patients seeking care and treatment, which the clinic was unable to respond to, or suggest a solution.



Staff expressed frustration at patients not turning up for their appointments especially as they have long waiting lists with some patients in pain and waiting for an appointment.

We heard about parking issues and the difficulty around the area, there is no dedicated car park available for the staff.

We heard the demand and expectations of some patients was unrealistic and patients could be aggressive. Challenging patients, anxious patients doing the best trying to help them overcome fears were of their interest.

Staff seem well qualified and up to date on training skills as mentioned, happy about the team and working environment. They felt supported and listened to by the management team especially if an issue is raised for improvement.

Meanwhile, we heard that the air conditioning in the waiting room was requested for repair more than two years and still not been fixed.

The clinic staff running team meeting monthly and suggestions could be raised for improvements.

Some staff felt that communication was a challenge mainly within the team internally as well as externally with patients.

Every member of staff we spoke to felt fully supported in their role and said they were comfortable raising any issues or concerns to managers.

The clinic was warm and only has air conditioning mobile units available during the peak summer, staff prefer air-conditioning in each surgery rather than the mobile units.

### **3.4 Patient feedback**

During our visit we spoke to seven patients. All the seven patients had been to the clinic before and were attending for follow-up treatment.

Patients we met said that they had made their appointment by phone, face to face or via referral from local dental surgeries or arranged by the dentist based on their last appointment, which is convenient and easy.

We heard from a patient that reception staff were helpful - especially reminding by phone a day before the visit to confirm their appointment.

A patient told us they feel happy that the dentists listened to them when discussing any issues or feedback and felt they gave them good advice.

We heard from patients that they felt there could be clearer signage about how to get out of the clinic. The door operating system was dependent on the reception staff being there to open it. This was not always clear to patients and could cause anxiety. Patients told us that it would be good to know that they must buzz to get out of the clinic door. A sign is needed on the exit door giving clear instructions as to how to leave. This was also something Healthwatch Oxfordshire staff observed, noting a number of patients trying to leave and being uncertain as to how to get out.

Few patients we spoke to were knew how to make comments, give feedback, or how to make a complaint about the service. They were either not aware what the iPads were or had not seen them. There were no signs indicating the reason why they were there or encouraging feedback. Only one patient said 'yes I am aware of the iPad but due to some issues with my fingers I don't always use it' although they had used to enter feedback into a visitor's book. There was no paper based system of giving comments and feedback available and no translated information about giving feedback.

We heard from a patient that sometimes they had been seen by a clinician of a different gender without prior notice. This was despite their records noting their request for a clinician of a specific gender. This made them feel uncomfortable and they found it difficult which impacted on their mental health.

A patient mentioned the waiting room could be more child friendly with something to occupy children while waiting.

All the patients we spoke to said the clinical staff were responsive to their individual needs and that they felt listened to. They felt that clinical staff took any concerns seriously.

The patients we spoke to said that the large waiting room was clean and that it was good to have some music. Patients felt Covid safe, and chairs were spaced out and were reasonably comfortable.

## 4. Recommendations

- Ensuring that patient choice and preference is considered. For example, if someone has requested gender specific dental staff, we understand that this would be on a person's notes, but perhaps needs to be flagged up on the notes to ensure requests of this nature are followed.
- We would suggest that you put a notice on the door clearly showing patients how the door is operated and how they can leave/ have it opened, when no receptionist was present briefly, there was no one to operate the door, or to explain this is the process for exit.
- Improve communications within staff members so that information is rolled out across all staff teams and could help better engagement with patients.
- Provide information including translated materials to inform patients about:
  - How to compliment/complain
  - Information about interpreting service and Language Line
- Place the practice opening hours in a prominent position, and in large format on all main entrances.
- The waiting room could be more child friendly - something to occupy children while waiting, or posters aimed at children.
- Airconditioning facilities could be provided centrally in each surgery rooms instead of the mobile units.
- The NHS commissioners to note that some dental practitioners might be making inappropriate referral to East Oxford Dental clinic of patients that could be treated in their own practice.
- Assure that a bold poster fixed above the iPads to flag up what they are for and inviting patients to give feedback.

