

## Action Plan

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| Service Name:              | Face Factor Aesthetics                  |
| Service Number:            | 01251                                   |
| Service Provider:          | Skintech Aesthetics and Medispa Limited |
| Address:                   | 13 Milburn Street, Aberdeen, AB11 6SS   |
| Date Inspection Concluded: | 29 February 2024                        |

| Requirements and Recommendations  | Action Planned  | Timescale | Responsible Person |
|---|---|-----------|--------------------|
| <p><b>Requirement 1:</b> The provider must develop effective systems that demonstrate the proactive management of risk (see page 21). Timescale – by 21 May 2024</p> <p>Regulation 13(2)(a) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011.</p> <p>This was previously identified as a requirement in the February 2022 inspection report for Face Factor Aesthetics.</p> | <p>I shall add in accident book to ensure reporting of any accident and incident.</p> | 6 months  | J. Ma              |

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| <p><b>Requirement 2:</b> The provider must ensure that regular checks are carried out on the service's portable electrical appliances to ensure they are maintained in a safe condition (see page 21).</p> <p>Timescale – by 29 August 2024</p> <p>Regulation 3(a) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p> | <p>I have contacted and informed landlord to arrange an electrician regarding electrical PAT testing</p> | <p>12 months</p> | <p>J Ma</p>               |
| <p><b>Requirement 3:</b> The provider must complete and submit an annual return as requested by Healthcare Improvement Scotland (see page 25).</p> <p>Timescale – by 21 May 2024</p> <p>Regulation 5(1)(c) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p>   | <p>Completed already</p>   |                  | <p>J Ma</p>               |
| <p><b>Requirement 4:</b> The provider must improve the standard of record keeping in patient care records to ensure they contain a record of the outcome of the consultation, assessment and the aftercare advice given to patients by the healthcare professional. All records must be signed, dated and timed by the healthcare professional (see page 25).</p>                 | <p>Expand further on consultation form and document patients' expectations</p>                           | <p>3 months</p>  | <p>J Ma</p>               |
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| <p>Timescale – by 21 May 2024</p> <p>Regulation 4(2)(a)(b)(c) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p>   |   |                 |             |
| <p><b>Requirement 5:</b> The provider must ensure that patient care records set out how patients' health, safety and welfare needs will be met. As a minimum, this must the date and time at which any medication is administered or otherwise disposed of, including the batch number (see page 25).</p> <p>Timescale – by 21 May 2024</p> <p>Regulation 4(2)(d) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p> | <p>Add in share information with GP in emergency situation in consent</p>   | <p>3 months</p> | <p>J Ma</p> |
| <p><b>Requirement 6:</b> The provider must ensure that, when unlicensed medicines are used, appropriate medicine governance arrangements are in place, including documented rationale for use and informed patient consent (see page 25).</p> <p>Timescale – by 21 May 2024</p> <p>Regulation 3(d)(iv) The Healthcare Improvement Scotland (Requirements as to</p>   | <p>Inform patient when TorBac being used to dilute Botulinum Toxin since bacteriostatic saline is unlicensed, and I shall document this in treatment note</p> | <p>3 months</p> | <p>J Ma</p> |

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| Independent Health Care Services) Regulations 2011   |  |                   |                    |
| <p><b>Requirement 7:</b> The provider must ensure that as an independent clinic, any stock of medication that it holds must be able to be prescribed to individual patients (see page 25).</p> <p>Timescale – by 21 May 2024</p> <p>Regulation 3(d)(iv) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p> | Action has been taken to address this  | Completed         | J Ma               |
| <p><b>Requirement 8:</b> The provider must follow national guidance for the safe management and disposal of clinical waste including cytostatic sharps (see page 25).</p> <p>Timescale – by 21 May 2024</p> <p>Regulation 3(d)(iii) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</p>                     | Waste contract in place, and correct bin received  | Completed already | J Ma               |
| <p><b>Recommendation a:</b> The service should develop and implement a process for measuring, recording and reviewing its</p>  | Reviewing and recording process in place already, will update vision and future development plan | 6 months          | J Ma               |
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| vision, purpose, aims and objectives (see page 16).  |  |                 |      |
| <b>Recommendation b:</b> The service should formalise its approach to gathering feedback from patients to demonstrate how this is used to improve the quality of the service (see page 18)   | Encourage patient to leave review on public pages, such as fresha, google and facebook. Also uploaded participation policy already on HIS portal | 3 months        | J Ma |
| <b>Recommendation c:</b> The service should review and update its policies and procedure manual to ensure it includes the correct regulations governing independent healthcare services in Scotland, customise and align each policy to Scottish legislation and national guidance (see page 20).  | Review policy on annual basis  | 1 year          | J Ma |
| <b>Recommendation d:</b> The service should publish an annual duty of candour report (see page 20).  | Update duty of candour policy on HIS portal already  | 3 months        | J Ma |
| <b>Recommendation e:</b> The service should develop a programme of regular audits to cover key aspects of care and treatment, including medicines management, infection prevention and control, the safety and maintenance of the care environment and patient care records. Audits should be documented and improvement action plans implemented (see page 21). | Medication record audit twice a year<br>Patient care record audit annually   | 6 months-1 year | J Ma |

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| <b>Recommendation f:</b> The service should develop a quality improvement plan (see page 21).  | Medication record audit to review stock medication, to be undertaken in due course | 6 months-1 year | J Ma |
| <b>Recommendation g:</b> The service should develop and document 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).                              |  | 6 months-1 year | J Ma |
| <b>Recommendation h:</b> The service should complete and submit a self-evaluation as requested by Healthcare Improvement Scotland (see page 26).   | Completed already  | 6 months-1 year | J Ma |
| <b>Recommendation i:</b> The service should ensure that consent to share information with GPs and other relevant healthcare professionals is documented in the patient care records. If the patient refuses to consent to it, this should be documented (see page 26). | Add in to consent form for sharing of info with GP                                 | 3 months        | J Ma |
| <b>Recommendation j:</b> The service should review its documentation to ensure consent is clearly recorded for treatment (see page 26).  | Review consent form on the day of treatment  | 3 months        | J Ma |
| <b>Recommendation k:</b> The service should develop and implement an emergency arrangements policy to reflect how it will care for patients in the event of medical complication or emergency (see page 26).   |  | 3 months        | J Ma |

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| <b>Recommendation l:</b> The service should implement a process for ensuring that the correct dilution of cleaning solution is used for cleaning of sanitary fittings (including clinical wash hand basins) in line with national guidance (see page 26). |                                      | 3 months | J Ma |
| <b>Recommendation m:</b> The service should develop a checklist to capture the regular checking of medication (see page 26).  | Medication review checklist in place | 3 months | J Ma |

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|-------------|-----------------|-----------------|
| Name        | Josephine Ma    |                 |
| Designation | Clinic Director |                 |
| Signature   | J MA            | Date 05/05/2024 |

**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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