

Action Plan

Service Name:	Nadcell Mindcare Limited
Organisation Number:	02252
Service Provider:	Nadcell Mindcare Limited
Address:	14 Newton Terrace, Glasgow, G3 7PJ
Date Inspection Concluded:	23 September 2025

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must ensure that instructions for the administration of vitamins, minerals and prescription-only medications are written in English (see page 20). Timescale – immediate <i>Regulation 3(a) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i>	Clinical director will source medications with English labels.	December 2025	Dr Lapa
Requirement 2: The provider must ensure an annual gas safety check is carried out on the gas boiler and system (see page 21). Timescale – by 23 January 2026	Clinical director will ensure the landlord of the property carried out the legal annual gas safety check and as per terms of lease	23 rd January 2026	Dr Lapa

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<p><i>Regulation 10(2)(b)</i> <i>The Healthcare Improvement Scotland</i> <i>(Requirements as to Independent Health</i> <i>Care Services) Regulations 2011</i></p>			
<p>Recommendation a: The service should implement a process to monitor and evaluate whether its aims and objectives are being achieved. The results should be shared with staff and patients (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>Service evaluation questionnaires and audits will be reviewed to align with the new aims and objectives of the service.</p> <p>Internal audits summary will be visible in the clinic setting</p>	<p>February 2026</p>	<p>Dr Lapa/BMcDonald</p>
<p>Recommendation b: The service should ensure that relevant information is shared with all staff working in the service, such as minutes of meetings, outcomes from audits and patient feedback (see page 16).</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>At present, there is only one locum member of staff working in the clinic and they have access to minutes of meetings, audits etc. The clinic performance and outcomes are consistently discussed with the locum member of staff however a formal process of sharing information will be developed to evidence the information is shared.</p>	<p>February 2026</p>	<p>Dr Lapa/BMcDonald</p>
<p>Recommendation c: 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 21).</p>	<p>Contingency plan will be developed</p>	<p>February 2026</p>	<p>Dr Lapa/BMcDonald</p>

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Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.14			
Recommendation d: The service should ensure that patient care records contain appropriate information detailing the assessment carried out by the practitioner and the aftercare provided (see page 23). Health and Social Care Standards: My life, My support. I have confidence in the organisation providing my care and support. Statement 4.11	The new Pabau system will be fully implemented with digital records kept of consultations. The after-care information is sent electronically automatically following clinical attendance.	January 2025	Dr Lapa/BMcDonald
Recommendation e: The service should ensure that a new medical questionnaire and consent form is completed for each treatment episode (see page 23). Health and Social Care Standards: My life, My support. I experience high quality care and support that is right for me. Statement 1.14	The new pabau system has the digital patient flow already embedded in the system which will evidence consent is given and medical questionnaire is completed prior to each visit.	January 2025	Dr Lapa/BMcDonald

Requirement carried forward from our March 2024 inspection

The provider must follow national weight management guidance and the practitioner must clearly document the following in the patient care record:	All clinical notes and rationale will be recorded in the Pabau digital records as required.	Immediate	Dr Lapa
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<p>a) the rationale for prescribing outwith national guidelines in respect of the patient's BMI b) the rationale for prescribing a centrally acting appetite suppressant for those patients in which it is contraindicated c) treatment plans, including follow up and monitoring d) a record of the written information provided to the patient including dietary, physical and lifestyle advice, and e) next of kin and patient's GP.</p> <p>Timescale – immediate</p> <p><i>Regulation 3 The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>			
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Name	Barbara McDonald RMN		
Designation	Health Care Consultant		
Signature	B McDonald	Date	30.11.25

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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 the timescale for completion is immediate. If you identify a requirement/recommendation timescale that you feel needs to be extended, include the reason why.
- Please do not name individuals or an easily identifiable person in this document. Use Job Titles.
- If you have any questions about your inspection, the requirements/recommendations or how to complete this action plan, please contact the lead inspector.

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