

Announced Care Inspection Report 29 August 2019



Skin

**Type of Service: Independent Hospital (IH) –
Cosmetic Laser and Intense Pulse Light (IPL) Service
Address: 11A Drumard Lane, Draperstown, BT45 7LF
Tel No: 07590 290 222
Inspectors: Stephen O'Connor and Steven Smith**

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 categories of care: 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). The establishment provides a range of cosmetic/aesthetic treatments. This inspection focused solely on laser and intense pulse light (IPL) treatments that fall within regulated activity and the categories 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.

Laser and IPL equipment

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.

Laser protection advisor (LPA):

Anna Bass (Lasernet)

Laser protection supervisor (LPS):

Mrs Lee-Anne McCloskey

Medical support services:

Dr Paul Myers (Lasernet)

Authorised operators:

Mrs Lee-Anne McCloskey

Types of treatment provided using System Restore:

- tattoo removal

Types of treatment provided using Formatk Magma FS70000:

- laser hair removal
- IPL hair removal IPL handpiece (590-1100nm)
- IPL skin rejuvenation IPL handpiece(530nm -1100nm)
- IPL red vein treatment (vascular)
- IPL pigmentation
- IPL red flushing skin

3.0 Service details

Organisation/Registered Person: Mrs LeeAnne McCloskey	Registered Manager: Mrs LeeAnne McCloskey
Person in charge at the time of inspection: Mrs LeeAnne 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 and PT(IL) Prescribed techniques or prescribed technology: establishments using intense light sources	

4.0 Inspection summary

An announced inspection took place on 29 August 2019 from 09:45 to 12:30.

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 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, 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 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 3 October 2018

No further actions were required to be taken following the most recent inspection on 3 October 2018.

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

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 inspectors met with Mrs LeeAnne McCloskey, registered person and authorised operator.

The following records were examined during the inspection:

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

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

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 3 October 2018

The most recent inspection of the establishment was an announced care inspection.

6.2 Review of areas for improvement from the last care inspection dated 3 October 2018

There were no areas for improvement made as a result of the last care inspection.

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.

Mrs McCloskey confirmed that an additional authorised operator has recently been recruited and is due to commence work in the near future. Mrs McCloskey confirmed that on commencement of employment the newly recruited authorised operator will be provided with induction training and arrangements established to complete an annual appraisal.

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 also confirmed that the newly recruited authorised operator will have completed all training as outlined in the RQIA cosmetic laser training guidance document prior to providing treatments to clients.

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 she has recruited an authorised operator and is currently undertaking the pre-employment checks. Robust systems and processes have been developed to ensure that all recruitment documentation as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 will be sought and retained for the newly recruited authorised operator.

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

Following the inspection a template that could be used to record all pertinent information contained within AccessNI enhanced disclosure checks and a template for newly recruited authorised operators to make a criminal conviction declaration were forwarded to Mrs McCloskey.

Safeguarding

Mrs McCloskey confirmed that laser hair removal is offered to persons aged 14 and over. A medical treatment protocol for laser hair removal for clients aged between 14 and 18 was in place. Mrs McCloskey has professional indemnity insurance in place for this age group of clients. During discussion Mrs McCloskey confirmed that consent is obtained from both the client being treated and their mother. Review of a treatment record for a client aged between 14 and 18 evidenced this. Review of records evidenced that Mrs McCloskey has completed safeguarding children training.

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 reference.

Laser and IPL safety

A laser safety file was in place which contained all of the relevant information in relation to the 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 2020.

Laser and IPL procedures are carried out by Mrs McCloskey, authorised operator in accordance with medical treatment protocols produced by Dr Paul Myers on 31 March 2019. 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. Mrs McCloskey as the sole authorised operator had signed to state that she 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 Mrs McCloskey.

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 include:

- a unique client identification number
- 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 27 July 2019 and Formatk Magma machine of 12 September 2018 were reviewed as part of the inspection process.

Management of emergencies

As discussed, Mrs McCloskey has up to date training in basic life support and first aid. Discussion with Mrs McCloskey evidenced that she was aware of 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, 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.

Three 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.

Discussion with Mrs McCloskey, and review of the management of records policy confirmed that clients have the right to apply for access to their clinical records in accordance with the General Data Protection Regulations (GDPR) May 2018 and where appropriate Information Commissioners Office (ICO) regulations and Freedom of Information legislation.

Mrs McCloskey had previously completed the ICO online registration self-assessment, the outcome of which was that Skin was not required to register. It was suggested that in light of the changes to legislation in May 2018 the online self-assessment should be completed again. On the afternoon of the inspection Mrs McCloskey submitted evidence to confirm the self-assessment had been completed following the inspection and that Skin was not required to register.

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.

Mrs McCloskey confirmed that once the newly recruited authorised operator commences work staff meetings will be undertaken.

Skin has a policy for advertising and marketing which is in line with legislation and best practice guidance.

Audits

It was suggested that once the newly recruited authorised operator commences work that Mrs McCloskey should audit their treatment records and the laser and IPL registers to assure herself that all treatment records are being fully completed. Mrs McCloskey readily agreed to this and confirmed that if required an action plan would be developed and embedded into practice to address any shortfalls identified during the audit process.

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.

An anonymised client satisfaction report dated August 2019 detailing the main findings of nine 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:

- “Very happy.”
- “Keep up the good work.”
- “Lovely clinic, love my treatments. Thank you.”
- “Great results so far.”

Skin also has a Facebook page and Website. It was suggested that testimonials and social media reviews should also be included in the client satisfaction report.

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 and dated, and Mrs McCloskey confirmed that they were reviewed on an annual basis.

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

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

There was a complaints policy and procedure in place which was in accordance with legislation and Department of Health (DoH) guidance on complaints handling. Clients and/or their representatives were made aware of how to make a complaint by way of the client guide and information on display in the establishment.

Review of documentation evidenced that arrangements were in place to effectively manage complaints from clients, their representatives or any other interested party. Mrs McCloskey confirmed that Skin have not received any complaints since registering with RQIA. Mrs McCloskey also confirmed that if they did receive a complaint records would be retained to include the details of any investigation undertaken, all communication with complainants, and the outcome of the complaint and the complainant's level of satisfaction. Arrangements were in place to share information about complaints and compliments with staff.

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.

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 clients and the importance of staff being aware of equality legislation and recognising and responding to the diverse needs of clients was discussed with Mrs McCloskey.

6.9 Client and staff views

Six clients submitted questionnaire responses to RQIA. All six 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 six clients indicated that they were very satisfied with each of these areas of their care. No comments were included in the client questionnaires.

7.0 Quality improvement plan

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



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