Action Plan

Service Name:	Luxe Skin by Doctor Q
Service number:	00290
Service Provider:	Quvent Limited
Address:	227 Ingram Street, Third Floor, Glasgow, G1 1DA
Date Inspection Concluded:	14 January 2026

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must notify Healthcare Improvement Scotland of certain matters as detailed in our notifications guidance (see page 18). Timescale – immediate Regulation 5(1)(b) The Healthcare Improvement Scotland (Applications and Registration) Regulations 2011	A formal incident notification protocol will be implemented. All incidents, accidents and adverse events will be recorded in a structured Incident Log. A notification checklist ensures reportable events are submitted to Healthcare Improvement Scotland in line with regulatory guidance.	31/3/26	Dr Usman Qureshi

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Requirement 2: The provider must develop effective systems that demonstrate the proactive management of risks to patients and staff (see page 19). Timescale – immediate Regulation 13(2)(a) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011	A comprehensive Risk Register will be implemented covering clinical, environmental and operational risks.	31/3/26	Dr Usman Qureshi
Requirement 3: The provider must develop a cleaning schedule which includes details on cleaning products, processes and records of completion of cleaning (see page 23). Timescale – immediate Regulation 3(d)(i) The Healthcare Improvement Scotland (Requirements as to	A detailed cleaning schedule will be introduced covering daily, weekly and monthly tasks. Cleaning products, frequency and completion records will be documented and signed after each clinic session.	31/3/26	Dr Usman Qureshi

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Independent Health Care Services) Regulations 2011			
Requirement 4: The provider must ensure that when unlicensed medicines are used that appropriate medicine governance arrangements are in place, including documented rationale for use and informed patient consent. This should be reflected in the medicines management policy (see page 23). Timescale – by 14 April 2026 Regulation 3(d)(iv) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011	Medicines Management Policy to be updated to include governance for unlicensed medicines. Patient records will include documented rationale. Consent forms will be amended.	14/4/26	Dr Usman Qureshi

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Requirement 5: The provider must demonstrate good medicine governance in line with current best practice guidelines for the prescribing and administration of emergency stock medication (see page 24). Timescale – immediate Regulation 3(d)(iv) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011	Emergency stock medicines will be prescribed and stored in line with best practice. A stock control and expiry date monitoring system to be in place and audited monthly.	31/3/26	Dr Usman Qureshi
Requirement 6: The provider must ensure patients' GPs, next of kin or emergency contact details, as well as consent to share information with other healthcare professionals in the event of an emergency situation, are documented appropriately in patient care records. If the patient refuses to provide the information, this should be documented (see page 24).	Electronic records updated to include mandatory fields for GP details, next of kin and consent to share information in emergencies.	2/3/26	Dr Usman Qureshi

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Timescale – by 14 April 2026 Regulation 4(1) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011 This was previously identified as a recommendation in the March 2020 inspection report for Luxe Skin by Doctor Q.			
Recommendation a: The service should implement a process to make sure that its aims and objectives are being met (see page 14). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19	A performance monitoring framework to be linked to clinic aims to measurable indicators including patient satisfaction, complication rates and audit outcomes. Quarterly governance review implemented.	31/5/26	Dr Usman Qureshi

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Recommendation b: The service should review its participation policy to include how it will inform patients about how their feedback has been used to improve the service (see page 16). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.8	Participation Policy to be updated to explain how feedback informs improvements and how changes are communicated to patients.	31/5/26	Dr Usman Qureshi
Recommendation c: The service should formalise its approach to reviewing and using feedback from patients to demonstrate how this is used to improve the quality of the service (see page 16). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.8	Structured digital feedback system to be implemented. Feedback to be analysed quarterly and actions recorded	31/8/26	Dr Usman Qureshi

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This was previously identified as a recommendation in the March 2020 inspection report for Luxe Skin by Doctor Q.			
Recommendation d: The service should implement a system to record any accidents, incidents and adverse events (see page 18). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.14	Formal Incident and Adverse Event Log implemented. This will be a digital log	31/3/26	Dr Usman Qureshi
Recommendation e: 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 19). Health and Social Care Standards: My support, my life. I have confidence in the	12-month audit programme to be implemented covering records, infection control, medicines management and patient feedback. Audit findings documented with action plans.	31/5/26	Dr Usman Qureshi

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organisation providing my care and support. Statement 4.19 This was previously identified as a recommendation in the March 2020 inspection report for Luxe Skin by Doctor Q.			
Recommendation f: The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvement (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 This was previously identified as a recommendation in the March 2020 inspection report for Luxe Skin by Doctor Q.	Formal Quality Improvement Plan to be implemented using Plan-Do-Study-Act methodology. Progress to be reviewed quarterly	31/8/26	Dr Usman Qureshi

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Recommendation g: The service should develop a contingency plan that sets out arrangements for patient aftercare and follow-up arrangements if the service ceased trading (see page 20). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.14	Business Continuity and Contingency Plan to be developed outlining patient aftercare arrangements and referral pathways if service ceases trading.	31/8/26	Dr Usman Qureshi
Recommendation h: The service should ensure that the clinical environment is free from clutter at all times. This would also help to facilitate effective cleaning (see page 24). Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.11	Decluttering protocol implemented. All rooms are now organised	2/3/26	Dr Usman Qureshi

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Name	Dr Usman Qureshi
Designation	Cosmetic Doctor / Owner
Signature	*[signature]*

Date 1 / 3 /2026

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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