

Action Plan

Service Name:	Allure Aesthetics
Service number:	00252
Service Provider:	Allure Medical Aesthetics Ltd
Address:	1st Floor, 9 Helena Place, Busby Road, Clarkston, Glasgow, G76 7RB
Date Inspection Concluded:	28 November 2023

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Requirement 1: The provider must ensure that when products are not used according to the Summary of Product Characteristics that good medicine governance processes are in place, including obtaining informed patient consent (see page 16).</p> <p>Timescale – immediate</p>	<p>Additional information now included in consent form and policy for bacteriostatic saline now in place.</p>	<p>Completed</p>	<p>Clinical Director</p>

<p>Requirement 2: The provider must update the complaints policy to make it clear that patients can refer a complaint to Healthcare Improvement Scotland at any stage of the complaints process and include our contact details (see page 17).</p> <p>Timescale – immediate</p>	<p>HIS contact details changed from Glasgow to Edinburgh address and included on complaints policy.</p>	<p>Completed</p>	<p>Clinical Director</p>
<p>Requirement 3: The provider must develop effective systems that demonstrate the proactive management of risks to patients and staff. This must include:</p> <ul style="list-style-type: none"> -a comprehensive risk register, and - appropriate risk assessments to protect patients and staff (see page 18). <p>Timescale – by 9 May 2024</p>	<p>Risk assessments were unavailable on the day due to problem with software. Now printed off and kept in Risk Assessment folder with comprehensive risk register.</p>	<p>Completed</p>	<p>Clinical Director</p>

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Recommendation a: The service should further develop the key performance indicators to include monitoring the safe care and treatment of patients (see page 11).</p>	<p>KPI's now include any infection or complication rates and discussed at staff meetings even when there have been none recorded.</p>	<p>Completed</p>	<p>Clinical Director</p>

<p>Recommendation b: The service should implement a structured approach to gathering and analysing patient feedback to demonstrate the impact of improvements made (see page 13).</p>	<p>Patient feedback has always been obtained through our clinic software and reviewed weekly. We will now implement a quarterly patient survey to assess the impacts of any changes made.</p>	<p>Completed</p>	<p>Clinical Director</p>
<p>Recommendation c: The service should ensure staff have received governance procedures training including:</p> <ul style="list-style-type: none"> - duty of candour - complaints management - obtaining informed consent, and - safeguarding (public protection) (see page 17). 	<p>Staff are now booked onto relevant courses.</p>	<p>April 2024</p>	<p>Clinical Director</p>
<p>Recommendation d: The service should ensure a process is in place to contribute to and obtain appraisals for any staff members working under practicing privileges (see page 21).</p>	<p>Appraisal system now in place for staff working under practicing privileges.</p>	<p>Completed</p>	<p>Clinical Director</p>

Name	Donna Ward
Designation	Cinical Director
Signature	Date

Donna Ward

29/01/24

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 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.