

Inspection Report

9 November 2023



Skinworkz Beauty Limited

Type of service: Independent Hospital-Cosmetic Laser\Intense Pulsed Light

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Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/> [The Independent Health Care Regulations \(Northern Ireland\) 2005](#) and [Minimum Care Standards for Independent Healthcare Establishments \(July 2014\)](#)

1.0 Service information

Organisation/Provider: Skinworkz Beauty Limited	Registered Manager: Mr Mark Leacock
Responsible Individual: Mrs Karina Strojna	Date registered: 3 January 2020
Person in charge at the time of inspection: Mr Mark Leacock	
Categories of care: Independent Hospital (IH) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers PT(L)	
Brief description of how the service operates: Skinworkz Beauty Limited is registered with the Regulation and Quality Improvement Authority (RQIA) as an Independent Hospital (IH) with the following category of care: PT(L) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers. A tattoo studio also operates from the same premises and Skinworkz Beauty Limited and the tattoo studio share communal areas. This inspection focused solely on those treatments using a Class 4 laser that fall within regulated activity and the category of care for which the establishment is registered with RQIA. Mr Leacock told us that since the last inspection a new Cynosure Elite + laser had been purchased and was in use at the establishment. Mr Leacock confirmed that a Cynosure Elite + laser, serial number, 2208 ELM, that had been in use at the last inspection was now in storage. Skinworkz Beauty Limited also own and operate two other cosmetic laser services that are registered with RQIA.	
Equipment available in the service: Laser equipment: Manufacturer: Cynosure Model: RevLite SI Serial Number: RL5233 Laser Class: 4 Wavelength: 532 and 1064	

New laser equipment:

Manufacturer: Cynosure
 Model: Elite +
 Serial Number: ELM+ 2504
 Laser Class: 4
 Wavelength: 755 and 1064nm

Types of laser treatments provided:

Tattoo removal
 Hair removal
 Skin rejuvenation
 Thread veins

2.0 Inspection summary

This was an announced inspection, undertaken by a care inspector on 9 November 2023 from 10.00 am to 11.40 am.

The purpose of the inspection was to assess progress with areas for improvement identified during the last care inspection and to assess compliance with the legislation and minimum standards.

There was evidence of good practice concerning staff recruitment; authorised operator training; safeguarding; laser safety; management of medical emergencies; infection prevention and control; adherence to best practice guidance in relation to COVID-19; the management of clinical records; and effective communication between clients and staff.

Additional areas of good practice identified included maintaining client confidentiality, ensuring the core values of privacy and dignity were upheld and providing the relevant information to allow clients to make informed choices.

No immediate concerns were identified regarding the delivery of front line client care.

3.0 How we inspect

RQIA is required to inspect registered services in accordance with legislation. To do this, we gather and review the information we hold about the service, examine a variety of relevant records, meet and talk with staff and management and observe practices on the day of the inspection.

The information obtained is then considered before a determination is made on whether the establishment is operating in accordance with the relevant legislation and minimum standards. Examples of good practice are acknowledged and any areas for improvement are discussed with the person in charge and detailed in the quality improvement plan (QIP).

4.0 What people told us about the service

Clients were not present on the day of the inspection and client feedback was assessed by reviewing the most recent client satisfaction surveys completed by Skinworkz Beauty Limited.

Posters were issued to Skinworkz Beauty Limited by RQIA prior to the inspection inviting clients and staff to complete an electronic questionnaire. No completed client or staff questionnaires were submitted to RQIA prior to the inspection.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

The last inspection to Skinworkz Beauty Limited was undertaken on 13 January 2023; no areas for improvement were identified.

5.2 Inspection outcome

5.2.1 How does this service ensure that staffing levels are safe to meet the needs of clients?

Mr Leacock told us there are sufficient staff in the various roles to fulfil the needs of the establishment and clients.

Mr Leacock confirmed that laser treatments are only carried out by authorised operators. A register of authorised operators for the lasers is maintained and kept up to date.

