

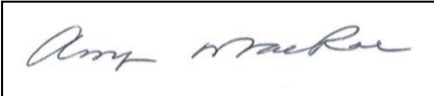
## Action Plan

Service Name:	Alert Health
Service number:	00352
Service Provider:	Alert Health Ltd
Address:	2 Seafield Road, Inverness IV1 1SG
Date Inspection Concluded:	22 September 2021

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<b>Requirement 1:</b> The service must replace carpets in clinical areas with appropriate coverings.	In March 2020 we moved clinical staff from rooms with vinyl flooring to carpeted rooms as they were larger, with large opening windows. We plan to move premises within the next six months due to sale of the current building. We will ensure the new premises has appropriate coverings.	April 2022	Amy MacRae
<b>Recommendation a:</b> The service should develop a programme of regular audits to cover key aspects of care and treatment. Audits must be documented and improvement action plans implemented.	Where possible, audit is built into our process flow, and we have adapted several processes so that audit takes place during or immediately after the appointment, negating the need for separate audit. Additionally we will implement the specific assessment audit recommended by HIS.	Nov 2021	Amy MacRae
<b>Recommendation b:</b> The service should comply with national guidance to make sure that the appropriate cleaning products are used for the cleaning of all sanitary fittings, including clinical hand wash sinks.	We adhere to the national guidance on infection control. However, in respect of this specific item we believe the potential health risks associated with the use of chorine outweigh the risk of contamination from using our usual disinfectant for our clinical hand wash sinks.	N/A	Amy MacRae

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<b>Recommendation c:</b> The service should ensure that single-use mop heads are used.	We have implemented single-use mop heads	Oct 2021	Amy MacRae
<b>Recommendation d:</b> The service should introduce clinical governance meetings, formally record an agenda and the minutes of these meetings. These should include any actions taken and those responsible for the actions.	We will formally minute clinical governance discussions, subsequent actions and action owners.	Oct 2021	Amy MacRae
<b>Recommendation e:</b> The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvements.	The service manager and Clinical Director have agreed the format for a Quality Improvement plan for implementation.	Nov 2021	Amy MacRae

Name	Amy MacRae		
Designation	Managing Director		
Signature		Date	29 / 10 / 2021
<b>In signing this form, you are confirming that you have the authority to complete it on behalf of the service provider.</b>			

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