

## Action Plan

Service Name:	FTT Skin Clinics (Hamilton)
Service number:	00207
Service Provider:	FTT Skin Limited
Address:	25 Bothwell Road, Hamilton, Lanarkshire, ML3 0AS
Date Inspection Concluded:	18 April 2023

Requirements	Action Planned	Timescale	Responsible Person
<b>Requirement 1:</b> The provider must implement a more effective stock control system for medicines or medical devices to make sure they remain in date and fit for purpose (see page 15).  Timescale – immediate	Monthly audits for Prescription Only Medicines template has been revised and a monthly task reminder has been setup for a clinical member to staff to complete stock check to include medical devices.	Complete	Frances Turner Traill Paula Ferguson

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:1 of 6	Review Date:
Circulation type (internal/external): Internal/External		

<p><b>Requirement 2:</b> The provider must ensure the outstanding recommendations from the most recent laser protection advisor's report are actioned. The local rules must be displayed in the laser room, and must be read, understood and signed by all authorised users. An up-to-date list of authorised users must be maintained (see page 15).</p> <p>Timescale – immediate</p>	<p>LPA's report has been actioned. Local rules have been read/signed by all authorised staff and available in the laser room.</p> <p>We have a list of IPL/Laser authorised users and their Core of Knowledge Training and expiry date.</p> <p>IPL/Laser Key Policy in place</p>	Complete	John Traill
<p><b>Requirement 3:</b> The provider must ensure that all staff have the appropriate pre-employment checks carried out in line with current legislation and best practice before they start working in the service (see page 20).</p> <p>Timescale – immediate</p>	<p>We will all future staff have two written references and PVG place before contract signed/start date.</p> <p>We have also signed a contract with HRServices Scotland to provide standard employment policies, employment contract and risk assessments.</p>	Complete	John Traill

Recommendations	Action Planned	Timescale	Responsible Person
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File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:2 of 6	Review Date:
Circulation type (internal/external): Internal/External		

<b>Recommendation a:</b> The service should review the frequency of the formal medicines audit to provide regular monitoring and compliance for safe medicines management (see page 15).	Medicines management policy and audit checks have been revised to improve and evidence robust medicine management recording in clinic.	Complete	Paula Ferguson
<b>Recommendation b:</b> The service should further develop its risk assessments and introduce a risk register to support the management and review of identified risks in the service and to patients. This should include the control measures in place to reduce each risk (see page 15).	As part of our contract with HRServicesScotland they will provide the clinic with a complete health and safety risk assessment. They will assist in creation of risk assessment plan.	In progress	John Traill
<b>Recommendation c:</b> The service should ensure botulinum toxin is used in line with the manufacturer's and best practice guidance and update its medicines management policy to accurately reflect the processes in place (see page 15).	We use Bacteriostatic Saline to reconstitute botulinum toxin as less painful than sodium chloride 0.9%. This is off licence use of which the patient is informed, consented and documented in their notes.	Complete	Frances Turner Traill
<b>Recommendation d:</b> The service should develop a child protection policy to ensure a clear protocol is in place to respond to child protection concerns (see page 15).	We have a child protection policy in place which has been updated to reflect our policy on 16-18 year olds.	Complete	John Traill

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:3 of 6	Review Date:
Circulation type (internal/external): Internal/External		

<b>Recommendation e:</b> The service should obtain patient consent to share information with their GP or other healthcare professional and record this in the patient care record. A record of the patient's next of kin or emergency contact details should also be recorded (see page 18).	Consents have been updated to share information with GP or other Healthcare professional.  Clinics management system has been updated to mandate a next of kin and/or emergency contact details.	Complete	Paula Ferguson  John Traill
<b>Recommendation f:</b> The service should update the weight loss management protocols for medicines used to support weight loss management to comply with the approved conditions of use in the manufacturer's guidance (see page 18).	Protocols for weight management has been revised and updated to match the manufacturer's guidance	Complete	Paula Ferguson
<b>Recommendation g:</b> The service should obtain patient consent to treatment for all its patients. This should include patients enrolled on the weight loss management programme (see page 18).	Informed consent will be completed by all patients on the weight loss management program.	Complete	John Traill
<b>Recommendation h:</b> The service should ensure it has fully discussed with the patient and documented in the patient care record when using a medicine outwith the manufacturer's guidance (off-licence) (see page 18).	Off license treatment is discussed with patients at consultation and again prior to treatment on the day. Patients consent to this at the time of treatment and this is recorded in the consent form.	Complete	Paula Ferguson

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:4 of 6	Review Date:
Circulation type (internal/external): Internal/External		

<b>Recommendation i:</b> The service should develop and implement a quality improvement plan to formalise and direct how it drives and measures improvements in the service (see page 23).	We will take the information from a basecamp project management system and create a standalone quality improvement plan driven by customer/staff feedback	In progress	John Traill
<b>Recommendation j:</b> The service should follow its clinical governance policy to ensure effective review and monitoring of its quality assurance systems and processes (see page 23).	We will update our clinical governance policy to include the results/review of all audits carried on our basecamp project management system.	In Progress	John Traill

Name	<input type="text" value="JohnTraill"/>		
Designation	<input type="text" value="Director"/>		
Signature	<input type="text" value="John Traill"/>	Date	<input type="text" value="30 / 05 /2023"/>

**In signing this form, you are confirming that you have the authority to complete it on behalf of the service provider.**

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:5 of 6	Review Date:
Circulation type (internal/external): Internal/External		

### 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.

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:6 of 6	Review Date:
Circulation type (internal/external): Internal/External		