

Action Plan

Service Name:	Afterglow Aesthetics
Service number:	01640
Service Provider:	Afterglow Aesthetics Ltd
Address:	5 Osprey Gardens, Mintlaw, Peterhead, Aberdeenshire, AB42 4AF
Date Inspection Concluded:	07 April 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Recommendation a: The service should implement a structured approach to gathering and using patient feedback (see page 8).	Send out regular questionnaires using online platforms such as survey monkey or google forms. We may look to display a poster with an invitation to give feedback, comments and suggestions on how to improve our service.	2 months	Sarah Massie
Recommendation b: The service should ensure that single-use mop heads are used (see page 11).	New single use mop heads to be purchased	1 week	Sarah Massie
Recommendation c: The service should ensure that in line with national guidance, appropriate cleaning products are used for the cleaning of all sanitary fittings, including sinks (see page 11).	Chlorine tablets/solution to be bought	1 week	Sarah Massie

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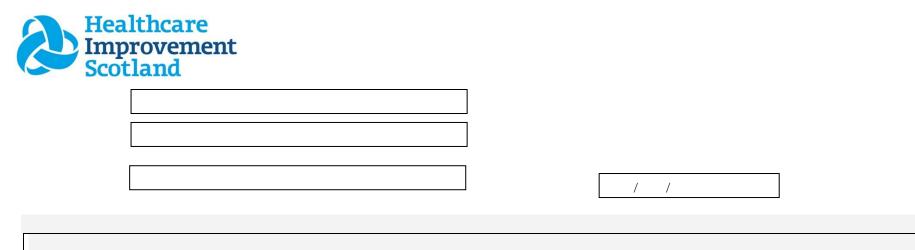
Recommendation d: The service should implement a medication checklist (see page 11).	Medication checklist to be in place to record all medications in stock in clinic including number in stock and expiry dates	1 month	Sarah Massie
Recommendation e: The service should develop a programme of regular audits to cover key aspects of care and treatment. Audits should be documented and action plans implemented (see page 11).	Start regular audits of areas such as infection, prevention and control and record audits in order to identify areas which could be improved and areas we did well in	6 months	Sarah Massie
Recommendation f: The service should record patient consent for sharing information with their GP and other medical staff in an emergency, if required, in patient care records (see page 12).	During consent we now ask if clients consent to information being sent to their GP in the event of an emergency.	1 week	Sarah Massie
Recommendation g: The service should formally document what aftercare has been provided to aesthetic patients including an out of hours contact number. This would enable patients to be better informed about their care (see page 12).	This is already verbally communicated and its an area where I feel we do exceptionally well. This will therefore be documented in clients notes.	1 week	Sarah Massie
Recommendation h: The service should record minutes of any meetings with other services (see page 14).	Minutes of meetings with colleagues for example those I prescribe for will be taken.	6 months	Sarah Massie

Sarah Massie.	Nurse	S Massie	26/05/2023
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Name

Designation

Signature



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.
- 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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