

## Action Plan

Service Name:	Granite Occupation Health Ltd
Service Number:	01498
Service Provider:	Granite Occupation Health Ltd
Address:	Westpoint House, Prospect Road, Westhill, Aberdeen, AB32 6FJ
Date Inspection Concluded:	15 January 2024

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<b>Requirement 1:</b> The provider must ensure the correct details for patients to complain to Healthcare Improvement Scotland are included on its website and make clear that patients can contact Healthcare Improvement Scotland at any stage of the complaints process (see page 18). Timescale – by 8 March 2024	Website amended to include this information	Done	Jen McHugh
<b>Requirement 2:</b> The provider must complete annual appraisals with all members of staff who work in the service (see page 18). Timescale – by 8 March 2024	Appraisals to be carried out for all staff	October 2024	Monica Walker
<b>Requirement 3:</b> The provider must complete and submit an annual return as requested by Healthcare Improvement	Completed		Monica Walker

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Scotland (see page 21). Timescale – by 8 March 2024			
<b>Requirement 4:</b> The provider must ensure patients' next of kin or emergency contact details are documented appropriately in patient care records. If the patient refused to provide the information, this should be documented (see page 22). Timescale – by 17 June 2024	All Questionnaires and consent forms issues to clients to complete to be amended to capture this information.	June 2024	Monica Walker
<b>Recommendation a:</b> The service should develop a strategic plan that sets out strategic objectives, operational priorities and the vision of the service (see page 12).	To be discussed and a plan put in place	June 2024	Monica Walker Jen McHugh
<b>Recommendation b:</b> The service should record the agenda and minutes of staff meetings and include any actions taken and those responsible for the actions (see page 13).	Already discussed with team members and being carried out now.	Done	Monica Walker
<b>Recommendation c:</b> The service should develop and implement systems to capture anonymous staff feedback (see page 15).	Anonymous feedback questionnaires to be issues to all staff annually. These will assess and concerns addressed.	October 2024	Monica Walker Jen McHugh
<b>Recommendation d:</b> The service should develop and implement a system to determine review dates for its policies and procedures with documented evidence of when reviews are undertaken and what changes or updates were subsequently made (see page 18).	A spreadsheet will be created with all policies and procedures noted along review dates. This will be checked on a monthly basis (diary alerts created) to ensure all are updated in a timely manner.	May 2024	Monica Walker

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<b>Recommendation e:</b> The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvement (see page 19).	A quality improvement plan will be put in place and reviewed annually at management meetings.	June 2024	Monica Walker Jen McHugh
<b>Recommendation f:</b> The service should complete and submit a self-evaluation as requested by Healthcare Improvement Scotland (see page 22).	Self-evaluation will be completed	March 2024	Monica Walker
<b>Recommendation g:</b> The service should implement a system for recording consent for all treatments (see page 22).	Appropriate consent to carry out all treatments will be added to all questionnaires and consent forms.	June 2024	Monica Walker
<b>Recommendation h:</b> The service should securely destroy original Disclosure Scotland Protecting Vulnerable Groups (PVG) records in line with current legislation and implement a system to record PVG scheme identification numbers for all staff (see page 22).	All Paper copies of PVG records have been destroyed. All emails containing copies have been deleted. Only PVG numbers have been retained	Done	Monica Walker
<b>Recommendation i:</b> The service should ensure that appropriate cleaning products are used for the cleaning of all sanitary fittings, including sinks, in line with national guidance (see page 22).	Cleaning of sinks 2x daily has been added to daily task sheet and procedure. All other cleaning being done in line with national Guidance	Done	Monica Walker

Name	MonicaWalker
Designation	Director
Signature	Monica Walker
	Date 23 <sup>rd</sup> February 2023

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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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