

Action Plan

Service Name:	Glasgow Medical Rooms
Service number:	00606
Service Provider:	PAMM Healthcare Limited
Address:	Glasgow Medical Rooms, 211 St Vincent Street, Glasgow, G2 5QY
Date Inspection Concluded:	23 July 2025

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must ensure that the medicines management policy accurately reflects how the service is delivered to ensure the safe management of medicines (see page 20).</p> <p>Timescale – immediate</p> <p><i>Regulation 3(d)(iv)</i> <i>The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>	<p>The Medication and Controlled Drugs Policy has been fully reviewed and rewritten</p> <p>The emergency drugs list was reviewed. Midazolam 10mg/2ml injection was removed as it was deemed unnecessary for the setting. Buccal and rectal alternatives remain in place.</p> <p>The revised policy was signed off by the Practice Owner.</p> <p>All relevant clinical and administrative staff have been made aware of the changes.</p>	Immediate	Dr Sheila O'Neill/Nicola Keane

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<p>Requirement 2: The provider must implement a system to ensure that:</p> <p>(a) it has access to relevant information from the patient's primary care healthcare record before prescribing controlled drugs or medicines that are liable to abuse, overuse or misuse, or when there is a risk of addiction, and</p> <p>(b) all relevant information about the consultation and treatment is shared with the patients NHS GP when the consultation/episode of care is completed (see page 25).</p> <p>Timescale – immediate</p> <p><i>Regulation 3(a) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>	<p>A system has been introduced to ensure that no controlled drugs or high-risk medicines are prescribed without adequate access to the patient's NHS GP record or a valid, recent GP summary</p> <p>If access to records is not available, Dr O'Neill will withhold prescribing until relevant history is obtained, or limit prescribing to a short-term supply only, clearly documenting rationale and advising the patient to consult their GP.</p> <p>This protocol has been included in the updated Prescribing and Medicines Policy and reviewed with all prescribing clinicians.</p>	<p>Immediate</p>	<p>Dr Sheila O'Neill/Nicola Keane</p>
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<p>Requirement 3: The provider must ensure that private prescription forms for schedule 2 and 3 drugs are not used by any other prescriber (see page 25).</p> <p>Timescale – immediate</p> <p><i>Regulation 3(d)(iv)</i> <i>The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>	<p>Dr O'Neill is the sole authorised prescriber of Schedule 2 and 3 controlled drugs within the practice.</p> <p>This change has been implemented with immediate effect, in full compliance with inspection findings and controlled drug regulations.</p>	<p>Immediate</p>	<p>Dr Sheila O'Neill/Nicola Keane</p>
<p>Requirement 4: The provider must ensure that patients GP details and any patient allergies are documented in the patient record (see page 25).</p> <p>Timescale – immediate</p> <p><i>Regulation 4(1)</i> <i>The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>	<p>The patient registration form now includes mandatory fields for:</p> <ul style="list-style-type: none"> • GP name and practice address • Known drug and non-drug allergies, including a tick-box for no known allergies) <p>Staff have been instructed to verify GP details at the time of booking or registration and to request this information again during the consultation if missing.</p>	<p>Immediate</p>	<p>Nicola Keane</p>
<p>Recommendation a: The service should develop formalised aims and objectives with measurable key performance indicators to help monitor how well the service is being delivered (see page 14).</p>	<p>KPI Dashboard created for use</p>	<p>Immediate</p>	<p>Nicola Keane</p>

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Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19			
<p>Recommendation b: The service should record actions arising from practice manager and owner meetings to ensure that decisions are captured and actions are trackable (see page 15).</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>	Regular governance or operational meetings between the Practice Manager and Owner are further scheduled and will be captured more with actions	Immediate	Dr Sheila O'Neill/Nicola Keane
<p>Recommendation c: The service should review the contents of the emergency drug box and ensure that only drugs appropriate for use in an emergency situation in the clinic are stocked (see page 20).</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>	We have fully reviewed the contents of the emergency drug box to ensure that only drugs appropriate for emergency use in a clinical setting are stocked. This will continue to be monitored and updated as part of ongoing clinical governance.	Immediate	Dr Sheila O'Neill/Nicola Keane

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<p>Recommendation d: The service should further develop its risk register to include clinical and business risks to demonstrate the proactive management of risks to patients, staff and the service (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 4.19</p>	<p>The risk register has been reviewed and updated to incorporate both clinical risks (e.g., medication safety, infection control) and business risks (e.g., data security, staffing, financial risks).</p>	<p>Immediate</p>	<p>Nicola Keane</p>
<p>Recommendation e: The service should further develop the patient care record audit to provide assurance on the content and quality of the patient care record (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 4.19</p>	<p>The patient care record audit has been expanded to include specific criteria focusing on the completeness, accuracy and clinical relevance of records.</p>	<p>Immediate</p>	<p>Nicola Keane</p>

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<p>Recommendation f: The service should further develop the quality improvement plan to formalise and direct the way it drives and measures improvement (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 4.19</p>	<p>Our QI plan has been re-established to provide a structured framework for driving and measuring service enhancements.</p>	<p>Immediate</p>	<p>Nicola Keane</p>
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Name	<input type="text" value="Nicola Keane"/>
Designation	<input type="text" value="Practice Manager"/>
Signature	<input type="text" value="Nicola Keane"/> <div style="margin-left: 200px;">Date <input type="text" value="02 / 09 /2025"/></div>

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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