

	practice to reduce the need for escalation.
What sorts of things might make you want to dig deeper?	• No facility in place to enable patients to make a complaint. • No information about how to make a complaint available. • No understanding of where to refer patients if their complaint remains unresolved.

Outcome	21: Records
Are there any key things to be aware of for this outcome in this service?	Approximately one third of providers do not have a computerised records system. Hand-written records may use a lot of abbreviations and be difficult to follow. However, any abbreviations used should be standardised throughout the practice and staff should be able to explain them to you. Records should include an up-to-date medical history.
References for further information	General Dental Council guidance <i>Principles of patient confidentiality</i> http://www.gdc-uk.org/Newsandpublications/Publications/Publications/PatientConfidentiality[1].pdf Faculty of General Dental Practice (FGDP) (UK) http://www.fgdp.org.uk/ Clinical Examination and Record Keeping: Good Practice Guidelines 2nd edition, published 2009
What sorts of things might reassure you?	• A record card audit to check that the right information is recorded. • Accuracy of personal information recorded. • A description of the systems in place for storing patient records – for current and archived records. • A summary of the requests for access to records, disclosures, consent to disclosure and reasons for refusing access. • Medical history forms. • Medical alert highlighted. • Soft tissue examination recorded. • Risk assessment for caries, gum disease, oral cancer. • Recall appointments based on risk assessment (i.e. not all six months).

	• Radiographic justification and report.
What sorts of things might make you want to dig deeper?	• Lack of awareness of the length of time records must be stored. • Observed lack of security around records.