

Action Plan

Service Name:	Moving Minds
Service Number:	01764
Service Provider:	Moving Minds Ltd
Address:	8 Sandyford Place, Glasgow, G3 7NB
Date Inspection Concluded:	03 August 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must ensure that a system is in place to confirm that all non-clinical equipment is maintained and serviced regularly to reduce any risk to service users (see page 10). Timescale – immediate	The non clinical equipment was removed from the clinic after discussing in with the landlord of the building.	Done	Krishna Rohatgi
Requirement 2: The provider must ensure that all staff roles are risk assessed to make sure that appropriate Disclosure Scotland background checks are completed before staff are employed or granted practicing privileges to work in the service. A process should also be in place to obtain a PVG update for all staff at regular intervals. This will ensure that staff remain safe to work in the service (see page 13). Timescale – immediate	Service registered with PVG so regular update of staff can be made to make sure the environment is safe for the patient.	Done	Natalia Gaki

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Recommendation a: The service should update its patient information for handling complaints with up-to-date Healthcare Improvement Scotland contact details and make it clear that patients can contact Healthcare Improvement Scotland at any time to raise a complaint (see page 7).	Updated details of how to raise a complaint were implemented. Service made sure that all contact details are up to date and accessible to patient.	Done	Natalia Gaki
Recommendation b: The service should update its participation policy to include how it will inform patients how their feedback has been used to improve the service (see page 8).	New recommendations are implemented. Service would inform patients of any actions taken as a result of their feedback. Also, participation policy is under review and relevant information are updated in order to provide information to patient how their feedback would be handled and review for the service.	In progress by 29.11.2023	Natalia Gaki
Recommendation c: The service should update its incident reporting policy to outline its responsibilities to notify Healthcare Improvement Scotland of any incident outlined in the Independent Healthcare Regulation Notifications Guidance (see page 9).	New recommendations are implemented. Service is working on updating with relevant information incident reporting policy and outline responsibilities which needs to be outlined to Healthcare Improvement Scotland.	By 17.10.2023	Natalia Gaki
Recommendation d: The service should comply with national guidance to make sure that the appropriate cleaning products are used for the cleaning of sanitary fittings, including the clinical wash hand basin (see page 10).	New recommendations are in progress of implementation. Appropriate cleaning products have been ordered. Also, service is working on incorporating the effective system that will process proactive management of risks to patients and staff, monitor the quality of and safety of the service.	By 26.10.2023	Natalia Gaki

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Recommendation e: The service should ensure that all policies are reviewed and in line with Scottish legislation (see page 11).	New recommendations are in progress of implementation. Services is reviewing and making necessary changes to policies and making sure that all policies are relevant to Scottish Legislation. Service is working on improving regular audits and staff meeting and cover key aspect of running of the cleaning and safety of patients.	By 19.12.2023	Natalia Gaki
Recommendation f: The service should review the patient care records to ensure a structured and organised approach is used to file documentation (see page 12).	New recommendations are in progress of implementation. Service is working on a new way to organise and store patients record with are relevant to with requirements.	In progress	Natalia Gaki
Recommendation g: The service should develop a formal annual training programme for staff and record all staff training in staff's personnel files (see page 13).	New recommendations are in progress of implementation. Services is working on implementing the best annual training program and keep all the staff records updated and in safe place. Training will be tailored to individual needs of employees as to regards of the service that they provide.	19.12.2023	Natalia Gaki/ Krishna Rohatgi

Name	Natalia Gaki		
Designation	Office Manager		
Signature	Natalia Gaki	Date	19 / 09 /2023

Guidance on completing the action plan.

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- **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 the timescale for completion is immediate. If you identify a requirement/recommendation timescale that you feel needs to be extended, include the reason why.
- Please do not name individuals or an easily identifiable person in this document. Use Job Titles.
- If you have any questions about your inspection, the requirements/recommendations or how to complete this action plan, please contact the lead inspector.

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