

## Action Plan

Service Name:	HealthLink360
Service number:	00502
Service Provider:	HealthLink360
Address:	Elphinstone Wing, Carberry, Musselburgh, EH21 8PW
Date Inspection Concluded:	21 March 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<b>Recommendation a:</b> The service should develop a detailed cleaning schedule for all clinical areas, including details on cleaning tasks and frequency, methods, responsibilities and a system for verifying that cleaning tasks are being carried out appropriately (see page 12).	1) Amend the current cleaning schedule and split out tasks into those to be completed by clinicians, and those to be completed by contract cleaners. Include details of the cleaning tasks to be carried out by the relevant individuals, when and with what frequency. 2) Place a copy in each clinical room, giving details of the specific cleaning tasks as well as when and who is to clean each room at the end of each working day. 3) Explain new system to contract cleaners and clinicians. Require the cleaning schedule to be signed by the responsible individual once cleaning tasks have been completed as per the required regularity. 4) Renew cleaning schedule sheets each week and retain and monitor completed cleaning schedule sheets.	1) 19 <sup>th</sup> May 2023 2) 19 <sup>th</sup> May 2023 3) 19 <sup>th</sup> May 2023 4) From 19 <sup>th</sup> May 2023	1)Office Manager 2)Office Manager 3) Office Manager 4)Office Manager / MD

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:1 of 4	Review Date:
Circulation type (internal/external): Internal/External		

<b>Recommendation b:</b> The service should ensure it refers to the notification guidance when determining timeframes for submitting a notification to Healthcare Improvement Scotland (see page 12).	1) Re-familiarise management team and charity trustees with HIS document ' <i>HIS Notification Guidance</i> '. 2) Include this document and appropriate detail of familiarisation in the induction pack for new employees and new trustees. 3) Annual refresher of HIS Notification requirements for staff and documented in staff training log. 4) New Managing Director's job description to include responsibility for retaining up to date awareness of current HIS regulation about notifications. 5) MD to subscribe to HIS regular emails	1) Next trustee meeting 2) 19 <sup>th</sup> May 2023 3) Ongoing 4) 19 <sup>th</sup> May 2023 5) From commencement in post (1 <sup>st</sup> June 2023)	1) Chair of Trustees and Office Manager 2) Chair of Trustees and Office Manager 3) Managing Director (MD) 4) Chair of Trustees 5) Managing Director
<b>Recommendation c:</b> The service should hold staff meetings for all staff and formally record the minutes of these meetings. These should include any actions taken and those responsible for the actions. Minutes should be shared with all staff (see page 16).	Re-instate regular monthly staff meetings with a pre-circulated agenda. To include standing agenda items eg review of actions from previous meeting(s), health and safety, updates about HIS regulations etc. Attendees to include any staff member in work that day – either in person or by remote access. Minutes, including action points to be circulated and distributed to all staff.	From June 2023 (new MD starts 1 <sup>st</sup> June)	Managing Director
<b>Recommendation d:</b> The service should implement a staff survey and improvement action plan with defined timescales (see page 16).	1) Develop a Smart Survey feedback form (which allows for anonymity) – with both quantitative and qualitative opportunities to respond. Topics to include topics on both aspects of staff engagement and wellbeing as well as observations about quality-of-care delivery and opportunity to provide general suggestions for continuous improvement. Survey to remain open for responses year-round, but staff to be invited to respond at least annually via an announced survey timeframe. Findings to be shared with trustees. 2) Embed the Smart Survey weblink on all internal staff email footers so as to facilitate routine access to the anonymous feedback portal, should staff wish to provide anonymous feedback outside the annual Survey response window. Submissions logged for monitoring	1) By Mid-August 2023  2) From Mid-August 2023  3) Mid-August, annually	1) Office Manager and Managing Director  2) Office Manager and MD  3) MD

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page: 2 of 4	Review Date:
Circulation type (internal/external): Internal/External		

	purposes; responses and follow up overseen by Managing Director. 3)Annual prompt by management team to all staff encouraging each staff member to respond to online survey.		
--	--	--	--

Name	<input type="text" value="Dr Keith Russell"/>
Designation	<input type="text" value="Responsible Person"/>
Signature	<input type="text" value="Keith J Russell"/>
Date	<input type="text" value="04 / 05 / 2023"/>

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.

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:3 of 4	Review Date:
Circulation type (internal/external): Internal/External		

- **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.

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:4 of 4	Review Date:
Circulation type (internal/external): Internal/External		