

Action Plan

Service Name:	ASthetics Medical Spa (Dumfries)
Service number:	00347
Service Provider:	Aileen Sutherland
Address:	Wellness Suite, Galloway House, The Crichton, Glencaple Road, Dumfries, DG1 4ZZ
Date Inspection Concluded:	30 October 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Recommendation a: The service should further develop this into a documented yearly review of its performance in line with its vision, aims and objectives (see page 10).	When policies are reviewed at the year end, time will be taken to collate information collected by patient online reviews, incidents, returning patients and feedback from staff reflection regarding the operating of the service. These will all be documented with an Action plan to ensure our service is aligned with our vision and any changes can be made as necessary to improve our service and stay true to our vision, aims and objectives.	End of November 2024	Clinical Lead

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Recommendation b: The service should develop a process of formal staff meetings and document the action associated with these (see page 10).	From January 2024 the clinic will commence scheduled monthly meetings between staff with documented minutes. At the end of the minutes, Actin plans should be considered with a staff member assigned to each task. Some of these outcomes and improvements should be shared.	Commencing January '24	Clinical Lead
Recommendation c: The service should develop a process of informing patients of the impact their feedback has on the service (see page 12).	Patient reviews are collected throughout the year and a survey monkey patient satisfaction questionnaire sent out yearly. The information will be collated annually and any changes made due to the feedback will be shared on social media and in the monthly newsletter.	Commencing March 2024	Clinical Lead
Recommendation d: The service should ensure it uses its own cleaning equipment to clean the service (see page 14).	A new Flashmop with single use disposable attachment heads, is now in situ at the Dumfries Clinic. It is used only by staff who work in the service.	Achieved	Clinical Lead
Recommendation e: The service should develop checklists to demonstrate the cleaning process and the regular checks carried out on single-use equipment (see page 14).	A checklist has been made to check expiry dates of single use equipment monthly.	Achieved	Clinical lead
Recommendation f: The service should publish a yearly duty of candour report (see page 14).	A duty of Candour report will be included on our website and updated annually.	January 2024	Clinical Lead
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Recommendation g: The service should further expand the risk assessments completed and these should be stored as a risk register (see page 15).	The service will include a risk assessment for trip and falls. Additionally, a spreadsheet will be collated which will incorporate all of the risk assessments. These will be signed and dated when reviewed 6 monthly and changes made accordingly. If any risks become apparent they will be assessed and added to the register.	Ongoing	Clinical Lead
Recommendation h: The service should develop a process of checking the insurance policy of staff working under practicing privileges every year (see page 17).	During annual staff appraisals, staff will be required to bring a printed copy of their individual insurance which will be held in their staff file.	Achieved - ongoing	Clinical Lead

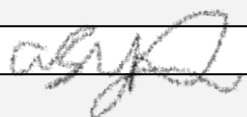
Name

Aileen Sutherland

Designation

Independent Nurse Prescriber and Clinic Owner

Signature



Date

11 / 12 /2023

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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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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