

Inspection Report

6 July 2021



Abrade Tattoo Removal

Type of service: Independent Hospital (IH) – Dental Treatment
Address: 53 Spencer Road, Derry, BT47 6AA
Telephone number: 028 7131 3023

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/> [The Independent Health Care Regulations \(Northern Ireland\) 2005](#) and [Minimum Standards for Dental Care and Treatment \(March 2011\)](#)

1.0 Service information

| | |
|---|---|
| <p>Organisation/Registered Providers: Mr Anthony O'Neill & David Marshall T/A Abrade Tattoo Removal</p> | <p>Registered Manager: Mr David Marshall</p> <p>Date registered: 21 December 2017</p> |
| <p>Person in charge at the time of inspection: Mr Anthony O'Neill</p> | |
| <p>Categories of care: Independent Hospital (IH) PT(L) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers</p> | |
| <p>Brief description of how the service operates: Abrade Tattoo Removal is a cosmetic laser service and provides laser tattoo removal and laser hair removal.</p> <p>During 2018 an application to vary the registration of this establishment was submitted to RQIA by Mr Anthony O'Neill and Mr David Marshall, Registered Persons, to provide laser tattoo removal and laser hair removal using the same laser equipment in a different location to the address registered with RQIA.</p> <p>On 7 February 2019 the variation to registration was approved and a condition was placed on the registration of Abrade Tattoo Removal that laser tattoo removal and hair removal will be provided in Unit 8, Dungannon Enterprise Centre, Coalisland Road, BT71 6JT on a Wednesday only. The following equipment only is to be used on the Dungannon site:</p> <ul style="list-style-type: none"> • Q-switch Nd Yag, ADL Sapphire II laser machine, serial number S2661112279 • Lumenis Lightsheer, serial number T5086. <p>This inspection focused solely on those treatments using Class 4 laser machines provided at the site in Derry.</p> <p>Mr Anthony O'Neill and Mr David Marshall are the registered providers and Mr David Marshall is the registered manager.</p> <p>Mr Anthony O'Neill is also the registered provider for one other cosmetic laser service based in Belfast which is registered with RQIA.</p> <p>Equipment available in the service:</p> <p>Laser equipment:</p> | |

Manufacturer: Lumenis
Model: Light Sheer
Serial Number: T5086
Laser Class: 4
Wavelength: 790 – 830nm

Types of Treatment Provided: Laser hair removal

Laser equipment:

Manufacturer: ADL
Model: Sapphire II
Serial Number: S2261112279
Laser Class: 4
Wavelength: 532nm and 1064nm

Types of Treatment Provided: Laser tattoo removal

Laser protection advisor (LPA):

Ms Anna Bass(Lasermet)

Laser protection supervisor (LPS):

Mr Anthony O'Neill

Medical support services:

Dr Paul Myers

Authorised operators:

Mr Anthony O'Neill
 Mr David Marshall
 Ms Nicole Doherty

2.0 Inspection summary

This was an announced inspection, undertaken by two care inspectors on 6 July 2021 from 11.00 am to 3.45 pm.

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

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

There was evidence of good practice concerning staff recruitment; authorised operator training; safeguarding; management of medical emergencies; infection prevention and control (IPC); 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.

Two areas for improvement against the regulations have been identified. These are to ensure that the laser registers are updated every time the laser machines are used; and that an accurate and up to date treatment record is maintained for every client.

Four areas for improvement were identified against the standards. These were to ensure that; laser safety awareness training has been provided to staff who are not directly involved in the use of the lasers; the register of authorised operators is kept up to date; all authorised operators sign to indicate that they accept and understand the local rules and medical treatment protocols; and to ensure that written information is available regarding laser tattoo removal treatments 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 practice 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 establishment

Clients were not available for consultation on the day of the inspection and client feedback was assessed by reviewing the most recent client comments/reviews on the Abrade Tattoo Removal Facebook page. Review of the most recent comments/reviews found that clients were highly satisfied with the quality of treatment, information and care received.

Posters were issued to Abrade Tattoo Removal by RQIA prior to the inspection inviting clients and staff to complete an electronic questionnaire. No completed client or staff questionnaires were submitted to RQIA prior to the inspection.

5.0 The inspection

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

The last inspection to Abrade Tattoo Removal was undertaken on 23 November 2018; no areas for improvement were identified.

