

Action Plan

Service Name:	Hebridean Aesthetics
Service Number:	02106
Service Provider:	Lesley Leng Murray
Address:	10 Bells Road, Stornoway, Isle of Lewis, HS1 2RA
Date Inspection Concluded:	28 August 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Requirement 1: The provider must complete risk assessments of risks identified in the service and develop a risk register (see page 12). Timescale – immediate	Risk assessments will be completed, and risks identified. Risk register implemented	Immediate	Lesley L Murray
Recommendation a: The service should develop clear and measurable aims and objectives for patients to access (see page 8).	To Produce aims and objectives for Hebridean Aesthetics, and to make them accessible for patients to view on the website and social media	November 2023	Lesley L Murray
Recommendation b: The service should develop a more structured process of gaining regular patient feedback with a process of informing patients of how their feedback has been used to improve the service (see page 9).	To enhance the process of receiving feedback from patients and how their feedback has helped to improve the service	December 2023	Lesley L Murray

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Recommendation c: The service should ensure that patients know how to make a complaint (see page 11).	To improve the means of accessing how to make a complaint	November 2023	Lesley L Murray
Recommendation d: The service should develop a regular programme of clinical audits to demonstrate ongoing service improvement (see page 12).	To develop a regular programme of clinical audits to improve service delivery	December 2023	Lesley L Murray
Recommendation e: The service should develop and implement a quality improvement plan to demonstrate and direct the way it measures improvement (see page 12).	To provide a quality improvement plan	January 2023	Lesley L Murray

Name	Lesley L Murray	
Designation	Owner	
Signature	Lesley L Murray	
		Date 25/10/2023

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.

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- **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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