

Action Plan

Service Name:	Glamour by Ania. Nurse-led Aesthetics
Service number:	02557
Service Provider:	Anna Narkiewicz
Address:	43 Drum Street, Edinburgh, EH17 8RQ
Date Inspection Concluded:	19 May and 15 July 2025

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Recommendation a: 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 8).	To develop formalised aims and objectives with measurable key performance indicators to help monitor how well the service is being delivered.	Done	Anna Narkiewicz
Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19			

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Recommendation b: The service should develop and implement a participation policy to document its approach to gathering and using feedback from patients (see page 10). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.8	To write up and implement a participation policy and include service approach to gathering and using feedback from patients.	ASAP	Anna Narkiewicz
Recommendation c: The service should implement a structured approach to gathering and analysing patient feedback to help continually improve the service (see page 10). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.8	To hand out feedback form for all service user.	ASAP	Anna Narkiewicz

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Recommendation d: The service should develop 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 12). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.14	To develop a formal business contingency plan.	ASAP	Anna Narkiewicz
Recommendation e: 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 12). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19	To start patient care record audit monthly.	ASAP	Anna Narkiewicz

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Name	Anna Narkiewicz			
Designation	Business owner			
Signature	Narkiewicz	Date	01 / 09 /2025	

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.

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• 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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