**Workflow processes (Dental)**

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|  | **Action Points** | **Yes** | **No** | **Action Required** |
| **1** | **There is a system for processing incoming mail related to patients** |
|  | Everyone is aware of the agreed process for dealing with mail e.g. results, hospital letters and referrals. |[ ] [ ]        |
|  | The system maintains an audit trail of when each item has been received, who has viewed it, any actions required and whether actions have been completed. |[ ] [ ]   |
|  | All action options are clear and unambiguous.*(e.g. file, notes required, re-test, satisfactory, urgent consultation with dentist)* |[ ] [ ]   |
|  | Everyone is clear about any specific responsibilities they have within the process. |[ ] [ ]   |

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|  | **Action Points** | **Yes** | **No** | **Action Required** |
| **2** | **There is an agreed process for scanning documents onto the patient system** |
|  | It is clear who is responsible (including timescales) for scanning documents into the system and how items should be categorised or labelled . |[ ] [ ]        |
|  | There is a system to determine to which clinician a document should be forwarded. *(e.g. named dentist or practice principal.* |[ ] [ ]   |
|  | There are agreed protocols for action when that dentist is unavailable.*(e.g. holidays, sickness absence, part-time hours)* |[ ] [ ]   |
|  | If a locum is reviewing documents, practice protocols are known and understood. |[ ] [ ]   |

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|  | **Action Points** | **Yes** | **No** | **Action Required** |
| **3** | **There is an agreed system for clinicians viewing and processing scanned documents**  |
|  | Clinicians receive notification when documents are forwarded to them. |[ ] [ ]        |
|  | Standards are agreed for reasonable timescales within which documents are viewed. |[ ] [ ]   |
|  | There are agreed protocols to determine to which member(s) of the team actions are forwarded. |[ ] [ ]   |
|  | The detail and urgency level of any required action is clearly documented. |[ ] [ ]   |
|  | There are sufficient actions and flexibility available to the clinicians within the workflow system. |[ ] [ ]   |
|  | If multiple actions are required, these are clearly prioritised for non-clinical staff. |[ ] [ ]   |
|  | Any limitations of the system, including associated risks, are understood by all staff. |[ ] [ ]   |

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|  | **Action Points** | **Yes** | **No** | **Action Required** |
| **4** | **There is a clear system for non-clinical staff actioning documents** |
|  | Staff are notified when actions are forwarded to them. |[ ] [ ]        |
|  | Standards are agreed for reasonable timescales within which routine and urgent actions should be undertaken. |[ ] [ ]   |
|  | Actions taken are clearly documented. |[ ] [ ]   |
|  | There is a mechanism to report back any failure to action a clinical request. |[ ] [ ]   |
|  | Actions requiring future follow-up are diarised for recall at a later date. |[ ] [ ]   |
|  | If an appointment is made for the patient as a result of a workflow action, this is clearly documented in the appointment slot.*(to safety net in the event of a patient cancelling or not attending)* |[ ] [ ]   |

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|  | **Action Points** | **Yes** | **No** | **Action Required** |
| **5** | **There is a clear system for dealing with problems within the workflow process** |
|  | Notification protocols for misfiles and errors in communication and messaging. |[ ] [ ]        |
|  | Individual and team responsibilities are clear in relation to reporting. |[ ] [ ]   |
|  | Individuals use their own secure log-ins at all times so that an audit trail is available for reviewing incidents and identifying training needs. |[ ] [ ]   |