# Communication Checklist

Instructions on [how to use the checklists](https://www.psm.sdcep.org.uk/checklists/how-to-use-checklists/) in the ‘*Practice Support Manual’* (PSM) are provided. Note that a worked Communication checklist is also provided.

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| **Dental Practice Name:**  |  |
| **Overall Responsibility for Checklist:** |  |
| **Year:** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Team Member Responsible | Date to be Completed  | Documentation Storage Site / Supplier details  | Completed?  | Comments | Review Date |
| **Information about the practice** |  |  |  |  |  |  |
| Patient Information Leaflet in place and up to date. **PI*** All items are included, as specified in the Terms of Service.
* Leaflet can be made available in large print
 |  |  |  |  |  |  |
| The practice website is up to date. |  |  |  |  |  |  |
| Standard treatment estimates and other information on charges and exemptions are in place and up to date. **PI*** Are there changes that need to be communicated?
 |  |  |  |  |  |  |
| New Patient Pack in place and up to date. |  |  |  |  |  |  |
| Appointment/reminder system in place and working effectively.  |  |  |  |  |  |  |
| Sources of advice and support for the practice to improve accessibility for patients are established and up to date (e.g. interpreting services or disability issues). *[See the Disability Equality topic on the PSM.]* |  |  |  |  |  |  |
| **Communication with patients** |  |  |  |  |  |  |
| Policies and procedures affecting or involving patient communication are in place and up to date, e.g.* appointment reminder and recall procedures;
* policy on cancellation of appointments; **PI**
* emergency patient procedures both during and out with normal practice hours; **PI**
* complaints procedure policy (for making and handling complaints); **PI**
* [UK GDPR 2018 / DPA 2018 compliant data protection policy **PI** information for patients](http://www.psm.sdcep.org.uk/index.aspx?o=4298) **PI**
 |  |  |  |  |  |  |
| Displayed information in the practice is up to date. *[To include information leaflets and notices, e.g.* *the complaints notice for patients***PI***pregnancy enquiry notice* **PI***display screens etc.*  |  |  |  |  |  |  |
| Dental team members are identified to patients (e.g. name badges, information posters) **PI** |  |  |  |  |  |  |
| Standard treatment aftercare information sheets in place and up to date. |  |  |  |  |  |  |
| Standard prevention information sheets in place and up to date. |  |  |  |  |  |  |
| Arrangements for patients’ continuing care if the practice were to close in place and up to date. **PI** |  |  |  |  |  |  |
| **Obtaining consent** |  |  |  |  |  |  |
| Policy on obtaining consent and consent form (including for treatment of children) in place and up to date. **PI** |  |  |  |  |  |  |
| **Feedback, Comments, Concerns and Complaints** |  |  |  |  |  |  |
| The practice’s Feedback, Comments, Concerns and Complaints (FCCC) Officer appointed.  |  |  |  |  |  |  |
| Contact details of the local Health Board FCCC officer and manager are up to date. |  |  |  |  |  |  |
| Feedback, Comments, Concerns and Complaints policy information for patients and staff up to date and easily available. **PI** |  |  |  |  |  |  |
| Training for all staff in how to deal with FCCC has been arranged/completed.  |  |  |  |  |  |  |
| Annual report of Feedback, Comments and Concerns statistics sent to the local Health Board. |  |  |  |  |  |  |
| Quarterly reports of complaints statistics sent to the local Health Board. |  |  |  |  |  |  |
| Records of complaints are available **PI** |  |  |  |  |  |  |
| **Duty of Candour** |  |  |  |  |  |  |
| Duty of Candour Procedure is in place and staff are aware of it. **PI** |  |  |  |  |  |  |
| Duty of Candour incidents are recorded. |  |  |  |  |  |  |
| Advice on local Duty of Candour annual reporting process has been requested from Health Board and received.  |  |  |  |  |  |  |
| Annual report of Duty of Candour incidents submitted. |  |  |  |  |  |  |
| **Dealing with Violent Patients** |  |  |  |  |  |  |
| Violence and Aggression policy in place and up to date. |  |  |  |  |  |  |
| Staff training in violence & aggression arranged/completed. |  |  |  |  |  |  |
| Violent incident reports are kept. |  |  |  |  |  |  |
| Security measures are in order. (e.g. alarm working; emergency contact telephone number is up to date and easily available to staff.  |  |  |  |  |  |  |
| **Communication within the dental team** |  |  |  |  |  |  |
| Practice team meetings are scheduled, and minutes/action points recorded. **PI** |  |  |  |  |  |  |
| Policy for daily opening of NHS email and dissemination of relevant materials to staff **PI** |  |  |  |  |  |  |
| Referral protocol and procedures are in place and up to date. **PI** |  |  |  |  |  |  |
| **Communication with other professionals and referral**  |  |  |  |  |  |  |
| Referral form is in place and up to date. |  |  |  |  |  |  |

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| **PI** – Practice inspection item |