

Action Plan

Service Name:	Waterfront Private Hospital
Service number:	02040
Service Provider:	Waterfront Private Hospital Ltd
Address:	Waterfront Private Hospital, 1 Waterfront Park, Edinburgh, EH5 1SD
Date Inspection Concluded:	13 August 2025

Action Planned	Timescale	Responsible Person
Practicing Privileges contracts are issued to all	October	Hospital Director
1	2025	
The spream ring is provided in		
		Practicing Privileges contracts are issued to all consultants working at the Waterfront Private October 2025

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Recommendation a: The service should keep a record of all meetings with staff to capture discussions, actions and outcomes (see page 13). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19	Discussion was held between Practice Manager and Clinical Lead regarding documentation of team meetings. [24/09/2025] Recommendation will be implemented at the next scheduled administrative team meeting.	End of 2025	Practice Manager(s)
Recommendation b: The service should implement a structured approach to analysing all patient feedback to help continually improve the service (see page 15). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.8	Revision of reviewing process to be held by Clinical Lead and responsible personnel.	Q1 2026	Clinical Lead/Manager

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Recommendation c: The service should develop and implement a process to actively seek the views of staff working within the service (see page 15). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19	Staff feedback platform to be designed and implemented.	Q1 2026	Hospital Support
Recommendation d: The service should develop its own systems and processes and implement clinical supervision of trained staff, including formal recording of it (see page 19). Health and Social Care Standards: My support, my life. I have confidence in the people who support and care for me. Statement 3.14	To develop systems and processes for clinical supervision of trained staff.	Q2 2026	Clinical Lead & Hospital Director

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Recommendation e: The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvement (see page 22). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19	Consolidate current quality improvement projects in line with recommendations.	Q1 2026	Hospital Support
Recommendation f: The service should securely destroy original Disclosure Scotland PVG records in line with current legislation and implement a system to record PVG scheme identification numbers for all staff (see page 27). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.24	Securely destroy original Disclosure Scotland PVG records in line with current legislation, and document identification numbers.	October 2025	Clinical Lead/Manager

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Recommendation g: The service should ensure that a recruitment checklist is introduced and followed for all staff to ensure that the appropriate checks take place before and immediately after staff are recruited and begin working in the service (see page 27).	Consolidate and implement standardised recruitment checklist.	Q1 2026	Clinical Lead/Manager, Practice Manager
Health and Social Care Standards: My support, my life. I have confidence in the people who support and care for me. Statement 3.14			

Name	Oksana Semionova			
Designation	General Manager/Clinical Lead			
Signature	G	Date	24 / 09 / 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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