

Action Plan

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| Service Name: | UnitedHealthcare Global |
| Service Number: | 02366 |
| Service Provider: | UnitedHealthcare Global Medical (UK) Limited |
| Address: | Aberdeen International Business Park, Dyce Drive, Aberdeen, AB21 0BR |
| Date Inspection Concluded: | 31 October 2024 |

| Requirements and Recommendations | Action Planned | Timescale | Responsible Person |
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| <p>Requirement 1: The provider must ensure the correct details for patients to complain to Healthcare Improvement Scotland are included on its website (see page 18).</p> <p>Timescale – immediate</p> <p>Regulation 12(c)(i) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p> | <p>Our Occupational Health clinic does not have it's own website. We do have a "Global" website which refers to or OH service, so we are looking to see if we can expand this to have a wider OH site within this initial landing page.</p> | 31 st January 2025 | S Milne |
| | <p>We are also exploring the option of a standalone site for our Aberdeen OH clinic.</p> | 31 st January 2025 | S Milne |
| | <p>In the interim until we can get the website solution in place, we propose to include details of Healthcare Improvement Scotland, in regard to making a complaint, in the joining instructions to all patients at time of appointment confirmation and to provide the details to all out clients (employing companies) that we have contracts with.</p> | 31 st December 2024 | S Milne |

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| <p>Requirement 2: The provider must complete annual appraisals with all members of staff who work in the service (see page 18).</p> <p>Timescale – by 31 March 2025</p> <p>Regulation 12(c)(i) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p> | <p>We have just introduced a new appraisal system called “MYGPS” and confirm that all staff members who work in the service are enrolled in this and will have an annual appraisal undertaken</p> | <p>31st January 2025</p> | <p>S Milne & direct line managers of employees.</p> |
| <p>Requirement 3: The provider must publish an annual duty of candour report (see page 18).</p> <p>Timescale – immediate</p> <p>Regulation 3(d) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p> | <p>We have issued our 2023 duty of candour report, and it is now displayed in our occupational health clinic reception area.</p> <p>As part of exploring the website options we are looking to be able to publish our annual duty of candour report on the website.</p> | <p>Complete</p> <p>31st January 2025</p> | <p>S Milne</p> <p>S Milne</p> |

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| <p>Requirement 4: The provider must ensure that appropriate Disclosure Scotland background checks are carried out: (a) on all staff before they begin working in the service, and (b) on all staff currently working in the service. Checks must be recorded and retained on staff files (see page 22).</p> <p>Timescale – by 31 January 2025</p> <p>Regulation 8(2)(c) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p> | <p>Our clinical resourcing manager has initiated the background checks for those in admin that were not captured.</p> | 31 st January 2025 | R Ahmed |
| | <p>A tracker of the individuals that have had a check with the reference number will be kept going forward.</p> | 31 st January 2025 | R Ahmed |
| <p>Recommendation a: The service should ensure that information about the service’s vision is available to patients (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>Will display in our occupational health clinic’s reception area.</p> <p>Explore having this on the website if possible to.</p> | 31 st March 2025 | S Milne |
| | | 31 st March 2025 | S Milne |
| <p>Recommendation b: The service should record the agenda and minutes of staff meetings and include any actions taken</p> | <p>We have reviewed the frequency and range of meetings that our teams participate in and agreed that we will have.</p> | Complete | S Milne |

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| <p>and those responsible for the actions (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>OH Clinical governance monthly, (in time we see this moving to bi-monthly) All team OH clinic meeting, clinical, admin and management meeting monthly. Manager and direct reports, minimum of a monthly one to one meeting. Clinical team CPD meetings monthly.</p> <p>Minutes from these meeting will be recorded</p> | <p>Started</p> | <p>S Milne</p> |
| <p>Recommendation c: The service should implement a freedom to speak up guardian to make it easy for staff to raise any concerns or queries (see page 13).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the people who support and care for me. Statement 3.2</p> | <p>Agree, will be discussed and proposed at the all-team meeting to be held on the 17th December</p> | <p>17th December 2024</p> | <p>L Punzano</p> |
| <p>Recommendation d: The service should ensure its website is up to date and relevant to how the service is delivered. This should include information to help patients make informed decisions about treatments (see page 15).</p> <p>Health and Social Care Standards: My support, my life. I am fully involved in all decisions about my care and support. Statement 2.9</p> | <p>Exploring development of our website to better include our OH clinic and services or to have a standalone website</p> | <p>31st January 2025</p> | <p>S Milne</p> |

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| <p>Recommendation e: 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).</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>Cleaning products have been reviewed. Chlorine tablets and dispensing bottles are now in place.</p> <p>HSE department is supporting with COSHH assessment prior to coming into use.</p> | <p>Completed</p> <p>31st December</p> | <p>S Milne</p> <p>M Boughton</p> |
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| Name | Stewart Milne | |
| Designation | Head of Clinical Operations | |
| Signature |  | <p>Date</p> <p>12/12/2024</p> |

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.

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- 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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