

Action Plan

Service Name:	Art of Dentistry	
Organisation Number:	01758	
Service Provider:	Clyde Dental Practice Limited	
Address:	171 Main Street, Prestwick, KA9 1LB	
Date Inspection Concluded:	25 August 2025	

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must ensure that patient care records detail the date, time and dose of any medicines administered to the patient (see page 22).	A custom screen has been created within SOE and attached to all treatment options. This must be completed by the GDPs.	Immediate	Lead Clinician / Clyde Munro Dental
Timescale – immediate			
Regulation 4(2) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011			

File Name: IHC Inspection Post Inspection - Action Plan	Version: 1.1	Date: 8 March 2023	
template AP			
Produced by: IHC Team	Page:1 of 4	Review Date:	
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Recommendation a: The service should create a standardised agenda template with regular operational standing agenda items that will be discussed and monitored at every meeting. 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 14). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19	Group chang eg He servion patien issue	pur intention to use the Clyde Munro Dental p template going forward. This includes staffing ges or company updates, clinical governance ealth & Safety changes, equipment failures or cing, infection control updates and audits, nt experience positive and negative, compliance s, improvements and audits, medical gencies and scenarios, and any other business	Immediate – completed	Lead Clinician
Recommendation b: The provider should review its recruitment policy to ensure it reflects current national best practice (see page 18).	recru Stand Hand	e Munro Dental Group are reviewing all itment policies in line with Health & Social Care dards. Clyde Munro Dental Group's Staff book is currently in draft form and once sed will be given to all staff.	Immediate – completed	Lead Clinician
Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.24				
Recommendation c: The service should review its policies to ensure they reflect the correct processes that apply to an independent clinic (see page 19).	Clyde Munro Dental Group are reviewing all policies in line with Health & Social Care Standards. The policies will clearly define the processes for an independent clinic. Each policy will have quality control information attached to show date of		1 month	Clinical Compliance Officer
Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.24		mentation, any changes, responsible person eview date.		
File Name: IHC Inspection Post Inspection - Action template AP	Plan	Version: 1.1	Date: 8 March 20	023
Produced by: IHC Team		Page:2 of 4	Review Date:	
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out how it will regularly review the quality of the service to make sure it meets the needs for the service to make sure it meets the needs of the service to make sure it meets the needs of the service to make sure it meets the needs of the service to make sure it meets the needs of the service to make sure it meets the needs and requirements of our patients. Regular activities to be reviewed are clinical audits, incidents, complaints, patient feedback, staff training and CPD compliance, policy and procedure reviews. Our QIP will be reviewed three monthly and supporting evidence will be retained. This was previously identified as a recommendation in the September 2022 inspection report for Art of Dentistry. Recommendation e. The service should introduce routine audits of radiographic image reporting to ensure any gaps are identified and improvements made as a result (see page 22). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19 Recommendation f. The service should record all inhouse testing of autoclaves and washer disinfectors (see page 22). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19 We currently record all daily and weekly testing of the washer disinfector and autoclaves using a Clyde Munro Dental Group template. All testing is carried out by appropriately trained staff. All sterilisation cycles are recorded by dataloggers and securely stored on computer. File Name: IHC Inspection Post Inspection - Action Plan Version: 1.1	Recommendation d : The service should develop a quality improvement plan that sets		Quality Improvement Plan (QIP) will regularly w, monitor and aim to improve the quality of our	Immediately – completed	Full Team
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Name	D: 1 W'			
	David Wiseman			
Designation	Lead Clinican			
			10/10/2025	
Signature	David Wiseman	Date	10/10/2025	

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 the timescale for completion is immediate. If you identify a requirement/recommendation timescale that you feel needs to be extended, include the reason why.
- Please do not name individuals or an easily identifiable person in this document. Use Job Titles.
- If you have any questions about your inspection, the requirements/recommendations or how to complete this action plan, please contact the lead inspector.

File Name: IHC Inspection Post Inspection - Action Plan	Version: 1.1	Date: 8 March 2023	
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Produced by: IHC Team	Page:4 of 4	Review Date:	
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