

# Inspection Report

27 January 2023



## Skin

Type of service: Independent Hospital – Cosmetic Laser/Intense Pulse Light (IPL)  
Address: 11A Drumard Lane, Draperstown, BT45 7LF  
Telephone number: 075 9029 0222

[www.rqia.org.uk](http://www.rqia.org.uk)

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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

<p><b>Organisation/Registered Provider:</b> Mrs Lee-Anne McCloskey t/a Skin</p> <p><b>Responsible Person:</b> Mrs Lee-Anne McCloskey</p>	<p><b>Registered Manager:</b> Mrs Lee-Anne McCloskey</p> <p><b>Date registered:</b> 17 November 2016</p>
<p><b>Person in charge at the time of inspection:</b> Mrs Lee-Anne McCloskey</p>	
<p><b>Categories of care:</b> Independent Hospital (IH) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers PT(L) and Prescribed techniques or prescribed technology: establishments using intense light sources PT(IL)</p>	
<p><b>Brief description of how the service operates:</b> Skin is registered with the Regulation and Quality Improvement Authority (RQIA) 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.</p> <p>Skin also provides a range of cosmetic and aesthetic treatments. This inspection focused solely on those treatments using a Class 4 laser and an intense pulse light (IPL) machine that fall within regulated activity and the categories of care for which the establishment is registered with RQIA.</p> <p><b>Equipment available in the service:</b></p> <p><b>Laser equipment:</b> Manufacturer: System Restore Model: Touch BOS-063 Serial Number: 002021 Laser Class: 4 Wavelength: 532 and 1064 nm</p> <p><b>IPL equipment:</b> Manufacturer: Lynton Model: Excelight EXL 518 Serial Number: 118750 Hand Pieces: 585 and 650 Handpieces</p> <p><b>Laser and IPL Multi platform equipment:</b> Manufacturer: Formatk</p>	

Model: Magma FS70000  
 Serial Number: 70274  
 Hand Pieces: Laser 808nm  
 IPL530 – 1100nm and 400-1100nm

**Laser protection advisor (LPA):**

Ms Anna Bass

**Laser protection supervisor (LPS):**

Mrs Lee-Anne McCloskey

**Medical support services:**

Dr Paul Myers

**Authorised operators:**

Mrs Lee-Anne McCloskey

Ms Saddiya Akram

**Types of laser treatments provided:**

Tattoo removal

Hair removal

**Types of IPL treatments provided:**

Hair Removal

Skin rejuvenation

Vascular

Pigmentation

Red flushing skin

## 2.0 Inspection summary

This was an announced inspection, undertaken by a care inspector on 27 January 2023 from 10.00 am to 1.00 pm.

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; laser and IPL safety; management of medical emergencies; infection prevention and control (IPC); 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 Skin.

Posters were issued to Skin by RQIA prior to the inspection inviting clients and staff to complete an electronic questionnaire.

Two clients submitted responses. Client responses 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. One client response included positive comments acknowledging the quality of services provided.

No staff submitted questionnaire responses.

### **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 Skin was undertaken on 30 March 2022; 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?**

Mrs McCloskey confirmed that laser and IPL treatments are only carried out by herself and one other authorised operator. 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 authorised operators had up to date training in core of knowledge training, application training for the equipment in use, basic life support, IPC, fire

safety awareness and safeguarding adults at risk of harm in keeping with the RQIA training guidance. Advice was provided to Mrs McCloskey for authorised operators to undertake child protection training as hair removal treatments are available to clients aged 16 to 17 years old. Following the inspection RQIA received confirmation that Mrs McCloskey had completed level two child protection training and the other authorised operator had completed introductory child protection training.

Mrs McCloskey confirmed that should other staff be employed at the establishment, but not directly involved in the use of the laser and IPL equipment, they would receive laser safety awareness training.

As a result of the actions taken following the inspection, the service had appropriate arrangements in place to ensure that staff are appropriately trained.

Appropriate staffing levels were in place to meet the needs of clients.

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

A recruitment and selection policy and procedure was in place. Advice and guidance was provided to further develop this policy to include the requirement for applicants to provide a full employment history and that a contract of employment is provided to new staff members following appointment in line with legislation and best practice guidance. Following the inspection RQIA received confirmation that this had been addressed.

Mrs McCloskey confirmed 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 all recruitment documentation as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 would be sought and retained for inspection.

An AccessNI disclosure certificate had been retained on file. It was advised that a record of all relevant information contained within the disclosure certificate should be maintained and the AccessNI disclosure certificate should only be retained for a period of time as recommended in the AccessNI code of practice. Following the inspection RQIA received confirmation that the AccessNI disclosure certificate had been removed in keeping with the AccessNI code of practice.

As a result of the actions taken following the inspection it was determined that the recruitment of authorised operators in the future will be in accordance with 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?**

Mrs McCloskey stated that laser and IPL treatments are not provided to persons under the age of 18 years with the exception of laser hair removal. Laser hair removal is provided to persons aged 16 to 17 years. Mrs McCloskey confirmed that appropriate insurance arrangements are in place.

