

Action Plan

Service Name:	Aesthetika
Service Number:	01749
Service Provider:	Aesthetika
Address:	Netherthird, Rothienorman, Inverurie, AB51 8XS
Date Inspection Concluded:	24 October 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must develop effective systems that demonstrate that proactive management of risk (see page 13). Timescale – immediate	Identify potential risks Developed risk matrix	Completed	Manager
Recommendation a: The service should develop and implement a process for measuring, recording and reviewing its vision, purpose, aims and objectives (see page 9).	Define vision, purpose, aims and objectives. Develop key performance indicators (KPI's) (Link to aims and objectives) Implement measurement system – software tool, spreadsheet or dashboard Record results, identify trends & patterns Review performance	Ongoing - End of Jan 2024	Manager

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	Adjust strategy Review and update – annually.		
Recommendation b: The service should formalise its approach to gathering feedback from patients to demonstrate how this is used to improve the quality of the service (see page 11).	Document – keep record ?? Spreadsheet Identify goals – service improvement, understand client needs, gauge client satisfaction Choose method – Questionnaires and feedback forms. Design questions – clear, concise and relevant to goals. Gather feedback – send questionnaires electronically post treatment. QR codes in clinic. Analyse feedback Implement changes	Ongoing - End of Jan 2024	Manager
Recommendation c : The service should develop and implement a participation policy to document its approach to gathering and using feedback from patients (see page 11).	This is done, needs to be uploaded to the portal	Before end of the week	Manager
Recommendation d: The service should develop a programme of regular audits to cover key aspects of care and treatment. Audits should be documented and improvement action plans implemented (see page 14).	Identify an industry "buddy" Collaborative working to audit and improve service. Timescale – identify how often auditing should be undertaken.	Ongoing - End of Jan 2024	Manager

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	Audit – Identify areas to audit		
	Document – Document auditing process		
Recommendation e : The service should record consent to share information in the patient care records (see page 16).	This has been added to the electronic patient record	Completed	Manager

Name	Megan Stephen		
Designation	Manager		
Signature	MoganTephen	Date 30/11/2023	

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 the timescale for completion is immediate. If you identify a requirement/recommendation timescale that you feel needs to be extended, include the reason why.
- Please do not name individuals or an easily identifiable person in this document. Use Job Titles.
- If you have any questions about your inspection, the requirements/recommendations or how to complete this action plan, please contact the lead inspector.

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