

## Action Plan

Service Name:	Minto Dental Care and Implant Centre
Service number:	00411
Service Provider:	Xeon Smiles UK Limited
Address:	1 Liberton Gardens, Edinburgh, EH16 6JX
Date Inspection Concluded:	30 January 2024

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p><b>Requirement 1:</b> The provider must ensure local rules for the radiation equipment in treatment room one are updated to detail how the X-ray equipment will be safely isolated in the case of a malfunction (see page 21).</p> <p>Timescale – by 15 May 2024</p>	Lead nurse will update and display in the surgery	15 <sup>th</sup> May 2024	Lydia Dupe Bakare

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<p><b>Requirement 2:</b> The provider must ensure appropriate routine in-house quality control testing is carried out on the 3D scanner at all times (see page 21).</p> <p>Timescale – immediate</p>	<p>Routine check record created and now in place</p>	<p>immediate</p>	<p>Allison Whitle</p>
<p><b>Requirement 3:</b> The provider must ensure that the remedial works identified in the service’s February 2021 electrical installation condition report are carried out and then arrange for a new electrical installation condition report to be carried out to demonstrate that the electrical installation is in a satisfactory condition (see page 22).</p> <p>Timescale – by 15 May 2024</p>	<p>Remedial works were carried out on 26<sup>th</sup> July 2021 that were identified on the report. A new report needs to be completed and have requested this to be done.</p>	<p>15<sup>th</sup> May 2024</p>	<p>Allison Whitle</p>

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<p><b>Requirement 4:</b> The provider must ensure that all relevant staff undertake NHS Education for Scotland infection prevention and control training (see page 22).</p> <p>Timescale – by 15 July 2024</p>	<p>Training to be arranged for the practice – booked for 17<sup>th</sup> May 2024</p>	<p>May 2024</p>	<p>Lydia Dupe Bakare</p>
<p><b>Requirement 5:</b> The provider must ensure that the name of the local anesthetic and dosage given to patients is consistently recorded in patient care records (see page 26).</p> <p>Timescale – immediate</p>	<p>All clinicians informed and fully aware to record this in patient records.</p> <p>A regular audit is to be completed by the clinicians every 6 months to ensure this information is recorded in the patient record. If any information is missing, they will need to complete the audit every 3 months. Peer reviews will also be carried out to discuss this is being completed.</p>	<p>immediate</p>	<p>Lydia Dupe Bakare</p>

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<p><b>Requirement 6:</b> The provider must ensure that appropriate health clearance checks are carried out on all staff before they start working in the service. Steps must be taken to ensure that appropriate health clearance checks can also be demonstrated for staff already appointed (see page 26).</p> <p>Timescale – immediate</p>	<p>Personnel files to be checked for existing staff to check evidence of appropriate health clearance. Any staff that required that do not meet requirements will need to be seen by occupational health to provide the correct evidence.</p> <p>We are moving to a new compliance audit tool in Aug 24 so that these checks are reviewed annually. In the interim we have an in-house tracker to ensure all checks are in place.</p> <p>New staff checks will be completed before appointed. All staff employed by Bupa have to go through health checks before they are appointed. This is carried out by the onboarding team and passed onto the PM before they can work in the practice. The information sent to the PM to save in the new persons personnel file.</p>	<p>immediate</p>	<p>Allison Whitle</p>
<p><b>Requirement 7:</b> The provider must replace the damaged flooring in treatment room four (see page 26).</p> <p>Timescale – by 15 May 2024</p>	<p>Survey arranged for surgery 4 and was carried out in March. TBC when fitted</p>	<p>May 2024</p>	<p>Allison Whitle</p>

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<p><b>Requirement 8:</b> The provider must undertake a risk assessment that details how and when the ventilation in the treatment rooms and decontamination room will be upgraded to meet national guidance for specialised ventilation for healthcare services (see page 26).</p> <p>Timescale – by 15 May 2024</p>	<p>Risk assessment template to be created and carried out</p>	<p>15<sup>th</sup> May 2024</p>	<p>Lydia Dupe Bakare</p>
<p><b>Requirement 9:</b> The provider must undertake a risk assessment that details how and when the clinical hand wash basins and taps in the treatment rooms and decontamination room will be upgraded to meet current guidance about sanitary fittings in healthcare premises (see page 26).</p> <p>Timescale – by 15 May 2024</p>	<p>A risk assessment will be carried out to meet current guidance (SHTM64 sheet 7).</p> <p>This will be reported to the property to arrange installation of new taps and update hand wash basins.</p> <p>We must raise a ticket to inform the property department of Bupa the works that are required. They have been made aware of the deadline timescale.</p>	<p>15<sup>th</sup> May 2024</p>	<p>Lydia Dupe Bakare</p>

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<p><b>Requirement 10:</b> The provider must provide evidence that a radiation protection advisor and medical physics expert have been appointed (see page 27).</p> <p>Timescale – immediate</p>	<p>Ruth Lofts appointed. Confirmation received from Clinical Lead – Radiography &amp; Radiation Safety Bupa Dental Care</p>	<p>Received 4<sup>th</sup> Feb 2024</p>	<p>Lydia Dupe Bakare</p>
<p><b>Requirement 11:</b> The provider must complete and submit an annual return as requested by Healthcare Improvement Scotland (see page 27).</p> <p>Timescale – immediate</p>	<p>I will ensure a reminder is put in my calendar to set aside time to complete and submit the annual return in the time requested by HIS going forward for future annual returns. The annual return has now been submitted.</p>	<p>immediate</p>	<p>Allison Whitley</p>

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
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<p><b>Recommendation a:</b> The service should ensure patients are kept informed of any changes made to the service as a result of their feedback (see page 18).</p>	<p>Feedback reviewed daily on NPS and at practice meetings. Patients will be informed of changes.</p>	<p>immediate</p>	<p>Allison Whitle</p>
<p><b>Recommendation b:</b> The service should produce a duty of candour report each year and make it available to its patients (see page 22).</p>	<p>Duty of Candour Policy to be reviewed and report created for patients</p>	<p>May 2024</p>	<p>Dawn Forrest</p>

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<p><b>Recommendation c:</b> The service should complete and submit a self-evaluation as requested by Healthcare Improvement Scotland (see page 27).</p>	<p>Will be completed</p>	<p>May 24</p>	<p>Allison Whitle</p>
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<p>Name</p>	<p>Allison Whitle</p>	
<p>Designation</p>	<p>Practice Manager</p>	
<p>Signature</p>	<p><i>Allison Whitle</i></p>	<p>Date <input data-bbox="1339 930 1697 986" type="text" value="09 / 04 /2024"/></p>

**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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