

## Action Plan

Service Name:	Skinderella Aesthetics
Service number:	01665
Service Provider:	Skinderella Aesthetics
Address:	Unit 10, Belgrave Street, Bellshill, ML4 3NP
Date Inspection Concluded:	09 November 2022

Requirements and Recommendations	Action Planned	Timescale	Responsible person
<b>Requirement 1:</b> The provider must ensure all documented consultations and assessment of treatments with the independent nurse prescriber are recorded and retained in the patient care record (see page 12).  Timescale – immediate	I have obtained notes carried out by the prescriber which contains GP and NOK information. This has now been filed with the patient notes.	Immediate	Natalie Duffy
<b>Recommendation a:</b> The service should develop a process of informing patients of their response to feedback (see page 8).	There is a new feedback section on our electronic system as well as paper copies provided in clinic. More over we are now registered with google business which allows patients to leave public reviews.	Immediate	Natalie Duffy

<b>Recommendation b:</b> The service should further develop effective systems that demonstrate the proactive management of risks to patients and staff (see page 10).	<b>We have created a spread sheet which highlights areas that pose a risk. These are colour coded- Red, amber, green to grade the risk being assessed and how it can be managed.</b>	Immediate	Natalie Duffy
<b>Recommendation c:</b> The service should further develop a clinical audit program (see page 10).	This programme has now been established	Immediate	Natalie Duffy
<b>Recommendation d:</b> The service should request emergency and GP contact details for all patients in the event of an emergency (see page 12).	I have obtained notes carried out by the prescriber which contains GP and NOK information. This has now been filed with the patient notes.	Immediate	Natalie Duffy
<b>Recommendation e:</b> The service should develop a staff recruitment policy (see page 13).	We have began to collaborate and create a staff recruitment policy so we are prepared if we decide to take on any more staff in the future.	On going	Natalie Duffy

<b>Recommendation f:</b> The service should develop a practicing privileges contract signed by both the prescriber and the practitioner (see page 13).	I have checked my files and I do have a practice and privileges policy which has been signed by myself and Rosemary. I only had the copy available on the day of inspection.	Immediate	Natalie Duffy
<b>Recommendation g:</b> The service should develop a quality improvement plan (see page 15).	This has been carried out in more depth	Immediate	Natalie Duffy

Name	<input type="text"/>
Natalie Duffy	
Designation- Clin	<input type="text"/>
Signature Natalie	<input type="text"/> / / <input type="text"/>

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