

Announced Care Inspection Report 3 October 2018



Skin

Type of Service: Independent Hospital (IH) – Cosmetic Laser Service
Address: 11A Drumard Lane, Draperstown BT45 7LF
Tel No: 075 9029 0222
Inspector: Stephen O'Connor

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

Skin is registered as an Independent Hospital (IH) with the following category of care: Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers. The establishment provides a range of cosmetic/aesthetic treatments using laser machines. This inspection focused solely on those treatments that fall within regulated activity and the category of care for which the establishment is registered with RQIA.

Laser equipment:

Manufacturer: System Restore
 Model: Re: Touch BOS-063
 Serial Number: 002021
 Output wavelength: Q Switched ND:YAG (1064nm) with 2nd harmonic crystal 532nm

Mrs McCloskey confirmed that the System Restore laser is only used for tattoo removal treatments.

New laser installed since the previous inspection

Manufacturer: Formatk
 Model: Magma FS70000
 Serial Number: 70274
 Output wavelength: Laser handpiece (808nm), IPL handpiece (530nm -1100nm)

The Formatk Magma laser is a multi-platform laser that is also capable of operating as an Intense Pulse Light (IPL) machine by changing the handpiece. Two IPL handpieces are available in the establishment. This is discussed further in section 6.4 of this report.

Laser protection advisor (LPA):

Anna Bass (Lasernet)

Laser protection supervisor (LPS):

Mrs Lee-Anne McCloskey

Medical support services:

Dr Paul Myers (Lasernet)

Authorised operator:

Mrs Lee-Anne McCloskey

Types of treatment provided:

- tattoo removal - System Restore Re: Touch BOS-063 laser
- laser hair removal – Formatk Magma FS70000 laser handpiece
- IPL hair removal – Formatk Magma Fs7000 IPL handpiece (590-1100nm)
- IPL skin rejuvenation – Formatk Magma Fs7000 IPL handpiece(530nm -1100nm)
- IPL red vein treatment (vascular)
- IPL pigmentation
- IPL red flushing skin

3.0 Service details

Registered organisation/registered person: Mrs Lee-Anne McCloskey	Registered manager: Mrs Lee-Anne McCloskey
Person in charge at the time of inspection: Mrs Lee-Anne McCloskey	Date manager registered: 17 November 2016
Categories of care: Independent Hospital (IH) PT(L) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers Variation application submitted to add prescribed techniques or prescribed technology: establishments using intense light sources PT (IL) category of care to registration	

4.0 Inspection summary

An announced inspection took place on 3 October 2018 from 13:25 to 15:10.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Independent Health Care Regulations (Northern Ireland) 2005, The Regulation and Improvement Authority (Independent Health Care) (Fees and Frequency of Inspections) (Amendment) Regulations (Northern Ireland) 2011 and the Department of Health (DOH) Minimum Care Standards for Independent Healthcare Establishments (July 2014).

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the establishment was delivering safe, effective and compassionate care and if the service was well led.

Examples of good practice were evidenced in all four domains. These included the arrangements for staff recruitment; authorised operator training; adult safeguarding; laser and IPL safety; the management of medical emergencies; clinical records; the environment; infection prevention and control; 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 areas for improvement were identified during the inspection.

The findings of this report will provide the establishment with the necessary information to assist them to fulfil their responsibilities, and enhance practice and clients' experience.

4.1 Inspection outcome

	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 Mrs Lee-Anne McCloskey, registered person, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 22 May 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 22 May 2017.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- notifiable events since the previous care inspection
- the registration status of the establishment
- written and verbal communication received since the previous care inspection
- the previous care inspection report
- the returned QIP from the previous care inspection

Questionnaires were provided to clients prior to the inspection by the establishment on behalf of RQIA. Returned completed clients questionnaires were analysed prior to the inspection. No staff are employed in Skin therefore no staff questionnaires were provided to RQIA.

A poster informing clients that an inspection was being conducted was displayed.

During the inspection the inspector met with Mrs Lee-Anne McCloskey, registered person and authorised operator. A tour of the premises was also undertaken.

The following records were examined during the inspection:

- recruitment and selection
- safeguarding
- laser safety
- management of medical emergencies
- infection prevention and control
- information provision
- care pathway
- management and governance arrangements
- maintenance arrangements

The area for improvement identified at the last care inspection was reviewed and assessment of compliance recorded as met, partially met, or not met.

The findings of the inspection were provided to Mrs McCloskey, registered person, at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 22 May 2017

The most recent inspection of the establishment was an announced care inspection. The completed QIP was returned and approved by the care inspector.

