

Action Plan

Service Name:	MS Aesthetics
Service Number:	02210
Service Provider:	Marziyeh Strang
Address:	c/o The Cutting Room, 15-19 Cow Vennel, Perth, PH2 8PE
Date Inspection Concluded:	04 June 2024

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must ensure prescription-only medicines are only administered to the patient that they have been prescribed for (see page 14).</p> <p>Timescale – immediate</p> <p><i>Regulation 3(d)(iv) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>	<p>Prescription-only medications are administered to the patients that the medications prescribed for. This has been carried out shortly after the inspection took place.</p>	Done	Marziyeh Strang Clinic Manager
<p>Requirement 2: The provider must ensure that regular checks are carried out on the service's portable electrical</p>	<p>An electrician contacted to come to the clinic before 1st September 2024</p>	By end of August	Marziyeh Strang Clinic Manager

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<p>appliances to ensure they are maintained in a safe condition (see page 14).</p> <p>Timescale – by 1 September 2024</p> <p><i>Regulation 3(a) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>			
<p>Requirement 3: The provider must complete a fire risk assessment every year and replace fire safety equipment when required (see page 14).</p> <p>Timescale – by 1 September 2024</p> <p><i>Regulation 3(a) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>	<p>The landlord has been asked to arrange a fire risk assessment every year and replace fire safety equipment.</p>	<p>By 1st September</p>	<p>Marziyeh Strang Clinic Manager Stephen McCartney Landlord</p>
<p>Requirement 4: The provider must ensure that, once reconstituted, the botulinum toxin vial is only used for a single patient, during a single treatment session, and that any unused solution is discarded to comply with the manufacturer’s guidance for botulinum toxin (see page 17).</p>	<p>This has been carried out shortly after the inspection took place.</p>	<p>Done</p>	<p>Marziyeh Strang Clinic Manager</p>

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<p>Timescale – immediate</p> <p><i>Regulation 3(d)(iv) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>			
<p>Requirement 5: 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 (see page 18).</p> <p>Timescale – immediate</p> <p><i>Regulation 3(d)(iv) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>	<p>Online forms edited to include this: Prior to intramuscular injection, a reconstitute of each vacuum-dried vial of botulinum toxin must take place. At times, a bacteriostatic saline is used, instead of normal saline; this is classed as an off-label use. The main reason for the prescriber to choose to use bacteriostatic saline is for its analgesic effect and client comfort. When prescribing bacteriostatic saline for off license use, the prescriber must be satisfied that the decision to do so is in the best interest of the client and evidence based. Patients informed and consent obtained.</p>	<p>Done</p>	<p>Marziyeh Strang Clinic Manager</p>
<p>Requirement 6: The provider must ensure the outcome of every consultation or examination is documented in the patient care record. The details of every treatment provided, and medicine prescribed and administered to the patient, must also be documented (see page 18).</p>	<p>Every consultation or examination is recorded and documented in the patient record. The details of every treatment provided, and medicine prescribed and administered to the patient, documented. Proper information such as potential side effects and aftercare prior the procedure given to the clients and documented.</p>	<p>Done</p>	<p>Marziyeh Strang Clinic Manager</p>

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<p>Timescale – immediate</p> <p><i>Regulation 4(2)(b)(c)(d) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>			
<p>Recommendation a: The service should develop and implement a process for measuring its outcomes and key performance indicators for providing the service. These should be regularly evaluated to ensure they align with the service’s vision and be shared with patients (see page 10).</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 selecting Key Performance Indicators(KPLs), establishing data analysis and reporting process and sharing the results with the patients</p>	<p>June 2024</p>	<p>Marziyeh Strang Clinic Manager</p>
<p>Recommendation 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 15).</p>	<p>This has been implemented</p>	<p>June 2024</p>	<p>Marzi Strang Clinic Manager</p>

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<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>Recommendation c: The service should ensure that consent to share information with GPs and other relevant healthcare professionals is documented in the patient care record. If the patient refuses to consent, this should be documented (see page 18).</p> <p>Health and Social Care Standards: My support, my life. I am fully involved in all decisions about my care and support. Statement 2.14</p>	<p>This has been implemented</p>	<p>June 2024</p>	<p>Marzi Strang Clinic Manager</p>

Name	Marziyeh Strang
Designation	Clinic Manager
Signature	
Date	14/07/2024

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 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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