

Action Plan

Service Name:	Replenish Beauty
Service number:	00493
Service Provider:	Jonathan Rhodes
Address:	12 East Brighton Crescent, Portobello, Edinburgh, EH15 1LR
Date Inspection Concluded:	8 May 2025

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must notify Healthcare Improvement Scotland of certain matters as detailed in our notifications guidance (see page 17).</p> <p>Timescale – immediate</p> <p>Regulation 5(1)(b) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p>	The provider has notified Healthcare Improvement Scotland of certain matters as detailed in their notifications guidance (see page 17).	Done	Single practitioner practice.

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<p>Requirement 2: The provider must ensure patients' GP, next of kin or emergency contact details and consent for sharing relevant information with the patient's GP and other healthcare professionals in an emergency are documented in the patient care record (see page 21).</p> <p>Timescale – immediate</p> <p>Regulation 4(1) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p>	<p>The provider will ensure patients' GP, next of kin or emergency contact details and consent for sharing relevant information with the patient's GP and other healthcare professionals in an emergency are documented in the patient care record (see page 21).</p>	<p>Immediate</p>	<p>Single practitioner practice.</p>
<p>Requirement 3: The provider must improve the standard of record keeping in patient care records to ensure they contain a record of the outcome of the consultation, assessment, costs and the aftercare advice given to patients by the healthcare professional. Records must be signed, dated</p>	<p>The provider will improve the standard of record keeping in patient care records to ensure they contain a record of the outcome of the consultation, assessment, costs and the aftercare advice given to patients by the healthcare professional. Records must be signed, dated and timed by the healthcare professional (see page 21).</p>	<p>Immediate</p>	<p>Single practitioner practice.</p>

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<p>and timed by the healthcare professional (see page 21).</p> <p>Timescale – immediate</p> <p>Regulation 4 (a)(b)(c) The Healthcare Improvement Scotland (Requirements as to independent Health Care services) Regulation 2011</p>			
<p>Recommendation a: The service should ensure that information about the service's vision is available to patients (see page 12). Health and Social Care Standards: My support, my care. I have confidence in the organisation providing my care and support. Statement 4.19</p>	<p>The service has ensured that information about the service's vision is available to patients (see page 12). Health and Social Care Standards: My support, my care. I have confidence in the organisation providing my care and support. Statement 4.19</p>	<p>Done</p>	<p>Single practitioner practice.</p>

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<p>Recommendation b: The service should ensure the identified aims and objectives are available for all patients to view (see page 12). Health and Social Care Standards: My support, my care. I have confidence in the organisation providing my care and support. Statement 4.19</p>	<p>The service has ensured the identified aims and objectives are available for all patients to view (see page 12). Health and Social Care Standards: My support, my care. I have confidence in the organisation providing my care and support. Statement 4.19</p>	<p>Done</p>	<p>Single practitioner practice.</p>
<p>Recommendation c: The service should monitor and evaluate improvements made to determine whether actions taken have led to the intended improvement. Improvements should be shared with patients (see page 14). Health and Social Care Standards: My support, my care. I have confidence in the organisation providing my care and support. Statement 4.8</p>	<p>The service does monitor and evaluate improvements made to determine whether actions taken have led to the intended improvement. Improvements should be shared with patients (see page 14). Health and Social Care Standards: My support, my care. I have confidence in the organisation providing my care and support. Statement 4.8</p>	<p>Ongoing</p>	<p>Single practitioner practice.</p>

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<p>Recommendation d: The service should further develop its audit programme to include patient care record audits. Audit results should be documented, and action plans developed if required (see page 18). Health and Social Care Standards: My support, my care. I have confidence in the organisation providing my care and support. Statement 4.19</p>	<p>The service is further developing its audit programme to include patient care record audits. Audit results should be documented, and action plans developed if required (see page 18). Health and Social Care Standards: My support, my care. I have confidence in the organisation providing my care and support. Statement 4.19</p>	<p>Ongoing</p>	<p>Single practitioner practice.</p>
<p>Recommendation e: The service should further develop its quality improvement plan to ensure that all improvement activity information is recorded on one document. This should include areas for improvement identified through patient feedback, audits and complaints. Completion dates and planned timescales should be added to the documented (see page 18). Health and Social Care Standards: My support, my care. I have confidence in the organisation</p>	<p>The service is developing its quality improvement plan to ensure that all improvement activity information is recorded on one document. This should include areas for improvement identified through patient feedback, audits and complaints. Completion dates and planned timescales should be added to the documented (see page 18). Health and Social Care Standards: My support, my care. I have confidence in the organisation</p>	<p>Ongoing</p>	<p>Single practitioner practice.</p>

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providing my care and support. Statement
4.19

Name

Jonathan Rhodes

Designation

CEO Repelenish Beauty

Signature



Date

19 / 06 / 2025

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

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Guidance on completing the action plan.

- **Action Planned:** This must be 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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