

## **Action Plan**

Service Name:	Flying Smiles
Service number:	01546
Service Provider:	Principal Clinician
Address:	St Leonards, Dalginross, Comrie, Perth, PH6 2HB
Date Inspection Concluded:	11 December 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<b>Requirement 1</b> : The provider must ensure that the practitioner is supported by either a General Dental Council (GDC) registrant or	Recruiting a GDC registered Dental Nurse from May 2024.	May 2024	Principal Clinician
an appropriately trained care professional (see page 15).	Healthcare worker – Disclosed Attending CPR/first aid course. Has an appointment to be inoculated	Feb 2024 March 2024 April 2024	
Timescale – by 20 May 2024			

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Requirement 2: The provider must operate within its conditions of registration, as stated on its certificate of registration, at all times. If it intends to do anything that is not covered under its registration, this must first be discussed and agreed with Healthcare Improvement Scotland (see page 19). Timescale – immediate	Investigating solutions to service deprived areas. Investigating funding for a surgery van. If financially viable will change registration to 'mobile' rather than 'domiciliary'	Jan 2025	Principal Clinician
Requirement 3: The provider must ensure that appropriate background checks are carried out on all staff before they start working in the service (see page 20). Timescale – immediate	Disclosure request added to application form. Disclosure discussion added to interview questions Employing an administrator to ensure checks are administered before offer.	January 2024	Principal Clinician

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<b>Requirement 4</b> : The provider must ensure all staff have appropriate medical emergency training (see page 20).	Course booked March 2024	March 2024	Principal Clinician
Timescale – by 3 April 2024			
Requirement 5: The provider must obtain a new oxygen cylinder and remove the expired oxygen cylinder from its emergency kit (see page 20). Timescale – immediate	New oxygen cylinder delivered and in place. Date of expiry noted in calendar with notification. First aid check list will be part of new administrator's role	Feb 2024	Principal Clinician

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Requirement 6: The provider must obtain single use air and water tips or remove the air and water tip holder from service (see page 20). Timescale – immediate	NSK have developed a new handpiece that fits disposable tips. FlyingSmiles has worked with NSK to develop this protype and NSK will now fit is as standard on all Viva Ace's (mobile dental unit)	January 2024	Principal Clinician
<b>Requirement 7:</b> The provider must follow Health Protection Scotland's <i>National</i> <i>Infection Prevention and Control Manual</i> in relation to the cleaning and disinfection of patient equipment and the care environment (see page 20). Timescale – immediate	Due to new supply company there was an error in order it has now been replaced with combo wipes.	December 2023	Principal Clinician

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Timescale – Immediate	Requirement 8:The provider must amend the complaints procedure to make sure it is appropriate for the needs of its patients. It must state that patients have the right to contact Healthcare Improvement Scotland at any time and state the full name and contact details for Healthcare Improvement Scotland (see page 20).Timescale – immediate	Proof read and amended – sent to Inspector for sign off	December 2023	Principal Clinician
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Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<b>Recommendation a</b> : The service should introduce a programme of regular staff meetings, and a record of discussions and decisions reached at these meetings should be kept. These should detail staff responsible for taking forward any actions (see page 15).	Staff meetings occur informally in the car when travelling to patients. The healthcare worker has a note book where actions or questions are kept for journeys or meetings. Monthly performance meetings are documented. A new Communication book is taken in the car. Meetings are recorded with the following: Dated and who is got an action under these headings: Fire Safety Duty of Candour First Aid Schedule issues or concerns	December 2023	Principal Clinician

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	<ul> <li>What has changed to tell patients/ newsletter</li> <li>Zero Waste – what can we do better</li> </ul>		
<b>Recommendation b:</b> The service should inform patients when changes or improvements are made based on patient feedback (see page 16).	Agreed with Social Media Manager and added to staff meeting minutes for content. Implement 2/12 Patient Newsletter to inform them of changes	April 2024	Principal Clinician

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<b>Recommendation c</b> : The service should ensure that all staff are trained in the duty of candour principles (see page 20).	Duty of candour principles was trained at induction under heading; patient ethics and professional conduct. A 20 minutes video was watched and discussion was had about expections and what to do if things went wrong. All staff have signed the Duty of Candour policy Wording for this training has now been changed to Duty of Candour	January 2023	Principal Clinician
<b>Recommendation d:</b> The service should produce and publish annual duty of candour reports (see page 20).	An Incident form is now in use Duty of Candour annual report done	January 2024	Principal Clinician

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<b>Recommendation e:</b> The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvement (see page 21)	Quality Improvement Framework Plan was collated in July 2023. It was uploaded on HIS portal. It has led to focus groups and questionnaires.	July 2023	Principal Clinician
(see page 21).	All procedures and policies now listed under the Quality Framework headings. Action how we measures improvements from the feedback and questionnaires done in 2023	Jan 2024	

Name	Fiona Perru		
Designation	Owner. Dental Hygienist	•	
Signature	Suppropris	Date <u>08 / 02 /2024</u>	
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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## 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.
- 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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