

Action Plan

Service Name:	Skin Clinic 360
Service number:	01556
Service Provider:	Skin Clinic 360 Limited
Address:	13 Elpin, Alloa FK10 1PQ
Date Inspection Concluded:	14 July 2022

Requirements and Recommendations	Action Planned	Timescale	Responsible person
Recommendation a: The service should document the costs of the proposed treatment in the patient care record.	I have added a tick box within the consent form for Dermal fillers & Botox to say that the client is aware of treatment costs and that regular treatments are required to maintain results.	already Implemented	Laura Lennox
Recommendation b: The service should develop and implement a structured approach to gathering and analysing patient feedback to help improve the service and to demonstrate the impact of change from the improvements made.	I have created a client feedback form that I can email to clients. I will select 10 clients a month and ask for feedback, I will log the results to my ongoing improvement plan.	Ongoing	Laura Lennox

File Name: 20190121 Action Plan Template	Version: 1.0	Date: 21 January 2019
Produced by: IHC Team	Page:1 of 2	Review Date:
Circulation type (internal/external): Internal/External		

Recommendation c: The service should formally record evidence of peer reviews and other learning opportunities to demonstrate and direct the way it measures improvement.	Moving forward I will start to log these interactions within my improvement plan.	ongoing	Laura Lennox
--	---	---------	--------------

Name	<input type="text" value="Laura Lennox"/>		
Designation	<input type="text" value="Clinic Owner"/>		
Signature	<input type="text" value="L Lennox"/>	Date	<input type="text" value="21/ 08 /2022"/>

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