

Action Plan

Service Name:	MacEndo
Service number:	00573
Service Provider:	Alastair MacDonald
Address:	2 Clifton Street, Glasgow, G3 7LA
Date Inspection Concluded:	16 November 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must obtain a new oxygen cylinder and remove the expired oxygen cylinder from service (see page 20).</p> <p>Timescale – immediate</p>	Followed up with supplier last week	this week	Practice manager

<p>Requirement 2: The provider must arrange for an electrical installation condition report to be undertaken (see page 20).</p> <p>Timescale – by 21 March 2024</p>	<p>Booked for Monday 26th February</p>		<p>Practice manager</p>
<p>Requirement 3: The provider must action the findings of the legionella risk assessment (see page 20).</p> <p>Timescale – by 21 April 2024</p>	<p>Will action this week</p>		<p>Practice manager</p>
<p>Requirement 4: The provider must ensure that all relevant staff undertake NHS Education for Scotland infection prevention and control training (see page 20).</p> <p>Timescale – by 21 May 2024</p>	<p>NES training course competed 30th January,</p>		<p>Practice manager</p>

<p>Requirement 5: The provider must carry out a risk assessment on its ventilation system in the treatment room to mitigate against any risk associated with using a non-compliant system and consider a refurbishment programme to upgrade this (see page 24).</p> <p>Timescale – by 21 April 2024</p>	<p>Still working on it</p>	<p>By 21st April</p>	<p>Practice manager</p>
<p>Requirement 6: The provider must carry out a risk assessment on the clinical hand wash sinks in the dental surgery and decontamination room to mitigate any risk associated with using non-compliant clinical hand wash sinks and consider a refurbishment programme to upgrade them (see page 24).</p> <p>Timescale – by 21 April 2024</p>	<p>Still to organise</p>	<p>By 21st April 2024</p>	<p>Practice manager</p>

<p>Requirement 7: The provider must undertake the appropriate health clearance checks needed for exposure prone procedures for the clinical staff member identified during the inspection (see page 25).</p> <p>Timescale – by 21 March 2024</p>	Occupational Health has been contacted, awaiting reply	By 21st March 2024	Practice manager
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Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Recommendation a: The service should develop a strategy that identifies clear and measurable aims and objectives, along with the key performance indicators that will help it achieve these aims and objectives (see page 14).</p>	Still under discussion	By 21st April	Practice manager

<p>Recommendation b: The service should introduce a programme of regular staff meetings, with a record of discussions, decisions reached and staff responsible for taking forward any actions (see page 15).</p>	<p>Already in place. Inspector was shown paper work</p>		<p>Practice manager</p>
<p>Recommendation c: The service should review its website to provide additional patient information, such as opening hours and its cancellation policy, or create a patient information leaflet to provide all the information patients may require (see page 17).</p>	<p>In discussion with I.T consultant.</p>	<p>By 21st April 2024</p>	<p>Practice manager</p>

<p>Recommendation d: The service should develop and implement a formal mechanism to actively seek the views of staff working in the service (see page 17).</p>	<p>As we are a small team, we are constantly discussing and listening to all opinions and feel it is not necessary for a formal mechanism.</p>		<p>Practice manager</p>
<p>Recommendation e: The service should develop and implement a patient participation policy that sets out a structured way of engaging with its patients and demonstrating how it uses their feedback to drive improvement (see page 17).</p>	<p>In discussion with I.T consultant.</p>	<p>By 21st April</p>	<p>Practice manager</p>

<p>Recommendation f: The service should publish its complaints procedure on its website to make it easy for patients to find out how to make a complaint (see page 21).</p>	<p>In discussion with I.T consultant.</p>	<p>By 21st April</p>	<p>Practice manager</p>
<p>Recommendation g: The service should support at least one member of staff to undertake fire safety training (see page 21).</p>	<p>Fire risk assessor felt this was not necessary.</p>		<p>Practice manager</p>

<p>Recommendation h: The service should publish its duty of candour report annually (see page 21).</p>	<p>In discussion with I.T consultant.</p>	<p>21st April 2024</p>	<p>Practice manager</p>
<p>Recommendation i: The service should ensure that all staff are trained in the duty of candour principles (see page 21).</p>	<p>All staff completed Duty of Candour courses.</p>		<p>Practice manager</p>

<p>Recommendation j: The service should further develop its audit programme to include patient care record audits and a review of patient treatment outcomes. Audit results should be documented, and action plans developed and discussed with the practice team (see page 22).</p>	<p>Still under discussion</p>	<p>21st April 2024</p>	<p>Practice manager</p>
<p>Recommendation k: The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvement (see page 22).</p>	<p>Still under discussion</p>	<p>21st April</p>	<p>Practice manager</p>

<p>Recommendation l: The service should ensure that the hand washing sink area is clear of hand hygiene products to enable adequate cleaning and disinfection of the surfaces (see page 25).</p>	<p>wall mounted soap dispensers ordered</p>	<p>Hopefully this week</p>	<p>Practice manager</p>
<p>Recommendation m: The service should ensure that detailed information about medicines administered to patients, such as local anaesthetic, is recorded in patient care records (see page 25).</p>	<p>Would like clarification of recommendations please?</p>		<p>Practice manager</p>

<p>Recommendation n: The service should obtain written consent from patients when undertaking endodontic treatment (see page 25).</p>	<p>Due to the nature of the practice, verbal consent on several levels is obtained and acceptable.</p>		<p>Practice manager</p>
<p>Recommendation o: The service should complete and submit a self-evaluation as requested by Healthcare Improvement Scotland (see page 25).</p>	<p>To complete self evaluation form</p>	<p>By 21st April 2024</p>	<p>Practice manager</p>

<p>Name</p> <p>Designation</p> <p>Signature</p>	<p>Date</p>
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Maggie Drouglio

Practice manager

12/ 02 /2024

In signing this form, you are confirming that you have the authority to complete it on behalf of the service provider.

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.