

Action Plan

Service Name:	Silver Apple Aesthetics
Service Number:	00779
Service Provider:	Wendy Boyle
Address:	Albina, Hillside, Portlethen, Aberdeen, AB12 4RB
Date Inspection Concluded:	12 June 2024

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must ensure that an emergency management policy is in place and clearly sets out how an emergency or adverse event would be dealt with, including out of hours (see page 16).</p> <p>Timescale – immediate</p> <p><i>Regulation 3a The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p>	Information which is already available for emergency management will be collated from previous locations ie portal and separate locations in clinic and put together in a policy format alongside any additional guidance deemed relative for inclusion within the policy.	24/7/24	Wendy Boyle

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<p>Requirement 2: The provider must document all consultations in the patient care records (see page 20).</p> <p>Timescale – immediate</p> <p><i>Regulation 4(2)(b) The Healthcare Improvement Scotland (Requirements as to Independent Health Care Services) Regulations 2011</i></p> <p>This was previously identified as a requirement in the March 2020 inspection report for Sliver Apple Aesthetics.</p>	<p>All consultations are recorded since changes were implemented following inspection in March 2020 requirement, however still room for improvement as requirement NOT FULLY MET by ensuring detailed initial consultation and treatment plans are duplicate for client to have to take away and copy to remain in clinic.</p> <p>The consultation document will be copied electronically as it is paper written and filed alongside patients photographs on secure electronic file.</p>	<p>Immediate following inspection – this had been implemented the day after the inspection</p>	<p>Clinic owner and practitioner</p>
<p>Recommendation a: The service should share its vision and purpose statement with patients (see page 12).</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>This information has been available on website for last 7 years.</p> <p>Plan – copy this information and put up on clinic wall – this was measure suggested by Inspector.</p>	<p>Complete 13/6/24</p>	<p>Clinic owner and practitioner</p>
<p>Recommendation b: The service should further develop its programme of regular audits to include infection prevention and control. Audits should be documented</p>	<p>Repeat current audits annually – Record keeping Client Feedback/Experience Cancellation Reasons</p>	<p>Ongoing</p>	<p>Clinic owner. HIS inspector.</p>

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<p>and improvement action plans implemented (see page 17).</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>Policy Accuracy (reviewed and up to date)</p> <p>Consider further areas of audit to perform.</p> <p>Awaiting a recommended audit format from Inspector as discussed at inspection – has been requested.</p>		
<p>Recommendation c: The service should record minutes of any meetings with other services (see page 17).</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>Meetings are not a regular part of clinic as sole practitioner.</p> <p>Minutes of Meetings any minutes with Industry Representatives, Insurance Companies and Waste Management or other will be recorded.</p>	Ongoing	Clinic Owner and Practitioner
<p>Recommendation d: The service should record patient consent for sharing information with their GP and other medical staff in an emergency, if required, in patient care record. If the patient refuses, this should be documented (see page 20).</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>Further improvement in adding in section into consultation document to evidence that this conversation has taken place and patients wishes.</p> <p>This recommendation will be met by improvement, information is already explained verbally when the client fills in sections on form for GP contact and Emergency contact as advised after inspection in March 2020.</p>	Completed 24/7/24	Clinic owner and practitioner

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This was previously identified as a recommendation in the March 2020 inspection report for Sliver Apple Aesthetics.			
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Name	Wendy Boyle	Date	24/7/24
Designation	Clinic Owner and Practitioner		
Signature	Wendy Boyle		

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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