A review of training records evidenced that authorised operators have up to date training in core of knowledge training, application training for the equipment in use, basic life support, infection prevention and control, fire safety awareness and safeguarding adults at risk of harm in keeping with the RQIA training guidance.

It was confirmed that induction training is provided to new staff on commencement of employment.

No other staff are employed at the establishment, therefore no other staff were identified as requiring laser safety awareness training.

It was determined that appropriate staffing levels were in place to meet the needs of clients and that staff are suitably trained.

5.2.2 How does the service ensure that recruitment and selection procedures are safe?

There have been no authorised operators recruited since the previous inspection. During discussion Mr Leacock confirmed that should authorised operators be recruited in the future all recruitment documentation as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 would be sought and retained for inspection.

Discussion with Mr Leacock confirmed that he had a clear understanding of the legislation and best practice guidance in relation to recruitment and selection.

It was determined that the recruitment of authorised operators complies with the legislation and best practice guidance.

5.2.3 How does the service ensure that it is equipped to manage a safeguarding issue should it arise?

Mr Leacock stated that laser treatments are not provided to persons under the age of 18 years.

A policy and procedure was in place for the safeguarding and protection of adults at risk of harm. The policy included the types and indicators of abuse and distinct referral pathways in the event of a safeguarding issue arising with an adult. The relevant contact details were included for onward referral to the local Health and Social Care Trust should a safeguarding issue arise.

Discussion with Mr Leacock confirmed that he was aware of the types and indicators of abuse and the actions to be taken in the event of a safeguarding issue being identified.

Review of records demonstrated that Mrs Strojna, as the safeguarding lead, has completed formal training in safeguarding adults. During a previous inspection to one of the other Skinworkz Beauty Limited establishments in November 2023, Mrs Strojna had been advised to undertake formal level two safeguarding training in keeping with the Northern Ireland Adult Safeguarding Partnership (NIASP) training strategy (revised 2016) and minimum standards. Following this inspection RQIA received confirmation that this matter had been addressed.

It was confirmed that a copy of the regional guidance document entitled Adult Safeguarding Prevention and Protection in Partnership (July 2015) was available for reference.

It was determined that the service had appropriate arrangements in place to manage a safeguarding issue should it arise.

5.2.4 How does the service ensure that medical emergency procedures are safe?

All authorised operators had up to date training in basic life support and were aware of what action to take in the event of a medical emergency. There was a written protocol in place for dealing with recognised medical emergencies.

It was determined that the service had appropriate arrangements in place to manage a medical emergency.

5.2.5 How does the service ensure that it adheres to infection prevention and control (IPC) and decontamination procedures?

The IPC arrangements were reviewed throughout the establishment to evidence that the risk of infection transmission to clients, visitors and staff was minimised.

There was an overarching IPC policy and associated procedures in place. A review of these documents demonstrated that they were comprehensive and reflected legislation and best practice guidance.

The laser treatment room was clean and clutter free. Discussion with Mr Leacock evidenced that appropriate procedures were in place for the decontamination of equipment between use. Hand washing facilities were available and adequate supplies of personal protective equipment (PPE) were provided. As discussed previously, authorised operators had up to date training in IPC.

It was determined that the service had appropriate arrangements in place in relation to IPC and decontamination.

5.2.6 Are arrangements in place to minimise the risk of COVID-19 transmission?

The management of operations to minimise the risk of COVID-19 transmission were discussed with Mr Leacock who outlined the measures taken by Skinworkz Beauty Limited to ensure current best practice measures are in place.

It was determined the management of COVID-19 was in line with best practice guidance and appropriate actions had been taken in this regard.

5.2.7 How does the service ensure the environment is safe?

The premises were maintained to a good standard of maintenance and décor. Cleaning schedules for the establishment were in place.

Observations made evidenced that a carbon dioxide (CO₂) fire extinguisher is available which has been serviced within the last year.

It was determined that appropriate arrangements were in place to maintain the environment.

