

# **Inspection Report**

## 30 November 2023



### Skin

Type of service: IH-Cosmetic Laser\Intense Pulsed Light Address: 11A Drumard Lane, Draperstown, BT45 7LF Telephone number: 075 9029 0222

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 <a href="https://www.rqia.org.uk/">https://www.rqia.org.uk/</a> The Independent Health Care Regulations (Northern Ireland) 2005 and Minimum Care Standards for Independent Healthcare Establishments (July 2014)

Organisation/Registered Provider:	Registered Manager:
Mrs Lee-Anne McCloskey	Mrs Lee-Anne McCloskey
Responsible Person:	Date registered:
Mrs Lee-Anne McCloskey	17 November 2016

#### Person in charge at the time of inspection:

Mrs Lee-Anne McCloskey

#### Categories of care:

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)

#### Brief description of how the service operates:

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.

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.

Mrs McCloskey told us that since the last inspection a Cutera Excel HR laser had been purchased and was in use at the establishment.

#### Equipment available in the service:

#### Laser equipment:

Manufacturer:System RestoreModel:Touch BOS-063Serial Number:002021Laser Class:4Wavelength:532 and 1064 nm

Manufacturer:CuteraModel:Excel HRSerial Number:EH11417Laser Class:4Wavelength:755 and 1064 nm

#### **IPL equipment:**

Manufacturer:LyntonModel:Excelight EXL 518Serial Number:118750Hand Pieces:585 and 650 Hand pieces

#### Multi-platform equipment:

Manufacturer: Formatk Model: Magma FS70000 Serial Number: 70274 Hand Pieces: Laser 808nm IPL 530 – 1100nm and 400-1100nm

The Formatk Magma FS70000 is a multi-platform machine that is capable of operating as a laser and an IPL by changing the hand piece.

#### 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 30 November 2023 from 10.00 am to 1.20 pm.

During the inspection Mrs McCloskey stated that she has formed a limited company known as Skin (NI) Limited which now operates the establishment. Mrs McCloskey was initially registered with RQIA on 17 November 2016 as a sole provider. Mrs McCloskey was advised that where the restructuring of a business results in the formation of a new entity to carry on the regulated services, then an application for registration must be made to RQIA by that entity. An area for improvement has been made in this regard. Following this inspection further advice and guidance regarding the application process was forwarded to Mrs McCloskey.

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

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

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

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

### 3.0 How we inspect

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

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

#### 4.0 What people told us about the service

Clients were not present on the day of the inspection and client feedback was assessed by reviewing the most recent client satisfaction surveys completed by Skin. This is discussed further in section 5.2.10.

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

Nine 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. Eight of the client responses included complimentary comments on the professional and welcoming approach of staff and stated they had received a very high standard of care and treatment.

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 27 January 2023; no areas for improvement were identified.

#### 5.2 Inspection outcome

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

Mrs McCloskey told us that laser and IPL treatments are carried out by authorised operators. The 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, infection prevention and control, and safeguarding adults at risk of harm in keeping with the RQIA training guidance. Fire safety awareness training was out of date for one of the authorised operators. Advice and guidance was provided to Mrs McCloskey on the frequency of required mandatory training. Following the inspection RQIA received a copy of a training certificate confirming that fire safety training had been renewed for the authorised operator.

Mrs McCloskey is aware that all other staff employed at the establishment, but not directly involved in the use of the laser and IPL equipment, are required to receive laser safety awareness training.

As a result of the action taken following the inspection it was determined that appropriate staffing levels were in place to meet the needs of clients and that staff are suitably trained

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

Recruitment and selection policies and procedures were in place, which adhered to legislation and best practice guidance for the recruitment of authorised operators. These arrangements will ensure that all required recruitment documentation has been sought and retained for inspection.

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.

Discussion with Mrs McCloskey confirmed that she had a clear understanding of the legislation and best practice guidance in relation to recruitment and selection.

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

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

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. Review of insurances 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 a safeguarding issue arise.

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, has completed formal level two 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 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 available for reference.

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

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

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

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

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

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

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

The laser 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, authorised operators had up to date training in IPC.

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

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

The management of operations to minimise the risk of COVID-19 transmission were discussed with Mrs McCloskey who outlined the measures that taken by Skin to ensure current best practice measures are in place. Following the inspection Mrs McCloskey was provided with a copy of the Public Health Agency (PHA) publication Infection <u>Prevention and Control Measures</u> for Respiratory Illness (March 2023).

