

Action Plan

Service Name:	Nadcell Mindcare Limited
Service number:	02252
Service Provider:	Nadcell Mindcare Limited
Address:	14 Newton Terrace, Glasgow, G3 7PJ
Date Inspection Concluded:	09 May 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must review and update its medication and prescribing policies and standard operating procedure to ensure each one accurately reflects practice in the service (see page 12). Timescale – immediate	Medication and prescribing policies have been updated.	Completed	Company Director

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
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Recommendation a: The service should consider a variety of additional psychosocial-based therapies as part of a recovery-focused treatment plan (see page 9).	1. Service will update information leaflets with additional services that may be of benefit to the client including self help materials. 2. Practitioner will discuss discharge plan and signpost and document in clinical notes 3. Information will be given to clients on discharge with the details of a recommended psychotherapist who can be contacted following treatment to discuss any psychological therapies that may be suitable. The client will engage directly with the psychotherapist.	End July 2023	Company Director
Recommendation b: The service should explore support groups and appropriate referral routes for patients travelling to the service from distant locations (see page 9).	The practitioner providing the treatment will provide a list of support groups in the clients particular area on discharge from the clinic.	1.7.23	Company Director
Recommendation c: The service should develop a process of informing patients about how their feedback has been addressed and used to help improve the service (see page 9).	1. Service will develop the website to include feedback and actions taken in response to feedback to demonstrate meaningful engagement with clients.	End August 2023	Company Director
	2. Quality strategy will be available for clients which will outline plans for improving service involving previous feedback from clients	October 2023	Company Director
Recommendation d: The service should consider developing a policy for addressing the particular needs of patients who are being treated by the service and who are not supported by their family or other support network during that time (see page 12).	1. Prescribing Policy and SOPs will be reviewed and changed in respect of clients who are being treated who do not have support out with the clinic. Particular emphasis will be on clinical risk assessment and determining suitability for treatment. Clinical notes will document have a record of the assessment and the decision making. 2. Discharge letters will be provided for clients to take to their GP	End July 2023	Company Director
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	3. Specific risk assessment will be carried out and documented by the practitioner in respect of recent high risk mental health and physical health issues or any current memory impairment to determine suitability of treatment with no support from a buddy or family member.		
Recommendation e: The service should document in patient care records if consent to share information with the patient's GP and other medical staff is not given, the risk associated if it was not shared and any reason or justification for the decision to prescribe (see page 14).	Immediate action taken. Clinical notes now recording discussion with client and outlining risks for client if client suitable for treatment but not wishing contact with GP	Action completed	Company Director
Recommendation f: The service should consider if it is safe to provide treatment for alcohol detoxification in the absence of obtaining medical records from the patient's GP and, if treatment is provided, this should be in line with General Medical Council guidance (see page 14).	1.The service will endeavour to obtain medical records and document action taken. 2.The service will endeavour to obtain and NHS email to aid communication with GP practices and other healthcare providers if required. 3. Clinical notes will have a record of clinical decision making in respect of prescribing. Prescribing policy will be updated accordingly.	End July 2023	Company Director
Recommendation g: The service should consider implementing routine biochemistry and haematology investigations as part of patients' care and treatment for alcohol detoxification and relapse prevention. If these are not carried out, a clear rationale should be documented in the patient care record (see page 14).	The service will provide facilities to clients for routine blood investigations prior to treatment. If client refuses, clinical rationale for continuing with treatment will be recorded. Prescribing policy will be updated accordingly.	End July 2023	Company Director

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Recommendation h: The service should ensure that patient care records are fully completed (see page 14).	Actioned. Care plan audits will capture the effectiveness of recording in clinical are notes	Action completed	Company Director
Recommendation i: The service should expand the range of information audited as part of the patient care record audit (see page 14).	Audit paperwork will be reviewed and adjusted accordingly to capture all critical aspects of the clients information and treatment	End July 2023	Company Director
Recommendation j: The service should develop and implement a quality improvement plan to demonstrate and direct the way it measures improvement (see page 16).	1.Service Improvement plan will be implemented 2.Annual quality strategy will be implemented to build upon the service improvement plan as the service evolves and responds to quality information gathered.	End July 2023	Company Director

Name

Designation

Signature

Date

In signing this form, you are confirming that you have the authority to complete it on behalf 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.

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