

## Action Plan

Service Name:	Glasgow Alcohol and Drug Residential Recovery Service - Stabilisation
Service number:	01752
Service Provider:	Turning Point Scotland
Address:	112 Commerce Street, Glasgow, G5 8DW
Date Inspection Concluded:	3 November 2025

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<b>Requirement 1:</b> The provider must ensure that medication is stored appropriately (see page 24).  Timescale – immediate  Regulation 3 The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011	The medication found to be frozen during inspection has been removed from the fridge and this action has now been completed.  Nursing staff have been reminded to check fridge temperatures and service will add that during this check they will check inside the fridge to ensure no damage has taken place.  Senior nurse will continue to check this during her monthly audit of the checks to ensure that fridge temperature checks have been completed and if required an action plan will be developed	Immediately  Dec 25  On-going	Alison  Alison will add to the check – Nursing team will complete check.  Alison

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<p><b>Requirement 2:</b> The provider must ensure that service user care records are fully completed (see page 29).</p> <p>Timescale – immediate</p> <p>Regulation 4 The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p> <p>This was previously identified as a requirement in the November 2023 inspection report for Glasgow Alcohol and Drug Residential Recovery Service - Stabilisation.</p>	<p>ASC will continue to complete their monthly service user file and database audits – this will include ensuring that there is support plans, risk assessments, etc in place.</p>	On-going	ASCs
	<p>SN will continue to complete her monthly service user file and database audit. We will update this audit to include the identified issues which included.</p> <ul style="list-style-type: none"> <li>- NEWS records</li> <li>- Withdrawal scales</li> <li>- Kardex (Symptomatic relief administered)</li> </ul> <p>These will be done on a random basis and will be a random sample of service user files from the 16.</p> <p>If required from either of the above an action plan will be generated and relevant individuals will be notified and added to service improvement if needed.</p> <p>New information brought up during inspection will be discussed with the nurses at the nurses meeting to ask them to be mindful of this.</p>	<p>On-going</p> <p>New checks have been added by Dec 25</p> <p>Dec 25</p>	<p>Alison Alison</p> <p>Karen/Alison</p>

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<p><b>Requirement 3:</b> The provider must ensure that sharps are being managed and disposed of appropriately, in line with national infection prevention and control standards (see page 29).</p> <p>Timescale – immediate</p> <p>Regulation 3(d)(I) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p>	<p>The service provides labels outlining relevant information for the sharp box. Since the inspection dates have additionally now been added to this and this has already been completed.</p>	Immediately	Alison
	<p>Nurses will be reminded to continue to use the stickers but additionally to ensure that dates are being added to the sharps bin. Nursing team will be reminded of this at the next nurses meeting.</p>	Dec 25	Karen/Alison
	<p>Senior nurse will check that the sharp boxes have the correct label and additionally are dated during her monthly audit. If required, an action plan will be identified and outline who is responsible for what</p>	On-going	Alison
<p><b>Recommendation a:</b> The service should ensure that tamper-proof tags include a unique serial number, and that this number is recorded as part of the routine checking process (see page 28).</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>Tamper proof tags are now in place. These all have a unique serial number that have been added to the healthcare checklists</p> <p>Nurses have been updated by Senior Nurse and are aware of the process in place. Nurses are to ensure the serial number matches what is recorded in checklist and report any errors or concerns immediately.</p> <p>Senior Nurse will ensure this is monitored as part of the monthly audit</p>	Jan 26	Alison

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Name

Jodie Moore

Designation

Service Manager

Signature

J. Moore

Date

07.01.26

In signing this form, you are confirming that you have the authority to complete it on behalf of the service provider.

### 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.

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- 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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