

Action Plan

Service Name:	Vida Medical & Aesthetics Ltd
Service number:	02176
Service Provider:	Vida Medical & Aesthetics Ltd
Address:	83 High Street, Grantown-on-Spey, PH26 3EW
Date Inspection Concluded:	4 December 2024

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must develop and maintain an effective system to demonstrate the proactive management of risks to patients and staff (see page 16). Timescale – by 4 March 2025	Update risk assessments	4 th March	Cara Brooks

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Requirement 2: 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 19). Timescale – by 4 March 2025	Add to consent forms	completed	Cara Brooks
Requirement 3: The provider must ensure that as an independent clinic, any stock of medication that they hold, must be able to be prescribed to individual patients (see page 19). Timescale – by 4 March 2025	Ensure stock medication can be prescribed to individual patients and record the process for this.	4 th March	Cara Brooks

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Recommendation a: The service should develop formalised aims and objectives with measurable key performance indicators to help monitor how well the service is being delivered (see page 11).	Develop business aims and objectives	4 th March	Cara Brooks
Recommendation b: The service should develop a structured method for obtaining patient feedback to formalise and direct the way it engages with its patients and uses their feedback to drive improvement (see page 13).	Generate a structured client feedback method	4 th March	Cara Brooks

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Recommendation c: The service should develop a programme of regular audits to cover key aspects of care and treatment. Audits should be documented, and improvement action plans implemented (see page 16).	Generate audit forms	4 th March	Cara Brooks
Recommendation d: The service should develop and implement a quality improvement plan to formalise and direct the way it drives and measures improvement (see page 16).	Undertake QI project	4 th March	Cara Brooks

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Recommendation e: The service should record minutes of any meetings with other services (see page 16).	Make a folder for any meeting either internal or with external agencies to record discussions formally	4 th March	Cara Brooks
Recommendation f: 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).	Add to consent form	4 th March	Cara Brooks

Name	Cara Brooks		
Designation	Director		
Signature		Date	



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

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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