

Action Plan

Service Name:	Blairdaff Dental
Service Number:	01274
Service Provider:	NSDBG Limited
Address:	Unit 1 Dalfling Farm, Blairdaff, Inverurie, AB51 5LA
Date Inspection Concluded:	10 April 2024

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must undertake a risk assessment of its ventilation system in the treatment rooms and decontamination room and mitigate against any risks associated with using a ventilation system which does not meet national guidance for specialised ventilation for healthcare services (see page 18).</p> <p>Timescale – by 4 July 2024</p> <p>Regulation 10(2)(c) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p>	This has been completed.	Completed	Practice Manager

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<p>Requirement 2: The provider must undertake a risk assessment of the clinical hand wash basins and taps in the treatment rooms and decontamination room and mitigate any risks associated with using clinical hand washing facilities that do not meet current guidance about sanitary fittings in healthcare premises (see page 19).</p> <p>Timescale – by 4 July 2024</p> <p>Regulation 3(d)(i) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p>	<p>This has been completed.</p>	<p>Completed</p>	<p>Practice Manager</p>
<p>Recommendation a: The service should develop a formalised strategy that sets out its vision, purpose, aims and objectives. It should also identify key performance indicators to help it achieve its aims and objectives, and a process for monitoring and measuring these (see page 10).</p>	<p>This has been discussed and a strategy and process will be put in place.</p>	<p>1 month</p>	<p>Practice Manager</p> <p>Practice Owner/ Principle Dentist</p>
<p>Recommendation b: The service should introduce more regular formal staff meetings. A record of discussions and decisions reached at these meetings should be kept, including the staff responsible for taking forward any actions (see page 11).</p>	<p>Regular staff meetings have been scheduled and all discussions will be documented.</p>	<p>Completed</p>	<p>Practice Manager</p>

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Recommendation c: The service should develop a patient engagement strategy that sets out a structured way for obtaining and using patient feedback to improve the service (see page 12).	We aim to send feedback forms to patients electronically.	1 month	All staff members
Recommendation d: The service should continue to develop a programme of regular audits to cover key aspects of care and treatment. Audits should be documented, and improvement action plans implemented (see page 16).	This has been discussed with all staff members and various audits will be carried out on a regular basis.	completed	All staff members
Recommendation e: The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvement (see page 16).	This is in progress.	1 month	Practice Manager Practice Owner/ Principle Dentist
Recommendation f: The service should complete and submit a self-evaluation as requested by Healthcare Improvement Scotland (see page 19).	This will be completed.	1 week	Practice Owner/ Principle Dentist

Name	Dr Mihael Yovchev	
Designation	Practice Owner Principle Dentist	
Signature	M Yovchev	
	Date	21/05/2024
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Guidance on completing the action plan.

- **Action Planned:** This must be a relevant to the requirement or recommendation. It must be measurable and focussed with a well-defined description of how the requirement/recommendation will be (or has been) met. Including the tasks and steps required.
- **Timescales:** for some requirements the timescale for completion is immediate. If you identify a requirement/recommendation timescale that you feel needs to be extended, include the reason why.
- Please do not name individuals or an easily identifiable person in this document. Use Job Titles.
- If you have any questions about your inspection, the requirements/recommendations or how to complete this action plan, please contact the lead inspector.

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