

Action Plan

Service Name:	Merchant City Medical Group
Service Number:	01861
Service Provider:	MCMGHC Ltd
Address:	Ingram House, 4th Floor, 227 Ingram Street, Glasgow, G1 1DA
Date Inspection Concluded:	17 September 2024

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must have easy access to all recruitment checks to ensure that appropriate staff are safely employed (see page 16).</p> <p>Timescale – immediate <i>Regulation 8(1) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>	<p>Recruitment checks are outsourced and held by HR Scotland and available on request. Clinical Staff profiles available on site at Merchant City Medical Group.</p> <p>All Staff will have HR profiles available on site at West Regent Street Glasgow.</p>	In Progress Opening of new premises	<p>Lindsay MacPhee</p> <p>Lindsay MacPhee</p> <p>Lindsay MacPhee</p>
<p>Requirement 2: The provider must ensure that a face-to-face consultation and ongoing assessment is completed and documented in the patient care records (see page 20).</p>	<p>All patients' records are available for review. Review of documentation is underway and will include POA assessment.</p>	Complete	Paul Mullholland

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<p>Timescale – immediate</p> <p><i>Regulation 4(2)(b) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>			
<p>Recommendation a: The service should develop key performance indicators to help achieve its aims and objectives, and a process for monitoring and measuring these (see page 10).</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>Service delivery Programme available for West Regent Street Glasgow.</p>	<p>Complete</p>	<p>Lindsay MacPhee</p>
<p>Recommendation b: The service should introduce regular formal staff meetings. A record of discussions and decisions reached at these meetings should be kept, including the staff responsible for taking forward any actions (see page 11).</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>Daily safety brief takes place at Merchant City Medical Group.</p> <p>The clinic manager will introduce formal structured meetings with all staff groups as part of overarching Governance Structure implemented at West Regent Street Glasgow.</p> <p>These will include structured 1:1 Management meetings and formal staff meetings. These will have structured agendas and take place monthly.</p>	<p>Complete</p> <p>In progress</p> <p>In Progress</p>	<p>Paul Mullholland</p> <p>Lindsay MacPhee</p> <p>Lindsay MacPhee</p>

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<p>Recommendation c: The service should ensure that information on the website is accurate and up to date and staff job titles reflect their role in the service (see page 13).</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>Information on website will be updated to reflect title. Hair Transplant consultant.</p>	<p>Immediate</p>	<p>Paul Mullholland</p>
<p>Recommendation d: The service should develop a process of keeping patients informed of the impact their feedback has on the service (see page 13).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.8</p>	<p>The service will include testimonials on website and implement 'you said we did' structure available on site and patients will be informed by email. Opting out will be an option for patients and will be documented.</p>	<p>Immediate</p>	<p>Paul Mullholland/Lindsay MacPhee</p>
<p>Recommendation e: The service should introduce formal and documented induction and training programmes for staff (see page 16).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the people who support and care for me. Statement 3.14</p>	<p>The new Clinic manager is currently sourcing learning and education programmes for staff including Statutory and Mandatory requirements with NES- Email sent 06/10/24</p> <p>These will be on a rolling programme and monitored by the clinic manager.</p>	<p>In progress</p>	<p>Lindsay MacPhee</p>

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<p>Recommendation f: The service should further develop the range of risk assessments to include more clinically relevant risks, and an appropriate risk scoring system (see page 18).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.11</p>	<p>The clinic manager is currently implementing a suite of Risks assessments to include clinical risks.</p> <p>Standard Operating procedures specific to the needs of the service are currently being developed. All staff will have access to these. Compliance will be monitored by the Clinic Manager</p>	<p>In progress</p>	<p>Lindsay MacPhee</p>
<p>Recommendation g: The service should develop a programme of audits to cover key aspects of treatment and care. These should be documented and include improvement action plans (see page 18).</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>A programme of audit is being written by the Clinic Manger with input from Independent Infection Control expert.</p> <p>Audits will be driven by the clinic manager, action plans and critical non-compliance will be documented and shared with staff with date dependant action plans.</p>	<p>In progress</p>	<p>Lindsay MacPhee</p>
<p>Recommendation h: The service should develop and implement a quality improvement plan to formalise and direct the way it measures improvement (see page 18).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the</p>	<p>A quality improvement plan will be included in the service delivery plan as above rec A.</p>	<p>In progress</p>	<p>Lindsay MacPhee</p>

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<p>organisation providing my care and support. Statement 4.19</p>			
<p>Recommendation i: The service should develop a formal business contingency plan that sets out the arrangements for continuity of care for patients, in the event of the service closing for any reason (see page 18).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.14</p>	<p>Development of a business contingency plan is underway.</p>	<p>In progress</p>	<p>Lindsay MacPhee</p>
<p>Recommendation j: The service should complete and submit a self-evaluation when requested by Healthcare Improvement Scotland (see page 21).</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>Self-Evaluation and regulatory requirements are included in the role of the new Clinic Manager job profile.</p>	<p>Complete</p>	<p>Lindsay MacPhee</p>
<p>Recommendation k: The service should obtain and document consent to take and store patient photographs (see page 21).</p>	<p>A review of current documentation is being undertaken by the Clinic Manager. It currently includes consent to photography.</p>	<p>Complete</p>	<p>Lindsay MacPhee</p>

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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 4.11	Documentation will be standardised and include telephone consultation and Pre op Assessment. consent and storage of patient's photographs is included.	In progress	Lindsay MacPhee
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Name	Paul Mullholand	
Designation	Director	
Signature		Date <input data-bbox="1377 683 1736 762" type="text" value="23/10/24"/>

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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