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

#### 5.2.7 How does the service ensure the environment is safe?

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

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

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

#### 5.2.8 How does the service ensure that laser 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 during March 2024.

Up to date, local rules were in place which have been developed by the LPA. Four sets of local rules were in place; one for each of the laser machines, one for the IPL machine and one for the multi platform machine. The local rules for three of the four machines in use contained the relevant information about the laser and IPL equipment. Review of the local rules for the Cutera Excel HR laser identified an issue regarding the required eyewear and this is discussed further in the latter part of this section of the report.

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

Mrs McCloskey confirmed 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 that the protocols contained the relevant information about the treatments being provided and are due to expire during March 2024. It was established that systems are in place to review the medical treatment protocols when due.

Mrs McCloskey, as the LPS and authorised operator 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 or IPL equipment is in use but can be opened from the outside in the event of an emergency. Mrs McCloskey was aware that the laser safety warning sign 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. Protective eyewear for the System Restore, Lynton and the Formatk machines were available for the client and operator as outlined in the local rules. Review of the local rules for the Cutera Excel HR identified that the required operator and client eyewear had not been not clearly specified. This matter was discussed with Mrs McCloskey. Mrs McCloskey provided assurances that confirmation had been sought from the LPA regarding the eyewear in use at the establishment and the LPA had approved this eyewear based on the information provided via photographic images. Advice was provided to Mrs McCloskey to discuss this matter with the LPA as a priority and to have the local rules further developed to accurately identify the specific eyewear required when operating the Cutera Excel HR. Following the inspection RQIA received a copy of the local rules for the Cutera Excel HR and review of these confirmed that the required eyewear had been clearly specified for the operator and client.

Skin has laser, IPL and multi-platform registers to differentiate between the treatments. Mrs McCloskey told us that authorised operators complete the relevant section of the register every time the equipment is operated. The registers reviewed included:

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

There are arrangements in place to service and maintain the laser and IPL equipment in line with the manufacturer's guidance. The installation report for the CuteraExcel HR and the most recent service reports of the laser, IPL and multi-platform equipment were reviewed.

As a result of the action taken following the inspection 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?

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

The service has a list of fees available for each laser 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 each client's personal information is recorded including their general practitioner (GP) details in keeping with legislative requirements and clients are asked to complete a health questionnaire.

Three client care records were reviewed. 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.

The service has a policy for advertising and marketing.

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

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

Discussion with 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.

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 dated September 2023 found that clients were highly satisfied with the quality of treatment, information and care received.

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

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

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

Mrs McCloskey was in day to day management of the practice, therefore the unannounced quality monitoring visits by the registered provider are not applicable.

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 patients and staff to follow. Clients were made aware of how to make a complaint by way of the client's guide. Arrangements were in place to record any complaint received in a complaints register and retain all relevant records including details of any investigation undertaken, all communication with complainants, the outcome of the complaint and the complainant's level of satisfaction.

A review of records and discussion with 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 <u>Statutory Notification of Incidents and Deaths</u>. 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.

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 displayed in a prominent place.

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

It was confirmed that Skin is registered with the Information Commissioners Office (ICO).

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

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

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

### 6.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified were action is required to ensure compliance with <u>The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern</u> <u>Ireland) Order 2003.</u>

	Regulations	Standards
Total number of Areas for Improvement	1	0

The area for improvement and details of the QIP were discussed with Mrs McCloskey, Registered Person, 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 Health and Personal Social Services		
(Quality, Improvement and Regulation) (Northern Ireland) Order 2003		
Area for improvement 1	The registered person shall submit a registration application on	
	behalf of Skin (NI) Limited, the entity operating the	
Ref: Article 13	establishment. The relevant fees and supporting	
	documentation must be submitted with the application.	
Stated: First time	Ref: 2.0	
Response by registered person detailing the actions		
To be completed by:	taken:	
25 January 2024	application submitted 21/01/2024	

\*Please ensure this document is completed in full and returned via Web Portal\*





The Regulation and Quality Improvement Authority

The Regulation and Quality Improvement Authority James House 2-4 Cromac Avenue Gasworks Belfast BT7 2JA

Tel028 9536 1111Emailinfo@rqia.org.ukWebwww.rqia.org.ukImage: Comparison of the state of t

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