5.2.8 How does the service ensure that laser procedures are safe?

A laser safety file was in place which contained the relevant information in relation to laser equipment. There was written confirmation of the appointment and duties of a certified laser protection advisor (LPA) which is reviewed on an annual basis. The service level agreement between the establishment and the LPA was reviewed and this expires on 31 December 2023.

Up to date, local rules were in place which have been developed by the LPA. The local rules contained the relevant information about the laser equipment being used.

The establishment's LPA completed a risk assessment of the premises during October 2023 and all recommendations made by the LPA have been addressed.

Mr Leacock confirmed that laser procedures are carried out following medical treatment protocols. The medical treatment protocols had been produced by a named registered medical practitioner. It was demonstrated that the protocols contained the relevant information about the treatments being provided and are due to expire during September 2024. It was established that systems are in place to review the medical treatment protocols when due.

Mrs Strojna, as the laser protection supervisor (LPS) has overall responsibility for safety during laser treatments and a list of authorised operators is maintained. Authorised operators had signed to state that they had read and understood the local rules and medical treatment protocols.

When the laser equipment is in use, the safety of all persons in the controlled area is the responsibility of the LPS.

The environment in which the laser equipment is used was found to be safe and controlled to protect other persons while treatment is in progress. The controlled area is clearly defined and not used for other purposes, or as access to areas, when treatment is being carried out.

The door to the treatment room is locked when the laser equipment is in use but can be opened from the outside in the event of an emergency. Mr Leacock was aware that the laser safety warning sign should only be displayed when the laser equipment is in use and removed when not in use.

The laser equipment is operated using a key. Arrangements are in place for the safe custody of the key when not in use. Protective eyewear is available for the client and operator as outlined in the local rules.

Skinworkz Beauty Limited has two laser registers.

Mr Leacock told us authorised operators complete the relevant section of the register every time the equipment is operated. The registers reviewed included:

- the name of the person treated
- the date
- the operator
- the treatment given
- the precise exposure
- any accident or adverse incident

There are arrangements in place to service and maintain the laser equipment in line with the manufacturer's guidance. The installation report for the new laser and the most recent service reports for the existing laser were reviewed.

It was determined that appropriate arrangements were in place to operate the laser equipment.

5.2.9 How does the service ensure that clients have a planned programme of care and have sufficient information to consent to treatment?

Mr Leacock confirmed that clients are provided with an initial consultation to discuss their treatment and any concerns they may have. There is written information for clients that provides a clear explanation of any treatment and includes effects, side-effects, risks, complications and expected outcomes.

The service has a list of fees available for each laser procedure. Fees for treatments are agreed during the initial consultation and may vary depending on the type of treatment provided and the individual requirements of the client.

During the initial consultation each client's personal information is recorded including their general practitioner (GP) details in keeping with legislative requirements and clients are asked to complete a health questionnaire.

Three client care records were reviewed. One client care record did not include a record of the date the patch test was undertaken. Another client care record did not include the signature of the authorised operator on the record of client details or medical history. A third client record was reviewed and found to be full and complete. These areas were discussed with Mr Leacock who gave us assurances that an audit of client records would be undertaken to ensure that there is an accurate and up to date treatment record for every client which includes:

- client details
- medical history
- signed consent form
- skin assessment (where appropriate)
- patch test (where appropriate)
- record of treatment delivered including number of shots and fluence settings (where appropriate)

Observations made evidenced that client records are securely stored. A policy and procedure was available which included the creation, storage, recording, retention and disposal of records and data protection.

The service has a policy for advertising and marketing.

It was determined that appropriate arrangements were in place to ensure that clients have a planned programme of care and have sufficient information to consent to treatment.

5.2.10 How does the service ensure that clients are treated with dignity, respect and are involved in the decision making process?

Discussion with Mr Leacock regarding the consultation and treatment process confirmed that clients are treated with dignity and respect. The consultation and treatment are provided in a private room with the client and authorised operator present. Information is provided to the client in verbal and written form at the initial consultation and subsequent treatment sessions to allow the client to make choices about their care and treatment and provide informed consent.

