

Action Plan

Service Name:	Just Dreaming Aesthetics
Service Number:	02090
Service Provider:	Just Dreaming Aesthetics Limited
Address:	54 Hawthornden Avenue, Bonnyrigg, EH19 2JR
Date Inspection Concluded:	04 October 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Recommendation a: The service should ensure a process is in place to make sure the identified aims and objectives are measurable, and are being regularly reviewed and met (see page 10).	Ensuring in the future that aims and objectives at Just Dreaming Aesthetics LTD are measurable by collecting data from the clients who chose our service.	Reviewed annually	Director / Prescriber / Aesthetic Nurse Practitioner
Recommendation b: The service should develop a structured approach to gathering feedback, including how this then influences improvements and ensure that any feedback is shared with people using the service (see page 12).	It's now included in the aftercare questionnaire and follow up. Also, our website is under construction, and this will be included to gather feedback from the clients so that we can analyse the results and from there, implement changes to drive improvement to our service at Just Dreaming Aesthetics. Email survey directly out to the patient and will be gathered to publish through social media and website.	Reviewed quarterly	Director / Prescriber / Aesthetic Nurse Practitioner

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Recommendation c: The service should develop the existing cleaning schedule to include evidence of products used and demonstrate cleaning has been carried out (see page 14).	After the inspection, I took into consideration that I need to improve the cleaning in the clinic by adding the products that I use, i.e. chlorine-based cleaning agent to be specified in the cleaning schedule.	Reviewed weekly	Director / Prescriber / Aesthetic Nurse Practitioner
Recommendation d: The service should make its complaints process more widely available to patients, including publishing information on how to make a complaint on its website (see page 14).	Our website is currently under construction, and this will be included on how to make a complaint if anyone is dissatisfied with the service. This is included for the service user to complain to HIS and HIS address and contact number will also be on the website.	Reviewed monthly	Director / Prescriber / Aesthetic Nurse Practitioner
Recommendation e: The service should produce and publish an annual duty of candour report (see page 14).	The Just Dreaming Aesthetics LTD will always be honest with patients and if something goes wrong during treatment it will be documented and it's the practitioner's responsibility to follow the duty of candour policies.	Reviewed annually	Director / Prescriber / Aesthetic Nurse Practitioner
Recommendation f: The service should develop a programme of regular audits to cover key aspects of care and treatment, including medicines management, patient care records and the care environment. Audits should be documented and improvement action plans implemented (see page 15).	Just Dreaming Aesthetics LTD has recently started an electronic patient record system where it is a password protected and only the director / nurse practitioner / prescriber can access. This electronic record system has a link for treatment, what kind of medicine and so far, we are doing well using this. There will also be hard paper audits to be always kept at the premises, this will include the medicines management, i.e. checking expiration date. The premises is locked and only the owner can access via key.	Reviewed every six months	Director / Prescriber / Aesthetic Nurse Practitioner
Recommendation g: The service should expand its current programme of risk assessments used in the service to ensure that care and treatment is delivered in a safe	We are currently continuing to expand our range of risk assessments at Just Dreaming Aesthetics LTD for example, we must put down a slip proof mat and	Reviewed annually	Director / Prescriber / Aesthetic Nurse Practitioner

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environment. All risk assessments should then be regularly reviewed and updated (see page 15).	put a sign clearly marking the exit in case of an emergency.		
Recommendation h: The service should have a system in place for ensuring all fridge temperature checks carried out are recorded at the time along with any actions taken (see page 17).	Temperature checks will be done via hard paper form beside the fridge this will include time and any action taken will be documented also.	Reviewed every six months	Director / Prescriber / Aesthetic Nurse Practitioner

Name	Charina Sunugan Tamayo	
Designation	Director / Prescriber / Aesthetic Nurse Practitioner	
Signature	<i>Charina Tamayo</i>	
	Date	22/11/2023

Guidance on completing the action plan.

- **Action Planned:** This must be 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.

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- 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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