

Announced Follow-up Inspection Report: Independent Healthcare

Service: Edinburgh Denture Clinic, Edinburgh

Service Provider: Edinburgh Denture Clinic

8 March 2022

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1 A summary of our follow-up inspection

Previous inspection

We previously inspected Edinburgh Denture Clinic on Tuesday 28 September 2021. That inspection resulted in five requirements and two recommendations. As a result of that inspection, Edinburgh Denture Clinic produced an improvement action plan and submitted this to us. The inspection report and details of the action plan are available on the Healthcare Improvement Scotland website at:

www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx

About our follow-up inspection

We carried out an announced follow-up inspection to Edinburgh Denture Clinic on Tuesday 8 March 2022. The purpose of the inspection was to follow up on the progress the service has made in addressing the five requirements and two recommendations from the last inspection. This report should be read along with the September 2021 inspection report.

We spoke with the manager (practitioner).

The inspection team was made up of one inspector.

Grades awarded as a result of this follow-up inspection will be restricted to no more than 'Satisfactory'. This is because the focus of our inspection was limited to the action taken to address the requirements and recommendations we made at the last inspection. Grades may still change after this inspection due to other regulatory activity.

| Key quality indicators inspected | |
|---|----------------|
| Domain 5 – Delivery of safe, effective, compassionate and person-centred care | |
| Quality indicator | Grade awarded |
| 5.1 - Safe delivery of care | ✓ Satisfactory |
| Domain 9 – Quality improvement-focused leadership | |
| 9.4 - Leadership of improvement and change | ✓ Satisfactory |

The grading history for Edinburgh Denture Clinic can be found on our website.

More information about grading can be found on our website at:

http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/ihc_inspection_guidance/inspection_methodology.aspx

Further information about the Quality Framework can also be found on our website at:

https://www.healthcareimprovementscotland.org/our_work/governance_and_assurance/quality_of_care_approach/quality_framework.aspx

We found that the provider had complied with most requirements made at our previous inspection. However, no action had been taken to make the improvements we suggested in our recommendations.

Of the five requirements made at the previous inspection on 28 September 2021, the provider has:

- met two requirements, and
- not met two requirements.

One requirement is no longer applicable.

What action we expect Edinburgh Denture Clinic to take after our inspection

This inspection resulted in two new requirements (see Appendix 1). Requirements are linked to compliance with the National Health Services (Scotland) Act 1978 and regulations or orders made under the Act, or a condition of registration.

An improvement action plan has been developed by the provider and is available on the Healthcare Improvement Scotland website:

www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx

Edinburgh Denture Clinic, the provider, must address the requirements and make the necessary improvements as a matter of priority.

We would like to thank all staff at Edinburgh Denture Clinic for their assistance during the inspection.

2 Progress since our last inspection

What the provider had done to meet the requirements and recommendations we made at our last inspection on 28 September 2021

Service delivery

This section is where we report on how safe the service is.

Domain 5 – Delivery of safe, effective, compassionate and person-centred care

High performing healthcare organisations are focused on safety and learning to take forward improvements, and put in place appropriate controls to manage risks. They provide care that is respectful and responsive to people's individual needs, preferences and values delivered through appropriate clinical and operational planning, processes and procedures.

Our findings

Quality indicator 5.1 - Safe delivery of care

Requirement 1 – Timescale: by 10 December 2021

The provider must develop a refurbishment plan that sets out how it will do the following within a reasonable timeframe:

- a) fill all gaps in the treatment room flooring with a suitable material to prevent the entry of pests*
- b) install coving to the treatment room floor covering to allow effective cleaning*
- c) box in all exposed cabling and extension leads under the treatment room chair, to allow effective cleaning*
- d) upgrade the clinical hand wash basin and equipment sink in the treatment room and hand wash basin outside the toilet room to meet current Scottish Health Technical Memorandum 64, and*
- e) install an instant hot water supply to the clinical hand wash basin and equipment sink in the treatment room and hand wash basin outside the toilet room, so that a supply of instant hot and cold water is always available.*

Action taken

No refurbishment plan had yet been produced. However, some refurbishment and repairs had been carried out since our last inspection. All gaps in the treatment room floor had been filled and exposed cabling under the treatment room chair had been boxed in. The patient hand wash basin outside the toilet

had been replaced, and the water heater serving this basin had been removed and mains water plumbing installed. This meant patients could now wash their hands in an instant supply of hot and cold running water.

The water heater serving the clinical hand wash basin in the treatment room had been removed and a new pipe connection to the mains water supply installed. A new equipment sink had been installed in the treatment room and we were told further arrangements were in place to box in exposed water feed pipes and to replaster the wall sections where repairs had been carried out. We were also told plans were in place for a new coved edge floor covering to be fitted in the treatment room.

Although a new clinical hand wash basin had been installed in the treatment room, the basin and tap assembly did not comply with Scottish Health Technical Memorandum 64, as required for sanitary fittings in healthcare settings. The basin and tap assembly must be replaced with one that meets the specification described in this national guidance. **This requirement is not met. A new requirement has been made** (see Appendix 1).

Requirement 2 – Timescale: by 10 December 2021

The provider must demonstrate that all remedial action highlighted in the fixed electrical check carried out on Tuesday 5 October 2021 is carried out.