6.2 Review of areas for improvement from the last care inspection dated 22 May 2017

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Minimum Care Standards for Independent Healthcare Establishments (July 2014)		Validation of compliance
Area for improvement 1 Ref: Standard 5.1 Stated: First time	Feedback provided by clients on the quality of treatment, information and care received should be collated in an anonymised format, summarised and used by the establishment to make improvements to services. A summary report should be generated at least on an annual basis and made available to clients and other interested parties upon request.	Met
	Action taken as confirmed during the inspection: An anonymised client satisfaction report dated February 2018 detailing the main findings of 40 completed client satisfaction surveys was reviewed during the inspection. Review of the report evidenced that clients were highly satisfied with the standard of care and treatment they received. Mrs McCloskey confirmed that a client satisfaction summary report will be generated at least on an annual basis and used to make improvements to the service where necessary.	

6.3 Inspection findings

6.4 Is care safe?

Avoiding and preventing harm to patients and clients from the care, treatment and support that is intended to help them.

Staffing

Mrs McCloskey confirmed that laser and IPL treatments are carried out by her as the authorised operator. The register of authorised operators for the laser machines reflects that Mrs McCloskey is the only authorised operator.

It was confirmed that if any new authorised operators were recruited they would be provided with induction training.

A review of training records evidenced that Mrs McCloskey had up to date training in core of knowledge, application training for the equipment in use, basic life support, infection prevention and control, safeguarding adults and fire safety.

Mrs McCloskey is the only person who works in Skin and she confirmed that should any support staff be employed in the future that they would receive laser safety awareness training.

Recruitment and selection

There have been no authorised operators recruited since the previous inspection. During discussion Mrs McCloskey confirmed that should authorised operators be recruited in the future, robust systems and processes will be developed to ensure that all recruitment documentation as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 would be sought and retained for inspection.

A recruitment policy and procedure was in place which was comprehensive and reflected best practice guidance.

Safeguarding

It was confirmed that laser and IPL treatments are not provided to persons under the age of 18 years.

Mrs McCloskey 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 McCloskey, 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 the Minimum Care Standards for Independent Healthcare Establishments July 2014.

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 for onward referral to the local Health and Social Care Trust should a safeguarding issue arise were included.

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

Laser and IPL safety

A laser safety file was in place which contained all of the relevant information in relation to laser and IPL 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 30 March 2019.

Laser and IPL procedures are carried out by trained operators in accordance with medical treatment protocols produced by Dr Paul Myers on 31 March 2018. Systems are in place to review the medical treatment protocols on an annual basis. The medical treatment protocols contained the relevant information pertaining to the laser and IPL treatments being provided.

Up to date local rules were in place which have been developed by the LPA. The local rules contained the relevant information pertaining to the laser and IPL machines being used.

The establishment's LPA completed a risk assessment of the premises on 27 September 2017 and all recommendations made by the LPA have been addressed.

Mrs McCloskey as the laser protection supervisor (LPS) has overall responsibility for safety during laser and IPL treatments and a list of authorised operators is maintained. Authorised operators have signed to state that they have 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 and IPL equipment is in use but can be opened from the outside in the event of an emergency.

The System Restore laser is operated using a key and the Formatk Magma machine is operated using a keypad code. Arrangements are in place for the safe custody of the laser key 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. Laser safety warning signs are displayed when the laser and IPL equipment is in use and removed when not in use.

The establishment has three registers, one for the System Restore laser, one for the Formatk Magma machine when the laser handpiece is used and one for the Formatk Magma machine when the IPL handpiece is used. The registers are completed every time the equipment is operated and includes:

- 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 manufacturers' guidance. The most recent service report in respect of the System restore laser of 6 July 2018 and Formatk Magma machine of 12 September 2018 were reviewed as part of the inspection process.

As discussed, it was established that the Formatk Magma machine is capable of operating as an Intense Pulse Light (IPL) machine using an IPL handpiece. Two IPL handpieces were available in the establishment. Skin is not registered to provide IPL treatments. Mrs McCloskey was advised that a full and complete variation to registration application and appropriate fee should be submitted to RQIA to add an additional category of care to the establishment's registration. The additional category of care should be as follows: Prescribed techniques or prescribed technology: establishments using intense light sources. This variation application was submitted to RQIA on 11 October 2018; following confirmation that the appropriate fee has been received by RQIA this variation will be approved.

Management of emergencies

As discussed, authorised operators have up to date training in basic life support. Discussion with Mrs McCloskey evidenced that she was aware what action to take in the event of a medical emergency. There was a resuscitation policy in place.

Infection prevention and control and decontamination procedures

The treatment room was clean and clutter free. Discussion with Mrs McCloskey evidenced that appropriate procedures were in place for the decontamination of equipment between uses. Hand washing facilities were available and adequate supplies of personal protective equipment (PPE) were provided. As discussed previously, Mrs McCloskey has up to date training in infection prevention and control.

