

Inspection Report

15 July 2021











Laserway Laser Clinic

Type of service: Independent Hospital (IH) –
Cosmetic Laser and Intense Pulse Light (IPL) Service
Address: 45 Eglantine Road, Lisburn, BT27 5RQ
Tel No. 077 3909 9039

www.rqia.org.uk

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 the Minimum Care Standards for Independent Healthcare
Establishments (July 2014)

1.0 Service information

Organisation/Registered Provider: Registered Manager:

Laser Room Cosmetics Limited Ms Emily Rowan

Responsible Individual: Date registered:

Ms Emily Rowan 24 February 2017

Person in charge at the time of inspection:

Ms Emily Rowan

Categories of care:

Independent Hospital (IH)

PT(L) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers and PT(IL) Prescribed techniques or prescribed technology: establishments using intense light sources

Brief description of how the service operates:

Laserway Laser Clinic is registered as an Independent Hospital (IH) with the following categories of care: PT (L) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers and PT (IL) Prescribed techniques or prescribed technology: establishments using intense light sources. The establishment provides a range of cosmetic/aesthetic treatments. This inspection focused solely on those treatments that fall within regulated activity and the categories of care for which the establishment is registered with the Regulation and Quality Improvement Authority (RQIA).

Equipment available in the service:

Laser equipment

Manufacturer: Candela Max Model: Pro Alexandrite

Serial Number: 991490200754

Laser Class: Class 4

Manufacturer: Alma
Model: Harmony
Serial Number: LV202322
Laser Class: Class 4

IPL equipment

Manufacturer: Ellipse

Model: Flex 9FLX0833-D06

Serial Number: 02011009

Laser Class: IPL

The Alma Harmony laser was not onsite during the inspection. This laser is stored offsite and is only brought to the establishment when it is needed. Ms Rowan confirmed this laser is onsite approximately every four to five weeks and that the appropriate protective eyewear accompanies the laser.

Laser protection advisor (LPA):

Dr Godfrey Town (Medical Scientific Consultancy)

Laser protection supervisor (LPS):

Ms Emily Rowan

Medical support services:

Dr Ross Martin

Authorised operators:

Ms Emily Rowan
Ms Rachel Murphy

Ms Shannon Steed (nee Boyle)

Types of laser treatments provided:

Hair reduction, tattoo removal, skin rejuvenation including vascular and pigmented blemishes, photo rejuvenation general and pigmented lesion treatments

Types of IPL treatments provided:

Skin rejuvenation, acne treatment and wrinkle reduction

2.0 Inspection summary

This was an announced inspection, undertaken by a care inspector on 15 July 2021 from 9.40 am to 11:45 am.

Due to the COVID-19 pandemic the Northern Ireland (NI) Executive issued The Health Protection (Coronavirus, Restrictions) (No. 2) (Amendment) Regulations (Northern Ireland) 2020. These regulations specified close contact services that should close for identified periods of time; as a result of these periods of closure Laserway Laser Clinic was not inspected by RQIA during the 2020-21 inspection year.

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 authorised operator training; safeguarding; laser and IPL safety; management of medical emergencies; infection prevention and control (IPC); 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.

One area for improvement was identified which is discussed in the main body of the report and detailed in the quality improvement plan (QIP) in Section 7.0.

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 a report generated by Laserway Laser Clinic from completed client satisfaction surveys. The report evidenced clients were highly satisfied with the quality of treatment, information and care received. Clients commented on the professionalism, knowledge and friendliness of staff and felt they had received an excellent service.

Posters were issued to Laserway Laser Clinic by RQIA prior to the inspection inviting clients and staff to complete an electronic questionnaire. No completed client questionnaires were submitted to RQIA prior to the inspection. One completed staff questionnaire was submitted, the staff member felt client care was safe, effective, that clients were treated with compassion and that the service was well led. This staff member indicated that they were very satisfied with each of these areas of client care.

5.0 The inspection

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

Areas for improvement from the last inspection on 10 September 2019			
Action required to ensure compliance with the Minimum Care		Validation of	
Standards for Independent Healthcare Establishments (July 2014) compliance			
Area for Improvement 1	The registered person shall provide		
, o	confirmation to RQIA that the identified		
Ref: Standard 48.12	authorised operator has undertaken safe	Met	
	application training in respect of the laser	Wict	
Stated: First time	machines in place and the treatments		
	provided. Verification of this training should		
	be submitted upon return of the QIP.		

Action taken as confirmed during the inspection: This area for improvement has been assessed as met, further detail is provided in section 5.2.1.	

