

Action Plan

Service Name:	Mackenzie Aesthetics
Service Number:	01122
Service Provider:	Liza Mackenzie
Address:	9 Bayhead, Stornoway, Isle of Lewis, HS1 2DU
Date Inspection Concluded:	24 August 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must develop a risk register highlighting all risks in the service (see page 12). Timescale – immediate	For ongoing risks assessments	6 months	Liza Mackenzie
Requirement 2: The provider must ensure the premises are kept in a good state of repair both externally and internally (see page 15). Timescale – immediate	Health and safety audits.	6 months	Liza Mackenzie
Requirement 3: The provider must ensure that a record is made in each patient care record of the consultation and assessment (see page 15). Timescale – immediate	To ensure consultations are more detailed, medical history expectations, discussion detailed.	immediate	Liza Mackenzie

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:1 of 4	Review Date:
Circulation type (internal/external): Internal/External		

Requirement 4: The provider must ensure that full contact details are obtained for each patient including GP and next of kin contact details and gain consent for sharing these in the event of an emergency (see page 15). Timescale – immediate	To ensure all details are obtain for emergencies.	immediate	Liza Mackenzie
Recommendation a: The service should develop clear and measurable aims and objectives for patients to access (see page 9)	To ensure patient have access to information and aftercare on website.	immediate	Liza Mackenzie
Recommendation b: The service should develop a process of informing patients of how their feedback has helped to improve the service (see page 10).	This can be achieved by given up to date feedback from clients, asking for feedback on services given.	immediate	Liza mackenzie
Recommendation c: The service should ensure patient know how to make a complaint should they have concerns about their experience (see page 12).	Given information leaflets and access to complaints on website.	immediate	Liza mackenzie
Recommendation d: The service should ensure a duty of candour report is published every year for patients to review (see page 12).	Annual update report annually.	12 months	Liza mackenzie
Recommendation e: The service should develop a regular programme of clinical audits to demonstrate ongoing service improvement (see page 13).	To have evidence of audits to show improvements of service.	12 months	Liza mackenzie

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:2 of 4	Review Date:
Circulation type (internal/external): Internal/External		

Recommendation f: The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvement (see page 13)	To develop improvement plans	12 months	Liza Mackenzie
Recommendation g: The service should develop checklists capturing the regular cleaning of the clinic and checks on expiry dates of single-use equipment (see page 15).	Checklists already in use	immediate	Liza Mackenzie

Name	Liza Mackenzie		
Designation	Mackenzie Aesthetics		
Signature	L.Mackenzie	Date	27/10/2023

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.

File Name: IHC Inspection Post Inspection - Action Plan template AP	Version: 1.1	Date: 8 March 2023
Produced by: IHC Team	Page:3 of 4	Review Date:
Circulation type (internal/external): Internal/External		

- If you have any questions about your inspection, the requirements/recommendations or how to complete this action plan, please contact the lead inspector.

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