Action taken

All remedial work required by the previous electrical installation condition report (EICR) had now been carried out by an external company and a new EICR completed on 12 January 2022. All necessary actions from that latest electrical check had also been acted on. The next EICR is scheduled to be carried out in 5 years. **This requirement is met.**

Requirement 3 – Timescale: by 10 December 2021

The provider must ensure the compressor in the dental laboratory is properly serviced and maintained in line with appropriate pressure systems regulations, or dispose of it.

Action taken

Following our last inspection, the compressor was disposed of. **This requirement is no longer applicable.**

Requirement 4 – Timescale: by 10 December 2021

The provider must arrange for a fire risk assessment to be carried out by a competent person and demonstrate that any remedial action identified has been carried out.

Action taken

A professional fire risk assessment had been carried out by an external contractor and a number of recommendations made. Some actions had been completed and we were told the remaining actions, detailed in an action plan, were being progressed. We will follow this up at the next inspection. **This requirement is met.**

Requirement 5 – Timescale: by 10 December 2021

The provider must establish a written complaints procedure for considering complaints made about the service. The procedure must include the name and full contact details for Healthcare Improvement Scotland and highlight patients' right to complain to the healthcare regulator at any time.

Action taken

A complaints procedure had been developed, and was displayed on the reception area noticeboard. The procedure explained the general process of making a complaint and signposted patients to Healthcare Improvement Scotland. However, the procedure did not contain clear timescales for formally acknowledging, investigating and responding to complaints. Consideration could also be given to making the procedure available on the service's website. **This requirement is not met. A new requirement has been made** (see Appendix 1).

Vision and leadership

This section is where we report on how well the service is led.

Domain 9 – Quality improvement-focused leadership

High performing healthcare organisations are focused on quality improvement. The leaders and managers in the organisation drive the delivery of high quality, safe, person-centred care by supporting and promoting an open and fair culture of continuous learning and improvement.

Our findings

Quality indicator 9.1 - Vision and strategic direction

Recommendation a

The service should develop and implement a quality improvement plan.

Action taken

No progress had been made with this recommendation. We will continue to follow this up at future inspections.

Recommendation b

The service should develop and implement a patient engagement strategy to formalise and direct the way it engages with its patients and uses their feedback to drive improvement.

Action taken

We were told that consideration was being given to introducing a suggestion box in the reception area. However, no progress had yet been made. We will continue to follow this up at future inspections.

Appendix 1 – Requirements and recommendations

The actions that Healthcare Improvement Scotland expects the independent healthcare service to take are called requirements and recommendations.

- **Requirement:** A requirement is a statement which sets out what is required of an independent healthcare provider to comply with the National Health Services (Scotland) Act 1978, regulations or a condition of registration. Where there are breaches of the Act, regulations, or conditions, a requirement must be made. Requirements are enforceable at the discretion of Healthcare Improvement Scotland.
- **Recommendation:** A recommendation is a statement that sets out actions the service should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.

Domain 5 – Delivery of safe, effective, compassionate and person-centred care

Requirements

- 1** The provider must replace the clinical hand wash basin in the treatment room with a basin and tap assembly that meets the specification in Scottish Health Technical Memorandum 64 (see page 7).

Timescale – by 1 June 2022

Regulation 10

The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011

This was previously identified as a similar requirement in the September 2021 inspection report for Edinburgh Denture Clinic.

- 2** The provider must further develop its complaints procedure to include clear timescales for when a patient can expect their complaint to be formally acknowledged, investigated and responded to. Consideration should also be given to making the complaints procedure available on the service's website (see page 8).

Timescale – by 1 June 2022

Regulation 15(4)

The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011

This was previously identified as a similar requirement in the September 2021 inspection report for Edinburgh Denture Clinic.

**Domain 5 – Delivery of safe, effective, compassionate and person-centred care
(continued)**

Recommendations

None

Appendix 2 – About our inspections

Our quality of care approach and the quality framework allows us to provide external assurance of the quality of healthcare provided in Scotland.

Our inspectors use this approach to check independent healthcare services regularly to make sure that they are complying with necessary standards and regulations. Inspections may be announced or unannounced.

We follow a number of stages to inspect independent healthcare services.

Before inspections

Independent healthcare services submit an annual return and self-evaluation to us.

We review this information and produce a service risk assessment to determine the risk level of the service. This helps us to decide the focus and frequency of inspection.



Before

During inspections

We use inspection tools to help us assess the service.

Inspections will be a mix of physical inspection and discussions with staff, people experiencing care and, where appropriate, carers and families.

We give feedback to the service at the end of the inspection.



During

After inspections

We publish reports for services and people experiencing care, carers and families based on what we find during inspections. Independent healthcare services use our reports to make improvements and find out what other services are doing well. Our reports are available on our website at: www.healthcareimprovementscotland.org

We require independent healthcare services to develop and then update an improvement action plan to address the requirements and recommendations we make.

We check progress against the improvement action plan.



After

More information about our approach can be found on our website:

www.healthcareimprovementscotland.org/our_work/governance_and_assurance/quality_of_care_approach.aspx

Complaints

If you would like to raise a concern or complaint about an independent healthcare service, you can complain directly to us at any time. However, we do suggest you contact the service directly in the first instance.

Our contact details are:

Healthcare Improvement Scotland

Gyle Square
1 South Gyle Crescent
Edinburgh
EH12 9EB

Telephone: 0131 623 4300

Email: his.ihcregulation@nhs.scot

You can read and download this document from our website.
We are happy to consider requests for other languages or formats.
Please contact our Equality and Diversity Advisor on 0141 225 6999
or email his.contactpublicinvolvement@nhs.scot

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