5.2 Inspection outcome

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

Ms Rowan told us that there is sufficient staff in the various roles to fulfil the needs of the establishment and clients. It was confirmed that treatments using the laser and IPL machines are only carried out by authorised operators. A register of authorised operators for the laser and IPL machines is maintained and kept up to date.

A review of training records evidenced that all authorised operators had up to date training in core of knowledge; 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. This addresses the previous area for improvement 1 against the standards as outlined in section 5.1.

Laserway Laser Clinic does not employ any other support staff. Ms Rowan is aware that should staff be employed that are not directly involved in the use of the laser or IPL machines they must undertake laser safety awareness training.

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

One authorised operator has been recruited since the previous inspection. The personnel file for this authorised operator was reviewed. All documents as specified in Regulation 19 (2), Schedule 2 as amended had been sought and retained. It was noted that the contract of employment was signed and dated during October 2020 and that the AccessNI enhanced disclosure check for this authorised operator was issued on 7 May 2021, some eight months after the employment contract was signed.

This was discussed with Ms Rowan who told us the identified authorised operator was recruited during a period that Laserway Laser Clinic as a close contract service was directed to close. Ms Rowan took the opportunity to train the newly recruited authorised operator during this period of closure. Ms Rowan also stated that all newly recruited authorised operators must shadow an experienced authorised operator for a period of six months before they are permitted to treat clients.

Ms Rowan was unclear as to the exact date the identified operator started work in the clinic once they were permitted to reopen. Therefore the laser and IPL registers were reviewed to identify the first occasion the identified authorised operator had signed the register, this was on the 29 April 2021, approximately one week before the AccessNI certificate was issued.

It was reinforced that authorised operators must not commence work until such times as an AccessNI enhanced disclosure check has been sought and reviewed. Ms Rowan told us that as this authorised operator was supervised at all times and that she had seen AccessNI enhanced disclosure checks for the identified authorised operator issued during August and December 2019 she had considered that it was safe for them to commence work. An area for improvement against the regulations has been identified.

There were robust recruitment and selection policies and procedures, that adhered to legislative and best practice that ensured suitably skilled and qualified staff work in the establishment. Adherence to these recruitment policies and procedures will ensure that all required recruitment documentation will be sought and retained for inspection. Discussion with Ms Rowan evidenced that she is aware 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 should be sought and retained for inspection.

Ms Rowan confirmed that should authorised operators be recruited in the future they would undertake an induction programme on commencement of employment. A completed induction programme was available for the most recently recruited authorised operator.

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

Ms Rowan told us that laser and IPL treatments are not provided to persons under the age of 18 years.

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

Discussion with Ms Rowan demonstrated that she 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 Ms Rowan, as the safeguarding lead, has completed formal training in safeguarding adults in keeping with the Northern Ireland Adult Safeguarding Partnership (NIASP) training strategy (revised 2016) and minimum standards.

It was confirmed that copies of the regional policy entitled <u>Co-operating to Safeguard Children and Young People in Northern Ireland (August 2017)</u> and the regional guidance document entitled <u>Adult Safeguarding Prevention and Protection in Partnership (July 2015)</u> were both available for reference.

Laserway Laser Clinic 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 Ms Rowan was aware of what action to take in the event of a medical emergency.

There was a resuscitation policy in place and a review of this evidenced that it was comprehensive, reflected legislation and best practice guidance.

Laserway Laser Clinic 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 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 in all areas.

The laser and IPL treatment rooms were clean and clutter free. Discussion with Ms Rowan 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 has up to date training in infection prevention and control.

Laserway Laser Clinic 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?

COVID-19 has been declared as a public health emergency and we all need to assess and manage the risks of COVID-19, and in particular, businesses need to consider the risks to their clients and staff.

The management of operations in response to the COVID-19 pandemic were discussed with Ms Rowan who outlined the measures taken by Laserway Laser Clinic to ensure current best practice measures are in place. Appropriate arrangements are in place in relation to maintaining social distancing; implementation of enhanced IPC procedures; and the client pathway to include COVID-19 screening prior to attending appointments.

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

5.2.7 How does the service ensure the environment is safe?

The service has two treatment rooms and access to storage rooms. 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 and IPL procedures are safe?

A laser safety file was in place which contained the relevant information in relation to laser and IPL equipment. There was written confirmation of the appointment and duties of a certified LPA which is reviewed on an annual basis. The service level agreement between the establishment and the LPA was reviewed and this expires on 6 June 2022.

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

The establishment's LPA completed a risk assessment of the premises during June 2019 and all recommendations made by the LPA have been addressed.

