

Action Plan

Service Name:	Skin-Fresh Facial Aesthetics
Service number:	00881
Service Provider:	Skin-Fresh Ltd
Address:	203 Maryhill Road, Glasgow, G20 7XJ
Date Inspection Concluded:	7 July 2025

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must ensure that patient care records are readily available to all healthcare staff involved in meeting patients' health and care needs (see page 19).</p> <p>Timescale – immediate</p> <p><i>Regulation 4(3)(b) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>	<p>1. Skin fresh Aesthetic Practitioner ensures that all its own clients records, when updated with all relevant information, are filed and locked within its secure filing cabinets. Thus ensuring all are readily available, if required</p> <p>2. Skin Fresh (Scotland) Directors shall review this requirement with its Practicing Privilege Nurse (PPN) colleagues to ensure consistency and ease of accessibility if clinically required A filing cabinet shall be sourced for PPN use. These changes shall ensure that clients records are immediately accessible if required.</p>	<p>Ongoing</p> <p>Immediate</p>	<p>Directors</p> <p>Directors All PPNs within Skin-Fresh</p>
<p>Requirement 2: The provider must publish an annual duty of candour report (see page 19).</p> <p>Timescale – immediate</p>	<p>1. Skin Fresh (Scotland) Directors shall review this requirement ,provide report and diarise this yearly to provide an annual report in timeous manner</p>	<p>Immediate</p>	<p>Directors</p>

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<i>Regulation 5(2)</i> <i>The Healthcare Improvement Scotland (Inspections) Regulations 2011</i>			
Requirement 3: The provider must ensure that staff receive regular individual performance reviews and appraisals (see page 20). <i>Regulation 12(c)(i)</i> <i>The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i>	Skin Fresh (Scotland) Directors shall review this requirement with its Practicing Privileged Nurses (PPN) colleagues. To support this plan , the following shall be supported – 1. Development and use of a local Appraisal Tool 2. Review 6 monthly 3. Incorporate this within Team meetings 4. Director shall incorporate audit of PPN client records as evidence and to ensure consistency	Implementation by March 2026	Directors All PPNs within Skin-Fresh
Requirement 4: The provider must ensure that sharps are being managed and disposed of appropriately, in line with national infection prevention and control guidance (see page 24). Timescale – immediate <i>Regulation 3(d)(i)</i> <i>The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i>	Skin Fresh (Scotland) clinic has a comprehensive Policy insitu for the safe management and disposal of sharps. An outside contractor continues to be recruited to assist with this requirement. Immediate corrective measures shall include - 1. Ensure best and expected clinical practices for assembling, usage and disposal of sharps/boxes are followed at all times. 2. Review practices and knowledge base with PPNs 3. External Nurse shall continue to review this requirement and evidence findings within its local audit tool.	Immediate	Directors All PPNs within Skin-Fresh
Requirement 5: The provider must record patients’ next of kin, emergency contact details and consent to share information in the event of an emergency in the patient care record (see page 24). Timescale – immediate <i>Regulation 4(1)</i>	Skin Fresh (Scotland) clinic has various comprehensive Assessment Proformas in situ to support the expressed needs of visiting clients These currently include expressed themes of NOK and consent To support expressed “Requirements”, Skin Fresh shall add in theme of	Immediate	Directors All PPNs within Skin-Fresh
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<p><i>The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p> <p>This was previously identified as a recommendation in the November 2021 inspection report for Skin-Fresh Facial Aesthetics.</p>	<ol style="list-style-type: none"> 1. “NOK Emergency Contacts” and “Consent to Share Information in Event of an Emergency” 2. Skin Fresh shall also ensure that these Recommendations are also part of PPN assessment documentation 3. Ensure that these requirements are completed at each assessment 		
<p>Requirement 6: The provider must ensure that all staff, including those with practicing privileges, have appropriate, and documented, background and safety checks in place, and that all staff working under practicing privileges are enrolled in the Disclosure Scotland Protecting Vulnerable Groups (PVG) scheme by the provider (see page 24).</p> <p>Timescale – immediate</p> <p><i>Regulation 8(1) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p> <p>This was previously identified as a requirement in the November 2021 inspection report for Skin-Fresh Facial Aesthetics.</p>	<p>Skin Fresh has small group of PPNs whom are all NHS Nurse colleagues. All have a PVG Background checks for their primary NHS role.</p> <p>To best support their secondary role as PPN with Skin Fresh Aesthetic Clinic, all PPNs have been instructed to -</p> <ol style="list-style-type: none"> 1. Contact Disclosure Scotland Protecting Vulnerable Groups (PVG) and apply for a stand-alone application for their ongoing Aesthetics Practitioner role within Skin Fresh clinic setting 2. Once received, this shall be filed alongside their additional documentation requirements for PPN practices 	<p>Immediate</p>	<p>Directors All PPNs within Skin-Fresh</p>

