

Action Plan

Service Name:	Nuffield Health Edinburgh Hospital
Service number:	00079
Service Provider:	Nuffield Health
Address:	40 Colinton Road, Edinburgh, EH10 5BT
Date Inspection Concluded:	5 September 2025

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Recommendation a: The service should share improvements or actions taken as a result of feedback with people using the service (see page 17). Health and Social Care Standards: My support, my life. I have confidence in the	We have considered how best to share service improvements on back of this recommendation and have put in place a system whereby feedback is shared on the patient facing 'Boomerang Board' in the hospital's main reception area. Being digital this board provides the opportunity for the service to provide updates on actions taken based on current service user feedback.	October 2025	Kenneth Hay / Erin McAndrew
organisation providing my care and support. Statement 4.8			

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Recommendation b: The service should implement a formal process for clinical supervision of trained staff (see page 21). Health and Social Care Standards: My support, my life. I have confidence in the people who support and care for me. Statement 3.14	The hospital will introduce a Clinical Supervision Policy to support professional development, reflective practice, and patient safety following consultation with the Central Clinical Quality Team and hospital staff to ensure the policy aligns with national standards and local needs. It will set clear expectations for supervision, provide support for clinical mentors, and promote a culture of continuous learning.	December 2025	Kenneth Hay / Justin Du Plessis
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Name	Kenneth Hay			
Designation	Hospital Director			
Signature		Date	20 / 10 / 2025	

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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