## 5. Service Provider Response

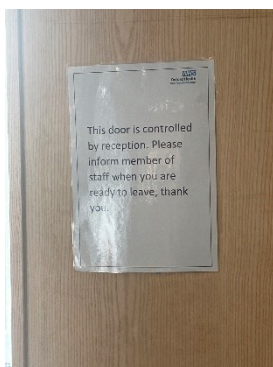
Many thanks for your report and feedback from the East Oxford visit on the 26<sup>th</sup> July 2022, please find below our responses to the points raised in the report.

**Ensuring that patient choice and preference is considered. For example, if someone has requested gender specific dental staff, we understand that this would be on a person's notes, but perhaps needs to be flagged up on the notes to ensure requests of this nature are followed**

We always endeavour to fulfil patient requests, on occasions this may not be possible due to the treatment required and the skill set of the dentist. A patient can request a specific gender of clinician, this request is added to the cover of the patient's physical notes and also added to the patient's R4 electronic notes (we have a "yellow post-it note "on R4 that flashes up when the notes are accessed).

**We would suggest that you put a notice on the door clearly showing patients how the door is operated and how they can leave/ have it opened, when no receptionist was present briefly, there was no one to operate the door, or to explain this is the process for exit.**

Following the visit, the team has now added some visual prompts to support how patients can exit the clinic.



**Improve communications within staff members so that information is rolled out across all staff teams and could help better engagement with patients.**



## How to compliment/complain

### Information about interpreting service and Language Line

The team are working with Berkshire and Buckinghamshire Community Dental Services as part of the community dental partnership to review our patient literature where different languages will be picked up and reviewed.



Complaints posters are visible on the notice boards around the clinic for patients and carers to view.

### **Place the practice opening hours in a prominent position, and in large format on all main entrances**

A maintenance ticket has already been raised on the 12<sup>th</sup> Sept 2022 to improve the signage to the clinic. East Oxford Health Centre is privately managed and has to be agreed by the management board of the landlords

### **The waiting room could be more child friendly – something to occupy children while waiting, or posters aimed at children.**

The team are currently in discussion with Infection, Prevention and Control team to allow us to put back some of our children's toys into the waiting area. We're also in discussion with the Oxford charity foundation to look for some support about murals on the walls. Following the pandemic there are strict protocols in place regarding waiting areas.

### **Airconditioning facilities could be provided centrally in each surgery rooms instead of the mobile units.**

The senior team have been working with Oxford's estates team and the property management group for a significant time to improve the air-conditioning facilities in the clinic not just dental as other services have a similar issue and discussion are still very much on-going between Estates and the landlords as the building work required impacts on the entire building not just dental

**The NHS commissioners to note that some dental practitioners might be making inappropriate referral to East Oxford Dental clinic of patients that could be treated in their own practice.**

All referrals across all Oxford Health Dental clinics across Oxfordshire are centrally triaged and inappropriate referrals to the Community Dental Service are referred back to the referrer with reasons for declining.

At regular meetings with NHS dental commissioners feedback around inappropriate referrals are discussed. This is an ongoing agenda topic especially given the crisis around dental access in England.

**Assure that a bold poster fixed above the iPad to flag up what they are for and inviting patients to give feedback.**



Signs are in place clearly highlighting to patients how to access patient feedback via the iPad's, there are also already laminated footprints on the floor to highlight where the iPads are.

**Please can you ensure that this report is sent to the relevant service providers.**

The report will be disseminated to dental colleagues across the service including clinicians who work in East Oxford. In addition, the report has already been discussed with the Dental Senior Management team, the Trust Medical Advisory Committee and has been tabled at the Trust Quality and Governance sub-committee.

By email on 26<sup>th</sup> September 2022 from:

Vicki Power

Senior Programme Manager

Thames Valley Community Dental Services