

Action Plan

Service Name:	Blackberry Clinic
Service number:	00433
Service Provider:	Blackberry Clinic Aberdeen Ltd
Address:	32 Scotsdown Road, Bridge of Don, Aberdeen, AB23 8HG
Date Inspection Concluded:	01 August 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must ensure that the flooring in clinical areas is replaced to allow for its effective decontamination (see page 19).</p> <p>Timescale – by 1 February 2024</p>	Taking advise from Head of Infection Control within Bupa before the commissioning of new flooring for clinical rooms. Was raised as a recommendation at the time of the inspection however we are actively looking at options	Feb 2024	Infection Control Lead

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
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Recommendation a: The service should formally record the minutes of staff and management meetings. These should include any actions taken and those responsible for the actions (see page 10).	Formal record of all clinical governance & 1to1 ops meetings are in place. New weekly meeting with the local team in place, new document created to log these meetings and record any actions	Now in place as of w/c 02/10/23	Centre Manager
Recommendation b: The service should ensure that all policies reflect Scottish legislation and best practice guidance (see page 15).	Work in progress to have policies updated to include Scottish legislation	Immediate/Ongoing in terms of ever changing regs	Head of Governance, Quality and Risk
Recommendation c: The service should ensure that the complaints information for patients is accessible on its website (see page 15).	Complaints information link to be added to the footer of Blackberry Clinic website, change agreed in principle and ready to go live, now with 3 rd party web provider to action	01/11/23 or sooner	Head of Governance, Quality and Risk / 3 rd party web provider
Recommendation d: 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 19).	Local policies being reviewed and updated to ensure compliance with national guidance	31/12/23	Head of Governance, Quality and Risk
Recommendation e: The service should 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 19).	Immediate action was taken following inspection. Bigger piece of work being done by Bupa to ensure this is captured prior to the appointment when patients completed pre-assessment questionnaire, however at local level we ask all attending for next of kin information when they arrive and it is entered onto their customer profile on the system	Completed	Centre Manager

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Name	Vikki Glennie		
Designation	Centre Manager		
Signature	V Glennie	Date	02 / 10 / 2023

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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