

Action Plan

Service Name:	Ayrshire Eye Clinic
Service number:	00201
Service Provider:	Ayrshire Eye Clinic Limited
Address:	Broomfield House, 3 Broomfield Road, Ayr, KA7 2SP
Date Inspection Concluded:	16 March 2022

Requirements and Recommendations	Action Planned	Timescale	Responsible person
Requirement 1 – The provider must ensure that staff listed as 'authorised users' for the laser equipment have completed their core of knowledge safety training before delivering this treatment to patients. A record of when staff completed or updated this training must be maintained.	All staff have completed training – a copy of their core of knowledge to be gained by clinic and kept with training records and within laser safety folder.	ASAP (by end of May 2022 at latest)	Fiona Conkie
Requirement 2 – The provider must ensure that both hot and cold running water is available at all hand wash basins.	Clinic to organise plumber to attend and ensure hot and cold running water is available throughout clinic.	May 2022	Fiona Conkie
Recommendation a - The service should develop a risk register. This should record details of all risks in the service, the potential impact, who is responsible for managing each risk and the risk response measures put in place to respond to each risk.	Risk register to be developed and maintained.	June 2022	Sathish Srinivasan and Fiona Conkie

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Recommendation b -The service should address the outstanding actions from the laser protection advisor report to reduce the risk of unauthorised access to the laser rooms when in use.	Outstanding actions from laser report to be addressed.	May 2022	Sathish Srinivasan and Fiona Conkie
Recommendation c -The service should address the outstanding recommendations in its 2019 fire safety report and the fire risk assessment should be reviewed every year. Fire extinguishers should be stored correctly.	Recommendations from 2019 fire risk assessment to be reviewed and any actions to be completed. Annual fire inspection is due in June so good opportunity to complete task list.	July 2022	Fiona Conkie
Recommendation d - The service should introduce a system for reviewing its policies and procedures on a regular basis or when changes occur to ensure they are in line with current legislation and reflect the service provided.	System for reviewing policies and procedures to be developed and maintained. Versions of policies to be added as footnote.	July 2022	Fiona Conkie
Recommendation e - The service should obtain two references for new members of staff, in line with safe recruitment practices.	References for new staff going forward to be obtained and kept with personnel information.	As required.	Fiona Conkie
Recommendation f -The service should obtain a Disclosure Scotland Protecting Vulnerable Groups (PVG) update for all staff at regular intervals. This will ensure that staff remain safe to work in the service.	PVG update required for all staff at appropriate intervals. Schedule to be created for this.	July 2022	Fiona Conkie

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Recommendation g - The service should develop a formal role-specific documented induction package for new members of staff to make sure they have the appropriate support to gain the knowledge and skills required for their role.	Induction document to be created for all new staff. Induction to be completed and kept in personnel file for all new staff going forward. Induction will be specific to the job role.	July 2022	Fiona Conkie
Recommendation h - The service should share minutes of staff meetings with all staff.	Minutes are currently typed up but not shared amongst staff. These will now be circulated to all staff via email after each meeting.	From next meeting onwards.	Fiona Conkie

Name	Fiona Conkie			
Designation	Service Manager			
Signature	feelonkie	Date	25/04/2022	
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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