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
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<p>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 14).</p> <p>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>Skin fresh Director continually reinforces that there is no significant plans to expand on its services Its goal remains to deliver a high standard of patient focused aesthetic treatments at more affordable prices for all.</p> <p>To support internal efforts and evidence for self-improvement and achievement for a quality service, Skin Fresh shall focus on the following</p> <ol style="list-style-type: none"> 1. Strategies/Audit for patients own experiences. 2. Ensure Complaints/Compliments, Duty of Candour reports are displayed 3. Explore social media usage to raise clinic profile and treatments offered 4. Endeavour to gain more structured feedback within clinic and online 5. Contemplate a “you said, we did” option within clinic 6. Incorporate measurable performance Indicators within its local team meetings 	<p>January 2026 and ongoing</p>	<p>Directors All PPNs within Skin-Fresh</p>
<p>Recommendation b: The service should formally record the minutes of team meetings. These should include any actions taken and those responsible for the actions (see page 15).</p> <p>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>Skin Fresh (Scotland) Directors has recently introduced Team Meetings for catch up/reviews with its Practicing Privileged Nurses (PPN) colleagues.</p> <p>There has been several with some initial challenges of appropriate timescale, challenges with all having a primary employment and family lifer balances. As a result, 3 monthly meetings are now 6 monthly.</p> <p>To support this plan –</p> <ol style="list-style-type: none"> 1. 6 monthly review meetings 2. Staff appraisals and audit of client records agreed 3. Director shall audit PPN client records to ensure reflect on best practices 4. Minutes are taken and circulated by email 	<p>January 2026 and ongoing</p>	<p>Directors All PPNs within Skin-Fresh</p>

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<p>Recommendation c: The service should develop and implement a structured approach to gathering, recording, evaluating and sharing feedback from those using the service to help continually improve the service (see page 17).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.8</p> <p>This was previously identified as a recommendation in the November 2021 inspection report for Skin-Fresh Facial Aesthetics.</p>	<p>Skin Fresh (Scotland) Directors has recently introduced Team Meetings for catch up/reviews with its Practicing Privileged Nurses (PPN) colleagues. There has been several with some initial challenges of appropriate timescale, challenges with all having a primary employment and family life balances. As a result, 3 monthly meetings are now 6 monthly.</p> <p>To support this plan –</p> <ol style="list-style-type: none">1. 6 monthly review meetings2. Staff appraisals and audit of client records agreed3. Director shall audit PPN client records to ensure reflect on best practices4. Minutes are taken and circulated by email5. Consideration of a PDSA <p>Patient Feedback - a good tool to aid this goal however uptake of this has always been challenging. To try increase this valuable contribution, Skin Fresh shall add a comments/feedback to bottom of all its assessment Proformas and verbally ask clients after treatment for immediate feedback</p> <p>Skin Fresh shall contemplate extending this to use of social media and trial “you said, we did...” task</p>	<p>January 2026 and ongoing</p>	<p>Directors All PPNs within Skin-Fresh</p>
<p>Recommendation d: The service should develop and implement an induction process for practitioners working under practicing privileges (see page 20).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the people who support and care for me. Statement 3.14</p>	<p>Skin Fresh has small group of PPNs whom are all NHS Nurse colleagues. All have a PVG Background checks for this primary NHS role.</p> <p>To best support their secondary role as PPN with Skin Fresh Aesthetic Clinic, all PPNs have been instructed to contact Disclosure Scotland Protecting Vulnerable Groups (PVG) and apply for a stand-</p>	<p>January 2026 and ongoing</p>	<p>Directors All PPNs within Skin-Fresh</p>
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	<p>alone application for utilising Skin Fresh clinic setting</p> <p>To support consistency, best practices and adherence to all Infection and Health and Safety requirements with clinic setting, the following shall be developed –</p> <ol style="list-style-type: none"> 1. A Local Induction template, detailing all required documentation to fulfil PPN role, review and signing of PPN Contract. 2. Full orientation within clinic, familiarity and how to source local policy documentation with all local policies, health and safety issues, 6 monthly meetings and external audit and clients records 3. Yearly review of Business Contract Agreement 		
<p>Recommendation e: The service should ensure that all policies and procedures are regularly reviewed to ensure they remain accurate and up to date and reflect practice in the service (see page 20).</p> <p>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>Skin Fresh (Scotland) clinic has comprehensive Policies , as identified by recent auditors themselves. All policies are reviewed, audited as per Matrix Tool, which evidences these ongoing practices.</p> <p>Escalation in Policies are completed on an as required basis, otherwise these are reviewed on an Annual or Bi annual basis</p> <p>PPN policy shall continue to be reviewed regularly</p>	January 2026 and ongoing	Directors

