

## **Action Plan**

Service Name:	Thistle Occupational Health	
Service Number:	01687	
Service Provider:	Thistle Occupational Health Ltd	
Address:	1 Thistle Road, Dyce, Aberdeen, AB21 0NN	
Date Inspection Concluded:	09 May 2023	

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Recommendation a: The service should produce and publish an annual duty of candour report (see page 8).	A notice has been placed prominently in the clinic waiting area for all service users to view using the HIS template.	Implemented Already (June 23)	Operations Director

Requirements and Recommendations		Action Planned	Timescale	Responsible Person
Recommendation b: The service should ensure a risk assessment is carried out for the non-compliant clinical hand wash sink to ensure appropriate actions are taken to minimise any risks from splash contamination (see page 10).	Curre befo	Assessment has been updated to reflect. ently going through clinical governance review re being finalised with any communication and ing requirements to staff.	July 23	Operations Director
Recommendation c: The service should				Operations Director
document patients' GP details, next of kin				
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and emergency contact details in the patient care record. Consent to share information with their GP or other healthcare professionals should also be documented in the patient care record (see page 12).	Amendment to patient medical consent form to capture next of kin & emergency contact details. Will be implemented following clinical governance and quality control review.	Aug 23	
Recommendation d: The service should review the pre-employment procedure and the information requested for new members of staff in line with the Scottish Government's Safer Recruitment through Better Recruitment guidance (2016) (see page 13).	Recruitment policy to be reviewed within agreed timescale or prior to any future employee recruitment.	Aug 23	Operations Director

Name	Iain Donaldson		
Designation	Operations Director		
Signature	full	Date 02 /07 /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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