

Action Plan

Service Name:	Aesthetica Stirling
Service number:	01823
Service Provider:	Jade Conway
Address:	Abbey Inn, 40 North Street, Cambuskenneth, Stirling, FK9 5NB
Date Inspection Concluded:	28 September 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must ensure that practicing privilege contracts are introduced, to ensure safe delivery of care with individual responsibility and accountability clearly identified (see page 13). Timescale – by 28 January 2024	I will introduce a practicing privilege policy.	January 2024	Jade Conway

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Requirement 2: The provider must develop effective systems that demonstrate the proactive management of risk (see page 14).	Specific Risk assesments will be introduced	January 2024	Jade Conway
Timescale – by 28 January 2024			

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Recommendation a: The service should have a formal means of assessing and measuring the outcome of the objectives to ensure it was achieving its vision and purpose (see page 9).	There will be regular review of objectives and a personal development plan in place.	When returning to work.	Jade Conway

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Recommendation b: The service should record a summary of discussions in meetings and any actions arising (see page 10).	Staff meetings will be logged and documented.	When returning to work.	Jade Conway
Recommendation c: The service should develop a participation policy to document its approach to gathering and using patient feedback to drive improvement (see page 11).	All willing patients will be given opportunity to feedback and give any recommendations.	When returning to work.	Jade Conway

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Recommendation d: The service should publish an annual duty of candour report so that any information about duty of candour incidents are available for their patients (see page 13).	An annual duty of candour report will be published.	January 2024	Jade Conway
Recommendation e: 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).	Regular audits will be completed.	When returning to work.	Jade Conway

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develop and im improvement p	tion f: The service should applement a quality plan to formalise and direct es and measures see page 14).	A quality improvement p	olan will be imple	mented.	When return to work.	Jade Conway
Name Designation Signature	Owner of company L'Conway		Date	17 /11	/ 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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