Environment

The premises were maintained to a high standard of maintenance and décor. Mrs McCloskey confirmed that she is solely responsible for environmental cleaning and the decontamination of equipment between uses. Mrs McCloskey confirmed that should staff be employed in Skin, in the future, that cleaning schedules for the establishment will be developed.

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

Areas of good practice

There were examples of good practice found throughout the inspection in relation to authorised operator training, arrangements in respect of future staff recruitment, adult safeguarding, laser and IPL safety, management of emergencies, infection prevention and control and the environment.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Areas for improvement	0	0

6.5 Is care effective?

The right care, at the right time in the right place with the best outcome.

Care pathway

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 establishment 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, with their consent, for further information if necessary.

Six client care records were reviewed. 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 is available which includes the creation, storage, recording, retention and disposal of records and data protection.

Communication

As discussed, 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.

Areas of good practice

There were examples of good practice found in relation to the management of clinical records and ensuring effective communication between clients and the authorised operator.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Areas for improvement	0	0

6.6 Is care compassionate?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

Dignity respect and involvement with decision making

Discussion with Mrs McCloskey regarding the consultation and treatment process, confirmed that clients are treated with dignity and respect. The consultation and treatment is 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 locked cupboard.

As discussed, an anonymised client satisfaction report dated February 2018 detailing the main findings of 40 completed client satisfaction surveys was reviewed during the inspection. Review of the report evidenced that clients were highly satisfied with the standard of care and treatment they received. Some comments from clients included:

- “Beautiful surgery and her tablet treatments for skin work perfectly. Thank you.”
- “Professional service that provides results. Highly recommend practitioner.”
- “Premises spotlessly clean and practitioner showed exemplary levels of hygiene throughout all treatment received.”

Areas of good practice

There were examples of good practice found throughout the inspection in relation to 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.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Areas for improvement	0	0

6.7 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

Management and governance

Mrs McCloskey is the only authorised operator in this establishment. Policies and procedures were available outlining the arrangements associated with laser and IPL treatments. Observations made confirmed that policies and procedures were indexed, dated and Mrs McCloskey confirmed these were reviewed on an annual basis.

Discussion with Mrs McCloskey demonstrated that arrangements were in place to review risk assessments.

A copy of the complaints procedure was available in the establishment. Mrs McCloskey evidenced a good awareness of complaints management.

Mrs McCloskey confirmed that a system was in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies as appropriate. A system was in place to ensure that urgent communications, safety alerts and notices are reviewed and where appropriate, made available to key staff in a timely manner.

It was confirmed that arrangements were in place to monitor, audit and review the effectiveness and quality of care delivered to clients at appropriate intervals.

Mrs McCloskey confirmed that if required an action plan would be developed and embedded into practice to address any shortfalls identified during the audit process.

Mrs McCloskey, registered person and authorised operator demonstrated a clear understanding of her role and responsibility in accordance with legislation. Information requested by RQIA has been submitted within specified timeframes. Mrs McCloskey 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 up to date and displayed appropriately. Mrs McCloskey confirmed that she is giving consideration to providing a second treatment room. Mrs McCloskey was advised that prior to any additional treatment rooms becoming operational a variation to registration application must be submitted to RQIA. The variation to registration application process was discussed with Mrs McCloskey.

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

Areas of good practice

There were examples of good practice found throughout the inspection in relation to governance arrangements, management of complaints and incidents, quality improvement and maintaining good working relationships.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Areas for improvement	0	0

6.8 Equality data

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 Mrs McCloskey.

6.9 Client views

Twelve clients submitted questionnaire responses to RQIA. All 12 clients indicated that they felt their care was safe and effective, that they were treated with compassion and that the service was well led. All clients indicated that they were very satisfied with each of these areas of their care. Comments included in the submitted questionnaire responses are as follows:

- “Lee-Anne provides high quality treatments in a very professional and caring manner.”
- “I am 100% happy with my treatment so far”.
- “Lee-Anne is a true professional who provides the highest standard of treatments thoroughly enjoy y treatments”.
- “Really clean premises, compassionate staff. I was fully informed and supported.”
- “I have been so satisfied with treatment at the Skin Aesthetic Clinic that I have recommended Mrs Lee-Anne McCloskey to other people and friends and family”.
- “Lee-Anne is an absolute perfectionist, organised and meticulous in every aspect. The hygiene and care taken compared to other places is outstanding”.

- “Finding Lee-Anne at Skin has been a turnaround for my skincare. The treatments, the service and the results are truly amazing. Skin is a true haven. My only regret is not finding Lee-Anne sooner”.
- “Lee-Anne offers an excellent professional yet friendly environment/service. The quality of the treatment provided is fantastic and Lee-Anne is very informative about all treatments offered”.

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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