

Action Plan

Service Name:	Coul Aesthetics
Service Number:	00380
Service Provider:	Coul Aesthetics Limited
Address:	61 High Street, Markinch, Fife, KY7 6DQ
Date Inspection Concluded:	27 March 2024

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Recommendation a: The service should develop and implement a process for measuring, recording and reviewing key performance indicators (see page 9).</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>The service is in the process of developing key performance indicators to include monitoring the safe care and treatment of patients.</p>	6 months	Maureen Thompson
<p>Recommendation b: The service should record patient consent for sharing relevant information with their GP and other healthcare professionals in an emergency, if required (see page 16).</p> <p>Health and Social Care Standards: My support, my life. I am fully involved in all</p>	<p>The service has implemented this recommendation</p>	Immediate	Maureen Thompson

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decisions about my care and support. Statement 2.14			
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Name	Maureen Thompson		
Desiation	Owner		
Signature	<i>M Thompson</i>	Date	10-06-2024

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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