

Action Plan

Service Name:	House of Ikigai
Service number:	00700
Service Provider:	Kevin Kit
Address:	40 Millhill Street, Dunfermline, KY11 4TG
Date Inspection Concluded:	30 August 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must ensure that all healthcare professionals employed in the service are not included on the adults' list in the Protection of Vulnerable Groups (Scotland) Act 2007 (see page 18). Timescale – immediate	Currently in the process	Completed by December 2023	Clinic Manager



Requirement 2: The provider must notify Healthcare Improvement Scotland of specific events that occur in its premises, as required in Healthcare Improvement Scotland's notification guidance (see page 18). Timescale – immediate	This is the policy to do so	Complete by December 2023	Clinic Manager
Requirement 3: The provider must develop, implement and maintain a risk register to ensure effective oversight of how the service is delivered (see page 20). Timescale – immediate	Will have this created and enforced, with schedule and timetable	Complete by December 2023	Clinic Manager
Requirement 4: The provider must ensure patients' GP details, next of kin or emergency contact details are documented appropriately in patient care records. If the patient refuses to provide this information, this should also be documented (see page 22). Timescale – immediate	Have been contacting all clients since inspection for the last few months	Complete by December 2023	Clinic Manager



Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Recommendation a: The service should have a formal schedule of planned staff meeting dates to ensure staff can attend and can contribute in advance to the agenda (see page 13).	Will begin a process of formally recording all meetings	January 2024	Clinic Manager
Recommendation b: The service should develop and implement an information management policy to ensure the confidentiality of patient and staff information (see page 18).	Already in place	November 2023	Clinic Manager
Recommendation c: The service should develop a chaperone policy to ensure patient safety in the service (see page 19).	Already in place	November 2022	Clinic Manager
Recommendation d: The service should ensure that all policies reflect Scottish legislation and best practice guidance (see page 19).	Already added these to policies	November 2023	Clinic Manager



Recommendation e: The service should ensure the correct details for patients to complain to Healthcare Improvement Scotland are included on its website (see page 19).	Already in place	November 2023	Clinic Manager
Recommendation f: The service should develop a more detailed programme of regular audits to cover key aspects of care and treatment such as infection prevention and control, the clinic environment and patient care records. Audits must be documented and improvement action plans implemented (see page 20).	Will begin a process of formally recording all meetings, and plans	February 2024	Clinic Manager
Recommendation g: The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvement (see page 20).	Will begin a process of formally recording all meetings, and plans	February 2024	Clinic Manager
Recommendation h: The service should record patient consent for sharing information with their GP and other medical staff in an emergency, if required, in patient care records (see page 23).	Now in place	November 2024	Clinic Manager



Recommendation i: The service should ensure it carries out a psychological assessment on all patients to ensure their expectations are managed appropriately (see page 23).	Will add this to screening process in the consultation and assessment.	February 2024	Clinic Manager

Name	Varia Vit			
Designation	Clinic Managor			
Signature		Date	09/11/2023	
In signing this	s form, you are confirming that you have the authority t	o complete it on be	ehalf of the service provider.	

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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.