

## Action Plan

Service Name:	DermaGlow Aesthetics
Service number:	01844
Service Provider:	DermaGlow Aesthetics
Address:	6 Grange Street, Kilmarnock, KA1 2AR
Date Inspection Concluded:	12 July 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<b>Requirement 1:</b> The provider must ensure all consultation records are held within the service, including prescriber consultations (see page 12).  Timescale – by 5 December 2023	Prescriber will provide DermaGLOW with copies of all consultations, which will be stored securely within the clinic.	By Dec23	DermaGLOW Owner & Prescriber.

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<b>Requirement 2:</b> The provider must retain full up-to-date records of all staff recruited and employed in the service, including those with practicing privileges. These must contain ongoing training, induction training and immunisation status (see page 13).  Timescale – by 5 December 2023	DermaGLOW will obtain training certificates and immunisation status for prescriber and ensure induction training is documented formally. These will be stored securely within the clinic. These should be checked and updated yearly.	By 5 <sup>th</sup> Dec 2023	DermaGLOW Owner & Prescriber
<b>Requirement 3:</b> The provider must arrange for its own check to ensure that a practitioner is a registered PVG scheme member, before granting them practicing privileges (see page 13).  Timescale – by 5 December 2023	DermaGLOW will check for PVG status and register to be alerted to any changes and check yearly.	By 5 <sup>th</sup> Dec 2023.	DermaGLOW Owner

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
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<p><b>Recommendation a:</b> The service should ensure its complaints policy is easily available for patients to make sure they are aware of how to make a complaint or raise a concern about their care and treatment (see page 8).</p>	<p>Complaints policy is now on display within treatment room and easily visible for all clients.</p>	<p>Complete</p>	<p>DermaGLOW Owner</p>
<p><b>Recommendation b:</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 8).</p>	<p>Client feedback/satisfaction forms are available within treatment room and clients routinely leave feedback on social media sites or via text messages. A feedback log will be created to ensure any improvements as a result of this feedback are documented.</p>	<p>End Sep23</p>	<p>DermaGLOW owner.</p>

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<p><b>Recommendation c:</b> The service should obtain copies of boiler and electrical maintenance certificates from building management (see page 10).</p>	<p>All certificates will be obtained from Salon M owner and will be stored in DermaGLOW aesthetics treatment room.</p>	<p>By end of Aug23</p>	<p>Salon M owner DermaGLOW Owner</p>
<p><b>Recommendation d:</b> The service should upgrade its clinical handwash basin as part of future planned refurbishment (see page 10).</p>	<p>Salon M owner is aware of the requirements regarding the wash hand basin and will upgrade as part of any planned refurbishment.</p>	<p>Ongoing - This will be completed with any changes.</p>	<p>SalonM Owner</p>

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<p><b>Recommendation e:</b> The service should carry out a risk assessment on the sink in the treatment room to mitigate any risk associated with using non-compliant clinical wash hand basins (see page 10).</p>	<p>A risk assessment will be completed weekly and document findings to ensure compliance.</p>	<p>End Aug23</p>	<p>DermaGLOW Owner</p>
<p><b>Recommendation f:</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 (see page 11).</p>	<p>Patient care audit will be created and completed 3 monthly to ensure client records are accurate and contain all required information. Any required improvements will be actioned and documented.</p>	<p>End Sep23.</p>	<p>DermaGLOW Owner</p>

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<p><b>Recommendation g:</b> The service should develop a comprehensive risk register to support the management and review of identified risks and potential hazards (see page 11).</p>	<p>Although weekly risk assessments are carried out to ensure client safety these are not formally documented. Risk assessment will now be created, weekly (or as soon as risk identified) risk assessments documented with any actions addressed.</p>	<p>End Sep23</p>	<p>DermaGLOW Owner</p>
<p><b>Recommendation h:</b> The service should record GP and emergency contact details in the patient care records unless patients do not consent to this (see page 12).</p>	<p>All GP and emergency contacts will now be documented in patient record cards for all new clients and added to existing client record cards, provided clients give consent.</p>	<p>With immediate effect.</p>	<p>DermaGLOW Owner</p>

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<p><b>Recommendation i:</b> The service should obtain consent to share with patients' GPs and emergency contacts, and record this in the patient care records (see page 12).</p>	<p>Consent to share with GP/emergency contacts will be now be documented in patient record cards for all new clients</p>	<p>With immediate effect.</p>	<p>DermaGLOW Owner</p>
<p><b>Recommendation j:</b> The service should complete the online assessment should register with the Information Commissioner's Office if patient information is to be held digitally, to make sure patient data is handled in a safe and secure way (see page 12).</p>	<p>Registration will be completed with the ICO and online assessment taken to establish requirements to ensure all client data is kept safe and in accordance with the guidelines.</p>	<p>By end Aug23</p>	<p>DermaGLOW Owner</p>

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<b>Recommendation k:</b> The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvement (see page 16).	Quality improvement audit plan will be created to ensure business improvements made are documented as they are implemented/occur.	End Sep 23	DermaGLOW Owner
<b>Recommendation l:</b> The service should formally record the minutes of staff meetings. These should include any actions taken and those responsible for the actions (see page 16).	Any formal discussions that occur with Nurse Prescriber for example discussions regarding clients/treatments will be recorded, including any actions/learning points.	Ongoing	DermaGLOW Owner.

Name

Designation

Signature 

Date 22/08/23



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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