

## Action Plan

Service Name:	YourGP
Service number:	00559
Service Provider:	YourGP Group Ltd
Address:	Waterside House, 19 Hawthornbank Lane, Edinburgh, EH4 3BH
Date Inspection Concluded:	12 December 2022

Requirements and Recommendations	Action Planned	Timescale	Responsible person
<b>Requirement 1:</b> The provider must ensure that the controlled drug ordering book is locked away securely and accessed only by authorised staff (see page 12).  Timescale – immediate	Meeting with reception team took place on 23.02.23, in which Operations Manager explained to the team that the safe must remain locked at all times.	Complete	Emma McKay (Operations Manager)
<b>Requirement 2:</b> The service should ensure that appropriate cleaning products are used for the cleaning of all sanitary fittings, including clinical wash hand basins, in line with national guidance. The service should risk assess the continued use of non-compliant clinical hand wash basins (see page 13).  Timescale – immediate	Risk assessment to take place on clinical hand wash basins and cleaning products to be replaced accordingly, with information shared with relevant team members and the cleaning company contracted by the practice.	End of March 2023	Laurie Dunsire (Practice Manager), Emma McKay (Operations Manager)

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<b>Requirement 3:</b> The provider must appoint a medical lead to provide effective clinical oversight and leadership to medical staff and medical services offered by the service (see page 19).  Timescale – by 13 June 2023	Practice Manager to discuss clinical lead requirements with HIS on 15.03.23 and to then follow up with company directors about filling this position. Clinical lead to then be appointed.	June 2023	Laurie Dunsire (Practice Manager)
<b>Recommendation a:</b> The service should ensure all clinical staff are trained in the principles of duty of candour and consent (see page 9).	Practice Manager to review clinical staff matrix and begin process of updating training records; either by arranging for training for staff who have not been given recent duty of candour training, or by sourcing evidence from those who have in separate organisations (such as the NHS).	June 2023	Laurie Dunsire (Practice Manager)
<b>Recommendation b:</b> The service should follow national guidance for the selection and use of gloves (see page 13).	Operations Manager to ensure stock orders of gloves are only for those that meet national guidance.	End of March 2023	Emma McKay (Operations Manager)
<b>Recommendation c:</b> The service should ensure develop a programme of regular audits to cover key aspects of care and treatment. Audits must be documented and improvement action plans implemented (see page 13).	Practice Manager and Operations Manager to work on a programme of audits and to have these implemented and at least a schedule drafted by June 2023.	June 2023	Laurie Dunsire (Practice Manager), Emma McKay (Operations Manager)
<b>Recommendation d:</b> The service should review the shared care protocols and include more detail so the responsibilities of all parties involved in a shared care pathway agreement are clear (see page 15).	Practice Manager to review current shared care protocols with wider gender team and to ensure a sufficient level of detail is included on the responsibilities of each party within these.	End of March 2023	Laurie Dunsire (Practice Manager)

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<b>Recommendation e:</b> The service should ensure that the patients' emergency contact, GP and allergy information are documented in the patient care record or a reason given (see page 15).	Practice Manager to review process for process for obtaining patient information is appropriate to capture the data outlined by HIS, and to make any necessary changes as well as sharing these with the wider team as required.	June 2023	Laurie Dunsire (Practice Manager)
<b>Recommendation f:</b> The service should retain occupational health records, including immunisation status, for all staff recruited and employed in the service (see page 16).	Practice Manager to review staff matrix and ensure relevant gaps when it comes to immunisation status are filled.	June 2023	Laurie Dunsire (Practice Manager)
<b>Recommendation g:</b> The service should retain records of ongoing training undertaken by staff under a practicing privileges arrangement (see page 16).	Practice Manager to review clinical staff matrix and to fill any gaps with training information as recommended.	June 2023	Laurie Dunsire (Practice Manager)
<b>Recommendation h:</b> The service should develop and implement a staff survey to actively seek the views of staff working within the service (see page 19).	Practice Manager to create a staff survey system and to implement this on regular intervals to obtain feedback from existing employees.	June 2023	Laurie Dunsire (Practice Manager)
<b>Recommendation i:</b> The service should develop a quality improvement plan to formalise and direct the way it drives and measures improvement (see page 19).	Practice Manager to create a quality improvement plan and update this as an ongoing task.	June 2023	Laurie Dunsire (Practice Manager)

Name	<input type="text" value="Laurie Dunsire"/>	
Designation	<input type="text" value="Practice Manager"/>	
Signature		
		Date
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07 / 03 / 2023

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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