

## **Action Plan**

Service Name:	Mr Skulpt Aesthetics Ltd
Service number:	02648
Service Provider:	Mr Skulpt Aesthetics Ltd
Address:	Units 6 and 7, 510 Main Street, Bellshill, ML4 1DL
Date Inspection Concluded:	28 October 2024

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must ensure that the patient care record is readily available to all health care staff involved in meeting the service user's health and welfare needs (see page 15). Timescale – by 31 January 2025	Each member of healthcare staff has appropriate PCR records readily available for the appropriate healthcare staff when required. In addition to this the service manager (non-healthcare professional) has additional access for audit and compliance purposes.	Implemented and on- going.	Clinic Manager – Jordan Healthcare Staff within the service.

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
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<b>Recommendation a</b> : The service should collate patient feedback obtained from the various methods to provide a more structured approach. This would further help when analysing feedback and being able to demonstrate the impact of change from the improvements made (see page 11).	We will come up with a patient feedback spreadsheet to document and collate patient feedback we receive.	January 2025	Clinic Manager - Jordan
<b>Recommendation b:</b> The service should ensure that practicing privileges staff are registered with the Information Commissioner's Office (see page 15).	P&P Staff have been advised to register with the ICO I have asked them to do this before the end of January 2025.	31/01/2025	P&P Staff & Clinic Manager – I will follow this up and get copies of each PP staffs ICO certs and keep them with their recruitment files.

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<b>Recommendation c</b> : The service should ensure that practicing privileges contracts are not signed until all background checks on staff have been completed (see page 15).	As already explained on the day of inspection – staff signed their contracts during the initial interviews for PP however they did not start working within the service until all background checks were completed. Going forward we will only have PP contracts signed AFTER all background checks are completed.	Ongoing	Clinic Manager
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Name	Jordan Morrison			
Designation	Clinic Manager & Aesthetic Practitioner	]		
Signature	Jordan Morrison	Date	18/12/2024	

In signing this form, you are confirming that you have the authority to complete it on behalf of the service provider.

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## 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.
- 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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