

**16 week Action Plan update**

Service Name:	Dentistry Plus
Organisation number:	00162
Service Provider:	Dentistry Plus
Address:	103 Cowgate, Kirkintilloch, Glasgow, G66 1JD
Inspector:	Anna Martin
Date Inspection Concluded:	11 June 2024

Requirements and Recommendations	Action Taken	Completed Yes/No	Further action if applicable
<p><b>Requirement 1:</b> The provider must develop and implement a standard operating procedure for use of the platelet rich plasma (PRP) centrifuge machine (see page 16).</p> <p>Timescale – by 1 October 2024</p>	The provider is developing a written SOP for the use of the PRP machine in the practice	Yes	SOP completed for the use of the Centrifuge machine

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<p><b>Requirement 2:</b> The provider must publish an annual duty of candour report (see page 17).</p> <p>Timescale – immediate</p>	<p>Report published and sent to the Scottish Government. It is displayed in the practice for patients to see.</p>	<p>yes</p>	<p>Report sent to Scottish Government and displayed.</p>
<p><b>Requirement 3:</b> The provider must undertake a risk assessment of its ventilation system in the treatment rooms and decontamination room and mitigate against any risks identified (see page 19).</p> <p>Timescale – by 1 October 2024</p>	<p>A complete ventilation check will take place as requirements</p>	<p>yes</p>	<p>Risk assessment carried out. We are planning a new surgery installation and therefore a ventilation engineer will assess this prior to installation to ensure adequate ACH for the new surgery.</p>

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<p><b>Requirement 4:</b> The provider must ensure that appropriate Disclosure Scotland background checks and health clearance checks are carried out and recorded for:</p> <p>a) all staff before they begin working in the service, and</p> <p>b) all staff currently working in the service (see page 20).</p> <p>Timescale – immediate</p>	<p>Disclosure Scotland checks will be completed with the new practice name/address. These were done prior to the practice changing names. We will ensure all staff have the appropriate checks completed.</p>	<p>Yes</p>	<p>Disclosures obtained for staff members in the name of DentistryPlus</p>
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**Action Plan (continued)**

Requirements and Recommendations	Action Taken	Completed Yes/No	Further action if applicable
<p><b>Recommendation a:</b> The service should develop its strategic plan to identify aims, objectives and key performance indicators that will help it achieve its aims and objectives, and a process for monitoring and measuring these (see page 11).</p>	<p>The current action plan to be adapted to include KPI's and monitoring</p>	<p>yes</p>	<p>Ongoing work to develop KPIs as practice evolves this will change over time.</p>

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<p><b>Recommendation b:</b> The service should implement a structured way of seeking the views of staff and using their feedback to make improvements to the way the service is delivered (see page 14).</p>	<p>Already set in place. One to one chats with staff regularly to check this.</p>	<p>yes</p>	<p>One on one meetings with owner with each member of staff. Informal setting to help encourage valid discussion. Regular staff meetings and breeding an environment of openness and inclusivity to bring the whole</p>
<p><b>Recommendation c:</b> The service should ensure all clinical staff are trained in the duty of candour principles (see page 17).</p>	<p>This will be discussed during our upcoming staff meetings.</p>	<p>Yes</p>	<p>Covering duty of condor, scheduled into our staff meetings to go over different aspects of this along with other policies.</p>

<p><b>Recommendation d:</b> The service should continue to develop its clinical audit programme to include other types of audits. Audit results should be documented and action plans implemented (see page 17).</p>	<p>This will be integrated into the action plan for the practice.</p>	<p>yes</p>	<p>Plans have been discussed for carrying out audits of processes within the clinic to allow for a continued improvement programme of our services</p>
<p><b>Recommendation e:</b> The service should establish an effective stock checking process for medical emergency drugs and equipment (see page 20).</p>	<p>This has been implemented and we will document/make rota clearer to staff with time in the appointment book to complete this.</p>	<p>yes</p>	

<p><b>Recommendation f:</b> The service should complete and submit a self-evaluation as requested by Healthcare Improvement Scotland (see page 20).</p>	<p>Will complete self-evaluation when next requested to do so.</p>	<p>When requested to complete, checked with HIS that this was correct.</p>	
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Name	Daniel Sim
Designation	Principle
Signature	
Date	28/10/2024

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

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