

Action Plan

Service Name:	Vermilion – The Smile Experts
Service number:	00336
Service Provider:	Vermilion – The Smile Experts Limited
Address:	24 St John's Road, Edinburgh, EH12 6NZ
Date Inspection Concluded:	14 August 2024

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1 The provider must ensure that appropriate health clearance checks are carried out:	Checks are carried out on staff prior to starting, new guidance for staff registered before 1 August 2008 has been communicated to the team multiple times.	12 weeks	Linzi Bell
(a) on all staff before they begin working in the service, and(b) on all staff currently working in the service.	Staff find it difficult to get a "fit slip" due to limited "Occ Health" in the area. All clinicians within our current team have been		
Checks must be recorded and retained on staff files (see page 21).	reminded and given a timeframe of 6 weeks.		
Timescale – immediate			

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Requirement 2: The provider must ensure that appropriate Disclosure Scotland	Checks have been carried out on all staff, one individual had slipped through the net – a scheme	31/08/2024	Kay MacMillan
background checks are carried out:	update had been submitted and actioned by Kay MacMillan. However the query had not been		
(a) on all staff before they begin working in the service, and(b) on all staff currently working in the service.	actioned by the individual and it slipped through the net. PVG up-date 31/08/2024.		
Checks must be recorded and retained on staff files (see page 21).			
Timescale – immediate			

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Recommendation b: The service should update its recruitment policy to include details of the background checks and health clearance checks that will be carried out for healthcare workers during the recruitment process (see page 20).	Line added into the recruitment policy.	Actioned 25/09/2024	Kay MacMillan

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Name	Kav MacMillan	
Designation	General Manager	
Signature	Kau MacMillan	Date 26 / 09 /2024

In signing this form, you are confirming that you have the authority to complete it on behalf of the service provider.

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 can be immediate. If you identify a requirement/recommendation timescale that you feel needs to be extended, include the reason why.
- Person Responsible: Please do not name individuals or an easily identifiable person. Use Job Titles.
- Please do not name individuals in the document.

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• If you have any questions about your inspection, the requirements/recommendations or how to complete this action plan, please contact the lead inspector for your inspection.

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