

## Action Plan

Service Name:	Glasgow Alcohol and Drug Crisis Service
Service number:	01595
Service Provider:	Turning Point Scotland
Address:	80 Tradeston Street, Glasgow, G5 8BG
Date Inspection Concluded:	19 September 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p><b>Requirement 1:</b> The provider must notify Healthcare Improvement Scotland of certain matters as noted in the notification guidance and in specified timeframes (see page 22).</p> <p>Timescale – immediate</p>	<ul style="list-style-type: none"> <li>Update of notification guidance matrix under review by organisation</li> <li>Reminder to managers in service of HIS notification guidance</li> <li>Allocated member of staff from Head Office to update organisational updated on HIS portal</li> </ul>	<p>December 2023</p> <p>December 2023</p> <p>Already Complete</p>	<p>Head of Clinical and Care Governance</p> <p>GADCS Service Manager</p> <p>Operations resource coordinator</p>

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<p><b>Requirement 2:</b> The provider must review guidance on seizure management to ensure staff are able to follow clear and specific guidance and allow them to manage these situations safely, including the administration of emergency medication (see page 22).</p> <p>Timescale – immediate</p>	<ul style="list-style-type: none"> <li>• Training for staff on medication administration during seizures</li> <li>• Training for staff on Seizure policy</li> <li>• Update of clinical pathways document and policy</li> </ul>	<p>December 2023</p> <p>December 2023 January 2024</p>	<p>GADCS Service Manager</p> <p>GADCS Service Manager Head of Clinical and Care Governance</p>
<p><b>Requirement 3:</b> The provider must risk assess the availability of hand wash basin and sinks in the domestic services room against current guidance, and a risk based refurbishment plan should be developed to reduce any risks identified to minimise the spread of infection (see page 27).</p> <p>Timescale – by 19 January 2024</p>	<ul style="list-style-type: none"> <li>• Complete risk assessment for cleaners cupboard</li> </ul>	<p>December 2023</p>	<p>GADCS Service Manager</p>
<p><b>Requirement 4:</b> The provider must:</p> <p>(a) <i>only use appropriate cleaning equipment, including single use disposable mop heads, and</i></p> <p>(b) <i>ensure cleaning schedules are accurately and fully complete to demonstrate all cleaning tasks have been carried out (see page 27).</i></p> <p>Timescale – by 19 January 2024</p>	<ul style="list-style-type: none"> <li>• Implement use of disposable mop heads</li> <li>• Audit of cleaning schedules</li> </ul>	<p>Nov 2023</p> <p>Already complete / ongoing</p>	<p>GADCS Service Manager</p> <p>GADCS Service Manager</p>

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<p><b>Requirement 5:</b> The provider must ensure a record is made on the patient care record as closely as possible to the time of the relevant event, of the following matters:</p> <p><i>(c) the date and time of every consultation, with or examination of, the service user by a healthcare professional and the name of the health care professional</i></p> <p><i>(d) the outcome of that consultation or examination, and</i></p> <p><i>(e) details of every treatment provided to the service users including the place, date and time that treatment was provided and the name of the healthcare professional responsible for providing it (see page 28).</i></p> <p>Timescale – by 19 January 2024</p>	<ul style="list-style-type: none"> <li>Review file audit to include prescriber note check</li> <li>Review file audit to include consultation notes</li> </ul>	<p>December 2023</p> <p>December 2023</p>	<p>GADCS Service Manager</p> <p>GADCS Service Manager</p>
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Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p><b>Recommendation a:</b> The service should record the outcomes of all discussions when reviewing its aims and objectives to measure whether these are being achieved (see page 12).</p>	<ul style="list-style-type: none"> <li>Develop review documentation</li> </ul>	<p>March 2023</p>	<p>GADCS Service Manager</p>

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<b>Recommendation b:</b> The service should develop a patient participation policy that includes a structured approach to gathering and analysing feedback to demonstrate the impact of improvement (see page 17).	<ul style="list-style-type: none"> <li>Discuss with senior colleagues the development of an organisational policy</li> </ul>	January 2024	GADCS Service Manager
<b>Recommendation c:</b> The service should develop its systems to ensure it engages and captures feedback from staff on a range of issues (see page 17).	<ul style="list-style-type: none"> <li>Develop staff questionnaire</li> <li>Complete circulation regularly</li> </ul>	Already complete April 2024	GADCS Service Manager GADCS Service Manager
<b>Recommendation d:</b> The service should update its complaints policy and poster with Healthcare Improvement Scotland's contact details and make it clear that patients have the right to contact Healthcare Improvement Scotland at any time (see page 22).	<ul style="list-style-type: none"> <li>Discuss with senior colleagues regarding policy change</li> <li>Senior colleagues updating policy</li> <li>Update all service information</li> </ul>	Already complete  December 2023 January 2024	GADCS Service Manager  Head of Alcohol and Other Drug Services GADCS Service Manager
<b>Recommendation e:</b> The service should ensure that all staff training is up to date and recorded in staff's personnel files (see page 22).	<ul style="list-style-type: none"> <li>Update service training database</li> </ul>	March 2024	GADCS Service Manager
<b>Recommendation f:</b> The service should review and update its infection control policy to ensure it aligns with Healthcare Improvement Scotland's <i>Infection Prevention and Control Standards (2023)</i> (see page 22).	<ul style="list-style-type: none"> <li>Discuss with senior colleagues</li> <li>Policy being reviewed to reflect updated guidance</li> </ul>	Already complete January 2024	GADCS Service Manager Head of Clinical and Care Governance

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<b>Recommendation g:</b> The service should consider reviewing its clinical management and procedures guidance for staff to ensure it is concise and relevant to the service with reference to external guidance as appropriate (see page 22).	<ul style="list-style-type: none"> <li>Update of guidance to be arranged</li> </ul>	November 2023	GADCS Service Manager
<b>Recommendation h:</b> The service should ensure that clear and specific guidance for observations during withdrawal (or assessment for withdrawal) should be developed, this should include frequency, duration and reasons for stopping (see page 28).	<ul style="list-style-type: none"> <li>Review clinical audit to include file audits</li> </ul>	January 2024	GADCS Service Manager
<b>Recommendation i:</b> The service should consider developing a discharge policy with clear guidance on reducing the risks of unplanned discharges (see page 28).	<ul style="list-style-type: none"> <li>Develop SOP for discharges</li> </ul>	June 2024	GADCS Service Manager

Name	<input type="text" value="Jennifer Lang"/>		
Designation	<input type="text" value="Service Manager"/>		
Signature	<input type="text" value="J Lang"/>	Date	<input type="text" value="20 / 11 /2023"/>

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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.

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