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 an adult safeguarding issue arise however these were not available should a child protection issue arise. Advice and guidance was provided to further develop the child protection policy and procedure to include the relevant contact details for onward referral should a child protection issue arise. Following the inspection RQIA received confirmation that this had been addressed.

Discussion with Mrs McCloskey confirmed 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 Mrs McCloskey, as the safeguarding lead, and the other authorised operator had completed formal training in safeguarding adults in keeping with the Northern Ireland Adult Safeguarding Partnership (NIASP) training strategy (revised 2016) and minimum standards. As discussed in section 5.2.1 advice was provided for both authorised operators to complete formal child protection training. Following the inspection RQIA received confirmation that this had been completed.

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. Advice and guidance was provided to make available a copy of the regional guidance document entitled Co-operating to Safeguard Children and Young People in Northern Ireland (August 2017). Following the inspection RQIA received confirmation that this had been addressed.

As a result of the actions taken following the inspection, 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?**

Both authorised operators had up to date training in basic life support and Mrs McCloskey 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 reflected legislation and best practice guidance.

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 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 room was clean and clutter free. Discussion with Mrs McCloskey 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, both authorised operators had up to date training in IPC.

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?**

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 Mrs McCloskey who outlined the measures that will be taken by Skin 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 laser and IPL treatments are provided in one treatment room. The premises also has a second treatment room and access to storage areas. 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 (CO<sub>2</sub>) 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 31 March 2023.

The LPA annual site audit report completed on 20 January 2013 stated that the statement of purpose was to be updated to reflect the full range of IPL treatments provided. Advice was provided to Mrs McCloskey to develop the statement of purpose to address this action and following the inspection RQIA received confirmation that this had been completed.

Up to date, local rules were in place which have been developed by the LPA. Three sets of local rules are in place; one for the laser machine, one for the IPL machine and one for the multi-platform machine. The 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 January 2023 and no recommendations were made by the LPA.

Mrs McCloskey 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. It was demonstrated the protocols contained the relevant information about the treatments being provided and are due to expire during March 2023. It was established that systems are in place to review the medical treatment protocols when due.

Mrs McCloskey, as the LPS has overall responsibility for safety during laser and IPL 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 or 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 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 and IPL equipment is in use but can be opened from the outside in the event of an emergency. Authorised operators were 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.

The laser and IPL machines are operated using a key and the multiplatform machine is operated using a keypad code. Mrs McCloskey confirmed arrangements are in place for the safe custody of the key and keypad code when not in use. Advice was provided to develop a policy and procedure which reflected the arrangements in place for the safe keeping of the equipment keys and keypad code. Following the inspection RQIA received confirmation that this policy and procedure had been developed accordingly. Protective eyewear is available for the client and operator as outlined in the local rules.

Skin has laser, IPL and multi-platform registers to differentiate between treatments. Mrs McCloskey told us that the authorised operators complete the relevant section of the registers every time the equipment is operated, the registers 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 and IPL equipment in line with the manufacturer's guidance. The most recent service reports were reviewed.

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. 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.

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.

Two 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. Advice was provided to amend the timeframe included in the records management policy for the retention of client records in accordance with legislation. RQIA received confirmation following inspection that this had been completed.

The service has a policy for advertising and marketing which is in line with legislation.

As a result of the actions taken following the inspection 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 Mrs McCloskey 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.

Mrs McCloskey told us that clients are provided with the opportunity to complete a satisfaction survey during the course of their treatment. The results of these are collated to provide an anonymised summary report which is made available to clients and other interested parties. Mrs McCloskey confirmed that an action plan would be developed to inform and improve services provided, if appropriate.

Review of the most recent client satisfaction report from 2022 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 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. Mrs McCloskey 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.

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. Advice and guidance was provided to amend the complaints policy and procedure to reflect RQIA's most up to date address.

Following the inspection RQIA received confirmation that this action had been completed. 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.

Mrs McCloskey confirmed that no complaints had been received since the previous inspection.

An incident policy and procedure was in place which includes the reporting arrangements to RQIA. Mrs McCloskey confirmed that incidents 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.

Mrs McCloskey demonstrated a clear understanding of her role and responsibility in accordance with legislation. Information requested by RQIA has been submitted within the 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.

As discussed in section 5.2.8 following the inspection RQIA received confirmation that the statement of purpose had been updated to reflect the range of IPL treatments provided. Advice and guidance was provided to amend the client guide to reflect RQIA's most up to date address. Following the inspection RQIA received confirmation that this action had been addressed.

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

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

As a result of the actions taken following inspection 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 were not reviewed during this inspection.

### **6.0 Quality Improvement Plan/Areas for Improvement**

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs McCloskey, Registered Person, as part of the inspection process and can be found in the main body of the report.



The Regulation and Quality Improvement Authority

RQIA, 1<sup>st</sup> Floor  
James House  
Gasworks  
2 – 4 Cromac Avenue  
Belfast  
BT7 2JA

Tel 028 9536 1111

Email [info@rqia.org.uk](mailto:info@rqia.org.uk)

Web [www.rqia.org.uk](http://www.rqia.org.uk)

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