

Appendix A

General Dental Practice: Improvement Plan

Practice: Severnside Dental Spa

Date of Inspection: 15th April 2015

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
Patient Experience				
8	IDH must ensure that the practice complaints procedure for patients receiving NHS services is consistent with the Putting Things Right arrangements. (Health and Social Care Standard 6.3)	The new code of practice for patient complaints is now displayed in practice. all complaints are documented in complaints file and entered on clarity (Internal central system) A staff meeting will be held with all team to update them of the process to ensure full team understanding	practice manager	Staff Meeting 13 th July
9	IDH should ensure that their online and written information is updated as soon as possible, to include the Severnside practice. In this respect the communication needs and spoken	The Mydentist website contains a page for the practice which shows all relevant information Patient Information leaflets have been ordered and these will be available to order in Welsh . The Practice Manager should ensure that there are	It department Support Centre Practice manager	Ordered – PM to ensure welsh versions ordered by 3 rd July

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	<p>language of the patients using the services at Severnside should be considered. (Health and Social Care Standard 3.2)</p> <p>The practice is advised to consider and develop various methods for obtaining patient feedback about their experiences, so that staff can gain a clear understanding of what is working well and what is not. The practice should demonstrate that they act and learn from this feedback. (Health and Social Care Standard 6.3)</p>	<p>welsh versions available on site</p> <p>Patient questionnaires are being given out and a suggestion box has been placed in the waiting room to obtain feedback from patients.</p> <p>SMS messages are sent to patients for feedback</p> <p>At the monthly staff meeting a slot will be on the monthly agenda to discuss and review feedback</p>	<p>Practice manager</p> <p>Practice team</p>	<p>The Practice manager should ensure this is communicated in the July staff meeting to all the team</p>
Delivery of Health and Care Standards				
10	<p>Sufficient warning signs must be displayed outside each designated radiographic area within the practice, in accordance with IRR 1999. (Health and Social Care Standards 2.1 and 2.9)</p>	<p>radiation signs have been ordered for each controlled area and in the interim period temporary signage has been placed to advise of radiation risk</p>	<p>Practice Manager</p>	<p>Temporary sign in place and official H&S signs have been ordered 26/6/15</p>
10	<p>Radiation protection training (IRMER) training certificates must always be</p>	<p>radiation protection training certificates are now available in practice filed in staff files</p>	<p>All trained staff PM</p>	<p>completed</p>

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	available at the practice for inspection. (Health and Social Care Standard 2.1)			
11	<p>All the dental practitioners should ensure that they wear the recommended personal protective equipment and adhere to infection control guidelines.</p> <p>We suggested that the practice's decontamination process and infection control protocols be reviewed and the staff be reminded of the procedures. We suggested that step by step procedures could be displayed in the decontamination room.</p> <p>(Health and Social Care Standards 2.4 and 2.9)</p>	<p>already in place</p> <p>PPE Policy is to be read and signed by all staff</p> <p>to display clear procedures to follow in c s u room</p> <p>nurses staff meeting was held 8th june 2015 to update staff on all protocols and procedures</p> <p>Whm Audit to be completed before 1st July</p> <p>Cross infection training will be delivered to the Pm to cascade back to the team throughout July/August by the clinical team from the support centre</p>	<p>Practice Manger</p> <p>cross infection nurse/PM to order the required</p> <p>Practice Manager/Lead Nurse</p> <p>Support Center compliance team</p>	<p>completed</p> <p>Completed</p> <p>1st July</p> <p>End of August</p>
11	<p>The practice should be able to demonstrate which autoclave has been checked by dental practitioners. We would advise the practice to consider obtaining separate logbooks for this purpose to avoid confusion.</p>	<p>log books are in use daily and weekly</p> <p>These will be spot checked by the CI lead on a weekly basis to ensure accuracy</p> <p>This will be reinforced at the cross infection training</p>	<p>clinical staff</p> <p>Practice manager</p>	<p>ongoing</p>

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	(Health and Social Care Standards 2.4 and 2.9)			
12	The practice should ensure that the manufacturers' guidelines for the storage of medication and dental products are adhered to at all times. (Health and Social Care Standard 2.6)	all medications are stored in a locked file all dispensed drugs are dated , logged and signed for on a recorded sheet At the July staff meeting this will be revisited to ensure all the team are aware of the process	Dentist Staff Practice Manager	13 th July staff Meeting
12	Used needles should be safely disposed of, without delay, after use. (Health and Social Care Standard 2.6)	The Manager has placed the order for the ultra safety plus system to implement as soon as possible at the next Staff meeting this will be shared with the whole team to ensure it is fully in use	dentist & dental nurses	Ordered July 13th
Management and Leadership				

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13-14	<p>IDH should take timely action to demonstrate effective leadership of Severnside Dental Spa. For example:</p> <ul style="list-style-type: none"> • Patients have a right to know about the management company running the service. • The overall management and leadership responsibilities between practice staff and the organisation should be clearly defined. <p>(In this respect, IDH is advised to consider the Health and Care Standards for the governance, leadership and accountability of Severnside Dental Spa).</p>	<p>patients are verbally advised when they come in for their appointment that severnside dental practice has been taken over by idh</p> <p>The practice Manager should ensure that the practice ownership plaque is on display – If necessary contact Facilities to order a new one</p>	<p>practice team</p> <p>Practice manager / Facilities</p>	<p>Ongoing</p> <p>7th July</p>
14	<p>HIW's registration certificates must be affixed in a conspicuous place at the practice (as required under The Care Standards Act 2000 and The Private Dentistry (Wales) Regulations 2008). (Health and Social Care Standard 7.1)</p>	<p>all hiw registration certificates have been obtained for idh and are now displayed in the appropriate clinicians surgery</p>	<p>practice manager</p>	<p>completed</p>

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14	<p>IDH should ensure that the policies and procedures relevant to Severnside practice refer appropriately to Welsh legislation and guidelines. (Health and Social Care Governance, Leadership and Accountability)</p>	<p>We are aware that the english and welsh legislation differs so we will always keep this in mind.</p> <p>The company compliance team and the clinical directors have reviewed the policies and made adaptations to factor in welsh reguations.</p> <p>These will soon be available for all Wales practices</p> <p>Interpreter services are available through the local health</p>	clinical and pratice team	Ongoing End of
15	<p>We have advised the practice to improve the methods for logging formal and informal complaints. This information could be used to identify any common themes that emerge and to act on and learn from these to improve services. (Health and Social Care Standard 6.3)</p>	<p>all formal complaints are logged in a complaints file and always updated they are also entered on the complaints system on the idh clarity and updated when necessary</p>	practice manger	ongoing
Quality of Environment				
17	<p>IDH is advised to review the storage of archived patient records and take steps to improve the security of the storage facility</p>	<p>inform head office we need a more secure building to store patient records</p>	head office reported	ongoing

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	for this purpose. (Health and Social Care Standard 3.5)			

Practice Representative:

Name (print):HEATHER OWEN.....

Title:PRACTICE MANAGER.....

Date:22nd JUNE 2015.....