

## **Action Plan**

Service Name:	New Image Aesthetics	
Service number:	02162	
Service Provider:	Yvette's Limited	
Address:	14 Stein Crescent, Stoneywood, Denny, FK6 5FP	
Date Inspection Concluded:	09 November 2023	

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<b>Recommendation a:</b> The service should ensure the identified aims and objectives are available for all patients to view (see page 10).	All background checks have been completed with the view of granting practicing privileges to a further qualifies NMP. A information folder will be available in clinic for any service users to utilise.	2 months	Y Gordon

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<b>Recommendation b:</b> The service should develop and implement a process for reviewing its aims and objectives and assessing their effectiveness (see page 10).	Aims and objectives meetings will be planned to review progress and implement further action if required.	2 months	Y Gordon
<b>Recommendation c:</b> The service should develop a formal process for recording and reviewing patient feedback. This should include informing patients how their feedback has been used to improve the service (see page 12).	All client feedback will be gathered and recorded electronically. Feedback forms will be provided to all service users. These will be included in the discussions as part of the service meetings.	Actioned	Y Gordon
<b>Recommendation d:</b> The service should publish an annual duty of candour report (see page 14).	This will be printed off and placed in the service users information folder within the clinic.	Actioned	Y Gordon
<b>Recommendation e:</b> 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 15).	All audits were up to date and completed by myself. I did not audit the audits therefore I plan to have my additional NMP complete a second audit bi annually.	Actioned	Y Gordon

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Designation Director   Signature Vuette, Gourdan,   Date 04 / 01 /24	Name	Yvette Gordon			
Signature Vuotto, Gordan, Date 04 / 01 /24	Designation	Director			
	Signature	Yuotto, Gordin,	Date	04 / 01 /24	

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.

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- **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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