

Action Plan

Service Name:	Surgical Skin Solutions
Service number:	02454
Service Provider:	Surgical Skin Solutions Ltd
Address:	Unit 1, The Square, Maud, Peterhead, AB42 5LY
Date Inspection Concluded:	07 April 2025

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must develop and maintain an effective system to demonstrate the proactive management of risks to patients and staff (see page 16).</p> <p>Timescale – by 7 July 2025</p> <p>Regulation 13(2)(a) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p>	<p>A business continuity plan will be in place. A slip trips and falls policy will be in place. Regular audit systems will be in place.</p>	07/07/25	Anne-Marie Williamson

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Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 2: The provider must ensure patients' GP and next of kin contact details are documented appropriately in patient care records. If the patient refused to provide the information, this should be documented (see page 20).</p> <p>Timescale – by 7 July 2025</p> <p>Regulation 4(1) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p>	Update the consent form accordingly. It now includes the patients next of kin, GP details and consent to contact them in case of emergency.	15/05/25	Anne-Marie Williamson
<p>Requirement 3: The provider must ensure that patient care records set out how patients' health, safety and welfare needs will be met. As a minimum, this must include:</p> <p>(a) the date and time of every consultation with, or examination of, the patient by a healthcare professional and the name of that healthcare professional, and</p> <p>(b) the outcome of that consultation or examination (see page 20).</p> <p>Regulation 4(2)(a)(b) The Healthcare Improvement Scotland (Requirements as to</p>	<p>To document the patients records with more accurately.</p> <p>They will now include the discussion during the consultation, the procedure carried out and patients will all receive and after care advice leaflet, including my contact details for any aftercare concerns.</p> <p>I aim to computerise the patients records to ensure accurate prompts for documentation, easier recording and safe storage, therefore safe guarding patients health, safety and welfare needs more streamline.</p>	<p>15/05/25</p> <p>07/07/25</p>	<p>Anne-Marie Williamson</p> <p>Anne-Marie Williamson</p>

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Independent Health Care Services) Regulations 2011			
Recommendation a: The service should ensure that information about the service's vision is available to patients (see page 11). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19	I aim to display my vision for the business will be displayed clearly on my web page. Also with in the clinic on the wall.	07/07/25	Anne-Marie Williamson
Recommendation b: The service should develop formalised aims and objectives with measurable key performance indicators to help monitor how well the service is being delivered (see page 11). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19	<ol style="list-style-type: none"> 1- I will send questionnaires to all my patient for feedback within 7 days of being seen. 2- I will actively encourage patients to leave any feedback on the business web page or social media at the time of appointment, verbally and displaying QR code. 3- I will document and monitor any returning patients, including analysis of any significant events. 4- Any complaints will be documented and responded to with the time frame. 	0707/25	Anne-Marie Williamson

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<p>Recommendation c: The service should follow its own participation policy for obtaining patient feedback and use this to inform service development (see page 13). Health and Social Care Standards: My Support, my life. I have confidence in the organisation providing my care and support. Statement 4.19</p>	<p>I will be adhering to the participation policy as documented above.</p>	<p>07/07/25</p>	<p>Anne-Marie Williamson</p>
<p>Recommendation d: The service should update its complaints policy and information to reflect the correct email address for Healthcare Improvement Scotland (see page 15). Health and Social Care Standards: My Support, my life. I have confidence in the organisation providing my care and support. Statement 4.11</p>	<p>The email on my complaints policy is updated and accurate.</p>	<p>15/05/25</p>	<p>Anne-Marie Williamson</p>

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<p>Recommendation e: The service should ensure that a written copy of any aftercare is provided to patients (see page 15). Health and Social Care Standards: My Support, my life. I am fully involved in all decisions about my care and support. Statement 2.9</p>	<p>All procedures within the clinic with have a written after care advice sheet.</p>	<p>07/07/25</p>	<p>Anne-Marie Williamson</p>
<p>Recommendation f: The service should develop and document a formal business contingency plan that sets out the arrangements for continuity of care for patients, in the event of the service closing for any reason (see page 16). Health and Social Care Standards: My Support, my life. I have confidence in the organisation providing my care and support. Statement 4.14</p>	<p>Develop a formal business continuity of care for patients plan.</p>	<p>07/07/25</p>	<p>Anne-Marie Williamson</p>

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<p>Recommendation g: 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 16). Health and Social Care Standards: My Support, my life. I have confidence in the organisation providing my care and support. Statement 4.19</p>	<p>I will have a slips trips and falls policy in place. Regular audits will be done as documented above.</p>	<p>07/07/25</p>	<p>Anne-Marie Williamson</p>
<p>Recommendation h: The service should obtain contain consent from the patient for the sharing of information with their GP and other medical staff in an emergency, if required in the patient care record. If the patient refuses, this should be documented (see page 20). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19.</p>	<p>The consent form will be updated to include this information.</p>	<p>15/05/25</p>	<p>Anne-Marie Williamson</p>

Name

Designation

Signature

Date

Anne-Marie Williamson

Managing Director/practitioner

AM Williamson

19 /05 /25

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.
- **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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