

Action Plan

Service Name:	The Medical Suite Scotland
Service number:	00807
Service Provider:	The Medical Suite Scotland
Address:	25 Blythswood Square, Glasgow G2 4BL
Date Inspection Concluded:	06 December 2021

Requirements and Recommendations	Action Planned	Timescale	Responsible person
Requirement 1: The provider must implement a suitable system to regularly review the quality of the service.	Meetings AM and PM. AG & AW check telephone calls, hospital referrals, hospital reports, prescriptions, client updates, blood results & AOB. Feedback cards given to clients. Regular liaisons with hospital colleagues.	In place	AG AW
Recommendation a: The service should develop a programme of regular audits to cover key aspects of care and treatment. Audits should be documented and improvement action plans implemented.	1 Audit weekly. A Fridge temperature, B Cleaning, C Stock. 2 Medical audit. A Lipids 2021 B PSA 2022/GMC.	In place	AG AW
Recommendation b: The service should develop and implement an adult support and protection policy.	Action plan emailed to Hazel Walker Dec 2021.	In place	AG

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Recommendation c: The service should ensure that discussion around consent to treatment, implied or otherwise, is documented in all patient care records, in line with the service's consent policy.	Clients signature obtained for bloods & hospital referrals in their medical forms.	In place	AG
Recommendation d: The service should ensure that staff receive opportunities for learning and development relevant to their role.	AW on-line courses to be done. Supervision and Learning & Development policy in place.	In place	AG AW
Recommendation e: The service should develop and implement a quality improvement plan to formalise and direct service improvement.	A Medical audits PSA Lipids. B Client feedback. C Admin staff as stated in D above. D Office audits cleaning, stock, fridge temperature.	In place	AG
Recommendation f: The service should formally record the minutes of meetings. These should include a documented action plan highlighting those responsible for the actions.	Daily meetings AM and PM minuted.	In place	AG AW
Recommendation g: The service should introduce a structured system for reviewing its policies and procedures on a regular basis or when changes occur to ensure they are in line with current legislation and reflect the service provided.	Policies and procedures reviewed every three months.	In place	AG

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Recommendation h: The service should develop a more structured approach for gathering, recording and evaluating patient feedback, and using the outcomes to drive improvements in the service.	Client feedback cards studied – No problems AG communicates with clients on a regular basis re hospital and treatment outcomes.	In place	AG
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Name	Dr Anne Gillespie		
Designation	Director		
Signature	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; width: 300px; height: 100px; position: relative;"> <div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%) rotate(45deg); font-size: 40px;">X</div> </div> <div style="text-align: right;"> Date <input style="width: 150px;" type="text" value="26/01/2022"/> </div> </div>		
In signing this form	<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; align-items: center;"> <div style="border-bottom: 1px solid black; width: 200px; margin-right: 10px;"></div> <div> Dr Anne Gillespie Director </div> </div> </div>		

complete it on behalf of the service provider.