

## ‘Investing For Health’ Workstream No. 11: Dentistry

### Theme: ‘Quality in Dental Practice’

Tasks 1-3: “NICE into Practice” – recall intervals in dental practices.

## ITEM No. 1 (of 5)

Sample / Draft

### MODEL PRACTICE IMPLEMENTATION PLAN

- (a) For dental practices proactively adopting NICE CG19 dental recalls guidance
- (b) For practices needing to (or required to) demonstrate existence of a pathway towards changed work methods
- (c) For PCTs to use/adapt when discussions with dental contractors necessitate agreement on remedial plans to change ways of working

<i>Title of Document</i>	<b>Model Practice Implementation Plan for adopting work methods in line with NICE CG19 (dental recall intervals)</b>
<i>Status</i>	<b>Developed through discussion at W. Mids SHA IFH-11 “NICE Recalls” Task Group</b>
<i>Potential users</i>	<b>NHS dental practitioners; Primary Care Trusts and successors</b>
<i>Date and version</i>	<b>No. 1 RC 1.0 Document 1 — Release Candidate no. 1 6<sup>th</sup> January 2011</b>
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# ANYTOWN DENTAL CARE PLAN FOR IMPLEMENTING AND DEMONSTRATING PRACTICE IN ACCORD WITH NICE CG019 [SAMPLE MODEL]

## BACKGROUND

1. The National Institute of Clinical Excellence published a guideline in October 2004 which made recommendations in respect of how patients should be recalled in dental practice (CG019).
2. Under standard GDS and PDS contracts for Mandatory Services, introduced in 2006 it is a contractual obligation to follow NICE guidance (Guideline CG019 is specifically mentioned).
3. Anytown Dental Practice has developed this plan to give details for staff (and the Primary Care Trust, if requested) regarding how the practice will introduce full compliance with NICE CG019.

## MAIN OBJECTIVES FOR THE PLAN

By [ October 2012 or insert goal date ]

- a) ninety percent of patients who have been seen at the practice
  - for routine (i.e. non urgent care)
  - since the start date of this plan (see below)will have had a risk assessment carried out and will have been offered a recall interval in line with this assessment and will have had their recall interval explained to them.
- b) The practice will have conducted an audit and will hold data to demonstrate compliance with this standard.
- c) Clinical staff will have access to information showing the proportion (%age) of practice patients that fall into the various recall interval strata; and will know how this data compares with their own patients, and with corresponding data at region / PCT / national level.

## START DATE OF PLAN

[ insert plan start-date ]

## **Basic plan outline**

- Initial prep
  - Further prep, staff training
    - First operational phase (commencement)
      - (Consolidation) Data collection, audit, internal reporting

### ***Initial preparation and development***

<b>Action</b>	<b>By whom</b>	<b>By when</b>
Gather information about CG019 and prepare folder of background information /reading	insert	Month 1
Drafting practice clinical protocol	insert	Month 2
Consult with staff on practice protocol – finalise	insert	Month 3

### ***Staff training and further development***

<b>Action</b>	<b>By whom</b>	<b>By when</b>
Place matter on agenda for staff meeting with proposed date for staff training.	insert	Month 4
Individuals – at next appraisal / review, check and incorporate (if not already present) individual’s need for update of knowledge on practice recall policy	insert	As and when
Recording: develop additional or new paperwork if necessary, and/or add module to practice IT system	insert	Month 4
Develop public-facing statement on policy; modify patient information leaflet if necessary	insert	Month 4
Conduct staff training session	insert	Month 6

### ***Commencement of first operational phase***

<b>Action</b>	<b>By whom</b>	<b>By when</b>
Commencement phase – begin > conducting risk assessments, recording in notes, > advising patients chairside / desk / other, > setting up direct recalls if desired	Dentists/DNs Dentists/DNs Office staff?	Month 7
Further work on data reporting (for example – customising management reports from practice IT system)	insert	Mths 7-12
Include refresher in staff training meeting – with opportunity to review snags & improvements	insert	Month 9

### ***Consolidation — introduction of data collection, audit and internal reporting***

<b>Action</b>	<b>By whom</b>	<b>By when</b>
Commencement first cycle of audit > pilot project, > main audit cycle #1,	All staff as req'd	Month 12 Month 13
Completion of 1 <sup>st</sup> audit cycle - consider sending non-individual results to PCT - obtain PCT-wide /local / national comparison data	insert insert	Month 15
First quarter of internal reports to clinical staff – practice results and individual comparisons	insert	Month 18
Repeat audit – cycle #2, report to staff and PCT	insert	Month 24