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<p>Recommendation f: The service should ensure that staff undertake duty of candour training (see page 20).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.4</p>	<ol style="list-style-type: none"> 1. All Health Professionals within Skin Fresh clinically setting undertake Duty of Candor training as part of mandatory training requirements within NHS 2. To evidence base this requirement, Skin Fresh (Scotland) Directors shall review this requirement and ask for certification of this training to be placed alongside other PPNs documentation 	<p>January 2026 and ongoing</p>	<p>Directors All PPNs within Skin-Fresh</p>
<p>Recommendation g: The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvement (see page 21).</p> <p>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>This was previously identified as a recommendation in the November 2021 inspection report for Skin-Fresh Facial Aesthetics. Amd robust</p>	<p>Skin fresh Director has continually reflected that there is no significant plans to expand on its services. Its goal is to deliver patient focused aesthetic treatments at more affordable prices for all. To support internal efforts and evidence for self-improvement and achievement for a quality service, Skin Fresh shall focus on the following to assist on a Quality improvement plan strategy</p> <ol style="list-style-type: none"> 1. Ensure Regulatory Compliance re All Practitioners are appropriately qualified and met national standards for Aesthetics Practice, adherence to age restrictions for treatments, keep updated with HIS legislation and guidelines 2. Support best practices for Patient Safety at all times re adherence to Infection Control and Health and safety requirements, comprehensive patient assessment and ensure true informed consent. 	<p>January 2026 and ongoing</p>	<p>Directors All PPNs within Skin-Fresh</p>

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	<div>3. Patient Experience – Always involved, informed and offering feedback on treatment and service</div> <div>4. Staff Qualifications and training – always appropriate, up to date and evidence of continually development</div> <div>5. Operational excellence – supported with robust audit monitoring, client feedback and Emergency Business protocols.</div> <div>6. Continuous Improvement – explore Strategies/Audit for feedback on patients own experiences, Incorporate a “You said, we did...” strategy, Continue with local audits and display results within Reception/waiting area and consideration of a PDSA</div>		
<div>Recommendation h: The service should produce a formal business continuity plan that sets out how patient aftercare and follow up will be managed if the business has to temporarily close or permanently cease trading (see page 21).</div> <div>Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.14</div>	<div>As an Aesthetics clinic with newly recruited PPNs, Skin Fresh is in a heightened position where the business itself requires to contemplate and introduce formal business contingency plan. This is now required to assist with management of service in situations such as illness absence, clinic environment emergency situations and support for clients if their aesthetic Nurse is unavailable</div> <div>To best support this, the following with occur-</div> <div><div>1. Discuss all with PPNs</div><div>2. Agree and compile a contingency plan for all possible eventualities</div><div>3. Contingencies to include what if business closed to adverse events, Annual Leave, sickness. Require immediate access to all</div></div>	<div>January 2026 and ongoing</div>	<div>Directors</div> <div>All PPNs within Skin-Fresh</div>
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	client records for potential contact requirements.		
<p>Recommendation i: The service should ensure audits of patient care records include the patient care records of all practitioners (see page 21).</p> <p>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>This was previously identified as a recommendation in the November 2021 inspection report for Skin-Fresh Facial Aesthetics.</p>	<p>Skin Fresh Aesthetic Practitioner currently has an external auditor whom reviews clients records, audits and presents outcomes.</p> <p>For Newly appointed PPNs, external auditor shall extend this role and present outcomes and recommendations</p>	January 2026 and ongoing	Directors All PPNs within Skin-Fresh
<p>Recommendation j: The service should ensure that all fixtures and fittings, including sanitary fittings and flooring, are in line with national infection prevention and control guidance. Where this is not achieved, a risk assessment should be carried out to reduce and control any risks (see page 24).</p> <p>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>Skin Fresh has a robust system for monitoring and audit its clinical setting for Health and Safety, Infection Control, Fire Safety and Legionella's requirements</p> <p>Skin Fresh Director is mindful of flooring and sink areas, which were all insitu prior to new regulatory requirement guidelines.</p> <p>These shall be replaced at some point in the future. Meantime, more monitoring and risk assessment shall be utilised to monitor these highlight areas</p>	January 2026 and ongoing	Directors

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Recommendation k: The service should complete and submit a self-evaluation as requested by Healthcare Improvement Scotland (see page 24). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19	Skin Fresh acknowledges request and shall complete and submit a Self Evaluation as requested (was attempted prior to actual audit inspection however IT issues were prevalent)	immediate	Directors
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Name	Richard Binning		
Designation	Director		
Signature	<i>Richard Binning</i>		
	Date	16 / 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.

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- **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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