

Action Plan

Service Name:	Ardgowan Hospice	
Organisation Number:	00043	
Service Provider:	Ardgowan Hospice Limited	
Address:	12 Nelson Street, Greenock, PA15 1TS	
Date Inspection Concluded:	07 August 2025	

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must update the risk assessment for the clinical and non-clinical hand wash basins in the service to comply with Health Protection Scotland's national infection prevention and control guidance until they can be upgraded as part of a future refurbishment plan (see page 25). Timescale – immediate Regulation 3(d)(i) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011	The Risk Register was discussed during the Inspector's visit and amended at that time.	Completed	CEO

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the rest of the storage room. This has overcome the initial problem with access to the fire panel. A numbered keypad lock has been placed on the door to the medicine storage room.	Completed	Ward Manager
Work on this has begun to ensure that all volunteers have access to the same (relevant) training modules as staff, if their role requires it. A new set of volunteer mandatory training modules is being designed and will be implemented across all new &	March 2026	Volunteer Co- ordinator
existing volunteers within the next six months		
A request for this has been made to Vantage (the system we used to record incidents) and will be included in their next update.	October 2025	PA to the CEO
	initial problem with access to the fire panel. A numbered keypad lock has been placed on the door to the medicine storage room. Work on this has begun to ensure that all volunteers have access to the same (relevant) training modules as staff, if their role requires it. A new set of volunteer mandatory training modules is being designed and will be implemented across all new & existing volunteers within the next six months A request for this has been made to Vantage (the system we used to record incidents) and will be	the rest of the storage room. This has overcome the initial problem with access to the fire panel. A numbered keypad lock has been placed on the door to the medicine storage room. Work on this has begun to ensure that all volunteers have access to the same (relevant) training modules as staff, if their role requires it. A new set of volunteer mandatory training modules is being designed and will be implemented across all new & existing volunteers within the next six months A request for this has been made to Vantage (the system we used to record incidents) and will be

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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 4.14			
Recommendation c: The service should develop a process of documenting expiry dates of all medicines and single-use equipment (see page 28). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19	The initial audit has been completed, with monthly checks now being made. A quarterly audit has been established	Completed	Ward Manager
Recommendation d: The service should develop a format for recording all staff one-to-one meetings with their line manager (see page 28). Health and Social Care Standards: My support, my life. I have confidence in the people who support and care for me. Statement 3.14	This is being discussed at the next managers' meeting to be held on 25th September 2025, with the expectation that it will start from meetings in October 2025 onwards	October 2025	CEO

Name	Graham Gardiner				
Designation	CEO				Ц
Signature			Date	22nd Sent 2025	
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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 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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