Mr Leacock told us that clients are provided with the opportunity to complete a satisfaction survey when their treatment is complete and can use a social media platform to leave a review. The results of these are collated to provide an anonymised summary report which is made available to clients and other interested parties. Mr Leacock confirmed that an action plan would be developed to inform and improve services provided, if appropriate.

Review of the most recent client satisfaction report dated, October 2023, found that clients were highly satisfied with the quality of treatment, information and care received.

It was determined that appropriate arrangements were in place to ensure that clients are treated with dignity, respect and are involved in decisions regarding their choice of treatment.

5.2.11 How does the registered provider assure themselves of the quality of the services provided?

Where the business entity operating the service is a corporate body or partnership or an individual owner who is not in day to day management of the practice, unannounced quality monitoring visits by the registered provider must be undertaken and documented every six months; as required by Regulation 26 of The Independent Health Care Regulations (Northern Ireland) 2005.

Mr Leacock is the nominated individual with overall responsibility for the day to day management of this establishment. As Mrs Strojna as the responsible individual is not in day to day charge of the establishment, Regulation 26 unannounced visits must be undertaken. The arrangements for Regulation 26 unannounced visits were discussed with Mr Leacock as they had not as yet been undertaken at this establishment. Mr Leacock provided assurances that unannounced Regulation 26 visits would be undertaken on a six monthly basis with immediate effect. RQIA had recently confirmed that six monthly Regulation 26 unannounced visits are undertaken in another Skinworkz Beauty Limited service and are satisfied that a similar arrangement will be implemented for this service. Mr Leacock also confirmed that the Regulation 26 visits would include a review of the audit of client records to ensure that they comply with the Minimum Care Standards for Independent Healthcare Establishments (July 2014). Mr Leacock is aware that a copy of the reports of the unannounced monitoring visits along with any identified actions are to be retained and made available for inspection.

Policies and procedures were available outlining the arrangements associated with the laser treatments. Observations made confirmed that policies and procedures were indexed, dated and systematically reviewed on a three yearly basis or more frequently if required.

The arrangements for the management of complaints and incidents were reviewed to ensure that they were being managed in keeping with legislation and best practice guidance.

The complaints policy and procedure provided clear instructions for clients and staff to follow. Clients were made aware of how to make a complaint by way of the client's guide.

Arrangements were in place to record any complaint received in a complaints register and retain all relevant records including details of any investigation undertaken, all communication with complainants, the outcome of the complaint and the complainant's level of satisfaction.

A review of records and discussion with Mr Leacock concerning complaints evidenced that complaints had been managed in accordance with best practice guidance.

Discussion with Mr Leacock confirmed that an incident policy and procedure was in place which includes the reporting arrangements to RQIA. Mr Leacock confirmed that incidents are/would be effectively documented and investigated in line with legislation. All relevant incidents are reported to RQIA and other relevant organisations in accordance with legislation and RQIA [Statutory Notification of Incidents and Deaths](#). Arrangements are in place to audit adverse incidents to identify trends and improve service provided.

Mr Leacock demonstrated a clear understanding of his role and responsibility in accordance with legislation.

Mr Leacock confirmed that the statement of purpose and client's guide are kept under review, revised and updated when necessary and available on request.

The RQIA certificate of registration was displayed in a prominent place.

Observation of insurance documentation confirmed that current insurance policies were in place.

The establishment is registered with the Information Commissioners Office (ICO).

It was determined that suitable arrangements are in place to enable the registered person to assure themselves of the quality of the services provided.

5.2.12 Does the service have suitable arrangements in place to record equality data?

The arrangements in place in relation to the equality of opportunity for clients and the importance of staff being aware of equality legislation and recognising and responding to the diverse needs of clients was discussed with Mr Leacock.

6.0 Quality Improvement Plan/Areas for Improvement

	Regulations	Standards
Total number of Areas for Improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mr Leacock, Responsible Individual, as part of the inspection process and can be found in the main body of the report.



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