Ms Rowan told us that laser and IPL procedures are carried out following medical treatment protocols. The medical treatment protocols had been produced by a named registered medical practitioner and are due to expire during October 2021. Systems are in place to review the medical treatment protocols when due. The medical treatment protocols contained the relevant information about the treatments being provided.

Ms Rowan, as the laser protection supervisor (LPS) has overall responsibility for safety during laser and IPL treatments and a list of authorised operators is maintained. Arrangements are in place for another authorised operator, who is suitably skilled to fulfil the role, to deputise for the LPS in their absence. Authorised operators had signed to state that they had read and understood the local rules and medical treatment protocols.

When the laser and IPL 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 and IPL equipment is used was found to be safe and controlled to protect other persons while treatment is in progress. The door to the treatment room is locked when the laser or IPL equipment is in use but can be opened from the outside in the event of an emergency.

Both lasers are operated using a key and the IPL machine is operated using a keypad code. Arrangements are in place for the safe custody of the keys and keypad code when not in use. Protective eyewear is available for the client and operator as outlined in the local rules.

The controlled area is clearly defined and not used for other purposes, or as access to areas, when treatment is being carried out. Ms Rowan was aware that the laser safety warning signs should only be displayed when the laser or IPL equipment is in use and removed when not in use.

Separate registers are in place for the lasers and IPL equipment. Ms Rowan told us that the registers are completed every time the equipment is operated, the registers include:

- 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 and IPL equipment in line with the manufacturer's guidance. The most recent service report of the Candela laser and Elipse IPL machines were dated June 2021 and the service report for the Alma laser was dated July 2021.

It was determined that appropriate arrangements were in place to operate the laser and IPL 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?

Clients are provided with an initial consultation to discuss their treatment and any concerns they may have. Written information is provided to the client pre and post treatment which outlines the treatment provided, any risks, complications and expected outcomes. The service has a list of fees available for each laser and IPL 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, clients are asked to complete a health questionnaire. There are systems in place to contact the client's general practitioner (GP), with their consent, for further information if necessary.

Seven client care records were reviewed. There was an accurate and up to date treatment record for every client which included:

- 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.

There is written information for clients that provides a clear explanation of any treatment and includes effects, side-effects, risks, complications and expected outcomes. Information is jargon free, accurate, accessible, up-to-date and includes the cost of the treatment.

Laserway Laser Clinic has a policy for advertising and marketing which is in line with legislation.

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 Ms Rowan 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.

Appropriate measures are in place to maintain client confidentiality and observations made evidenced that client care records were stored securely in a lockable storage case.

5.2.11 How does the responsible individual assure themselves of the quality of the services provided?

Where the entity operating the service is a corporate body or partnership or an individual owner who is not in day to day management of the service, Regulation 26 unannounced quality monitoring visits must be undertaken and documented every six months. Ms Rowan is in day to day charge of the service, therefore Regulation 26 unannounced quality monitoring visits do not apply.

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

A copy of the complaints procedure was available in the establishment. Ms Rowan demonstrated a good awareness of complaints management.

Ms Rowan confirmed that a system was in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies as appropriate.

Ms Rowan demonstrated a clear understanding of her role and responsibility in accordance with legislation. Information requested by ROIA has been submitted within the specified timeframes. Ms Rowan 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.

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 patients and the importance of staff being aware of equality legislation and recognising and responding to the diverse needs of patients was discussed with Ms Rowan.

6.0 Conclusion

Based on the inspection findings and discussions held we are satisfied that in the main this service is providing safe and effective care in a caring and compassionate manner; and that the service is well led by the responsible individual.

One area for improvement was identified against the regulations to ensure that AccessNI enhanced disclosure checks are sought and reviewed prior to authorised operators commencing work in the establishment.

7.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified were action is required to ensure compliance with The Independent Health Care Regulations (Northern Ireland) 2005.

	Regulations	Standards
Total number of Areas for Improvement	1	0

Areas for improvement and details of the QIP were discussed with Ms Rowan, Responsible Individual, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan			
Action required to ensure compliance with The Independent Health Care Regulations			
(Northern Ireland) 2005			
Area for improvement 1	The responsible individual shall ensure that an AccessNI		
	enhanced disclosure checks are sought and reviewed with the		
Ref: Regulation 19 (2)	outcome recorded prior to any authorised operator commencing		
Schedule 2, as amended	employment in the future.		
Stated: First time	Ref: 5.2.2		
	Response by registered person detailing the actions taken:		
To be completed by:	All new staff starting at Laserway will have an Access NI		
15 July 2021	completed before their start date.		
	Emily Rowan		

^{*}Please ensure this document is completed in full and returned via Web Portal*





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