

Action Plan

Service Name:	Murdostoun - Brain Injury Rehabilitation Centre
Organisation Number:	01920
Service Provider:	Active Neuro Limited
Address:	Murdostoun Castle, Newmains, Wishaw, ML2 9BY
Date Inspection Concluded:	04 March 2025

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must ensure that external clinical waste bins are kept locked at all times (see page 25).</p> <p>Timescale – immediate</p> <p><i>Regulation 3(d) (ii)</i> <i>The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p> <p>This was previously identified as a requirement in the March 2023 inspection report for Murdostoun - Brain Injury Rehabilitation Centre.</p>	<p>Daily checks by maintenance team to ensure bins are locked.</p> <p>Email send to all staff reminding them that they must lock the bins after use</p> <p>Audit on monthly basis as part of the IPC audit</p>	<p>Immediate</p> <p>Immediate</p> <p>Immediate</p>	<p>Ronnie Holbourn</p> <p>Michael Sneddon</p> <p>Service auditors</p>

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:1 of 5	Review Date:
Circulation type (internal/external): Internal/External		

Requirement 2: The provider must ensure that all legal documentation regarding DNACPR and Adults with Incapacity Act are fully completed and easily accessible (see page 29). Timescale – immediate Regulation 4(3)(b) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011	DNACPR & AWI - new audit process introduced through patient review.	Immediate	Paula Gribben
	Alerts added to care notes to action review of paperwork and MDT discussion to ensure remains relevant.	Immediate	Paula Gribben and Nursing staff
Requirement 3: The provider must improve the standard of record keeping in the patient care record to ensure they are easily accessible and updated when there is a change in the delivery of care. All records must be accurately completed, dated and signed by the healthcare professional (see page 29). Timescale – immediate Regulation 4 (2) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011	1:1 data will be summarised by AP and a weekly entry into care notes.	Immediate	Assistant Psychology staff
	Support workers write in notes summarising day's 1:1support.	Immediate	Support staff
	Named person for archiving paper notes and weekly review paperwork and highlighting incomplete paperwork.	Immediate	Paula Gribben
	Devise own notes audit looking at clinical standards. This will take time to develop in line with the service overall strategic plan	31/07/2025	Paula Gribben

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:2 of 5	Review Date:
Circulation type (internal/external): Internal/External		

<p>Recommendation a: The service should update its infection control policy to reference Healthcare Improvement Scotland's Infection prevention and control standards 2022 and National Services Scotland's national infection control manual (see page 22).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.11</p>	<p>Service to add to the current SIPC with local information relating Healthcare Improvement Scotland</p>	<p>31/05/2025</p>	<p>Paula Gribben</p>
<p>Recommendation b: The service should review the patient care record records and expand the range of information audited as part of the patient care audit to ensure that documentation was organised and in a clear and structured way (see page 29).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19</p> <p>This was previously identified as a recommendation in the March 2023 inspection report for Murdostoun - Brain Injury Rehabilitation Centre.</p>	<p>Devise own notes audit looking at clinical standards.</p> <p>Review all paperwork within service to ensure it is relevant and current for patients as part of the overall service plan</p>	<p>31/07/2025</p> <p>31/10/2025</p>	<p>Paula Gribben</p> <p>Paula Gribben</p>
<p>Recommendation c: The service should ensure communication with all staff regarding infection prevention and control issues is robust and consistent (see page 29).</p>	<p>Any information relating to patients well being including IPC issues will be relayed through the handover to all staff at the beginning of each shift</p>	<p>Immediate</p>	<p>Nursing staff</p>
<p>File Name: IHC Inspection Post Inspection - Action Plan template AP</p>		<p>Version: 1.1</p>	<p>Date: 8 March 2023</p>
<p>Produced by: IHC Team</p>		<p>Page:3 of 5</p>	<p>Review Date:</p>
<p>Circulation type (internal/external): Internal/External</p>			

Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.11			
Recommendation d: The service should ensure that all staff have the appropriate training in line with the provider's observation policy (see page 29). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.14	The service will seek training in this area firstly from the internal organisation, if none available from external sources. If still none available the service will devise training for the staff	31/07/2025	Paula Gribben

Name	Michael Sneddon	
Designation	Hospital Director	
Signature	<i>M sneddon</i>	
		Date 02/05/2025

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:4 of 5	Review Date:
Circulation type (internal/external): Internal/External		

- **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.

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:5 of 5	Review Date:
Circulation type (internal/external): Internal/External		