5.2 Inspection findings

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

Previously the establishment had employed four authorised operators that provided laser treatments. Since the previous inspection one of the authorised operators had resigned and a second authorised operator had taken a period of leave. Currently Mr O'Neill and Mr Marshall are the only authorised operators who carry out laser treatments. A review of the register of authorised operators evidenced that the register was not up to date. This is discussed further in section 5.2.8 of this report.

A review of mandatory training records evidenced that both Mr O'Neill and Mr Marshall had up to date training in core of knowledge training, basic life support, infection prevention and control, fire safety awareness and safeguarding adults at risk of harm, in keeping with the RQIA training guidance.

It was identified that a new receptionist had recently been recruited who had not yet undertaken laser safety awareness training. Mr O'Neill was advised that the receptionist and any other staff employed at the establishment, but not directly involved in the use of the laser equipment, should receive laser safety awareness training. An area for improvement against the standards has been identified.

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?

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

There have been no authorised users recruited since the previous inspection. During discussion Mr O'Neill 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.

Recruitment of staff 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?

Mr O'Neill stated that laser treatments are not provided to persons under the age of 18 years.

A policy and procedure was in place for the safeguarding and protection of adults at risk of harm. The policy included the types and indicators of abuse and distinct referral pathways in the event of a safeguarding issue arising. The relevant contact details were included for onward referral to the local Health and Social Care Trust should a safeguarding issue arise.

Discussion with Mr O'Neill confirmed that he 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 Mr Marshall, as the safeguarding lead, has completed level one training in safeguarding adults. Mr O'Neill was advised to ensure that the Mr Marshall undertakes further safeguarding training at the level commensurate of his role and in keeping with the Northern Ireland Adult Safeguarding Partnership (NIASP) training strategy (revised 2016) and minimum standards. Mr O'Neill agreed to address this issue following the inspection

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.

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 staff spoken with were aware of what action to take in the event of a medical emergency. There was a resuscitation policy in place and a review of this evidenced that it was comprehensive, reflected legislation and best practice guidance.

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 treatment rooms were clean and clutter free. Mr O'Neill was advised to remove soft furnishings and wicker chairs from the waiting area and treatment rooms in keeping with infection prevention and control best practice guidance and also to ensure that all waste receptacle in the treatment rooms are fully operational. During the inspection Mr O'Neill agreed to address these issues identified.

Discussion with Mr O'Neill 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 have up to date training in infection prevention and control.

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 Mr O'Neill who outlined the measures taken by Abrade Tattoo Removal 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 proposed management of COVID-19 was in line with best practice guidance and it was determined that appropriate actions had been taken in this regard.

5.2.7 How does the service ensure the environment is safe?

The service has two treatment rooms and access to storage 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 (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 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 27 June 2022.

Up to date, local rules were in place which have been developed by the LPA. Two sets of local rules were in place; one for each the laser machine which contained the relevant information about the laser and IPL equipment being used.

Following the inspection the establishment's LPA completed a risk assessment of the premises on 23 June 2021 and a copy of LPA report was submitted to RQIA by email. Mr O'Neill was advised to ensure that any recommendations made by the LPA have been addressed.

Mr O'Neill told us that laser procedures are carried out following medical treatment protocols. The medical treatment protocols had been produced by a named registered medical practitioner and are due to expire on 28 June 2022. Systems are in place to review the medical treatment protocols when due. The medical treatment protocols contained the relevant information about the treatments being provided.

Mr O'Neill, as the laser protection supervisor (LPS) has overall responsibility for safety during laser treatments and a list of authorised operators was available to review however, this list had not been kept up to date. An area for improvement has been identified to ensure that the list of authorised operators is kept up to date.

It was also identified that not all authorised operators had signed to state that they had read and understood the local rules and medical treatment protocols. An area for improvement has been identified.

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

The lasers are operated using a key. Arrangements are in place for the safe custody of the key 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. Mr O'Neill was aware that the laser safety warning signs should only be displayed when the laser equipment is in use and removed when not in use.

Abrade Tattoo Removal has two laser registers in place. Mr O'Neill told us that the authorised operators complete the relevant section of the register every time the equipment is operated. However, a review of one of the laser registers evidenced that there were gaps in the recording of laser treatments provided and the entries recorded did not always include an accurate record of the area of the body being treated. Mr O'Neill was advised that the register should include: the name of the person treated; the date; the operator; the treatment given; the precise exposure; and any accident or adverse incident each time the lasers are operated. An area for improvement against the regulations has been identified.

There are arrangements in place to service and maintain the laser equipment in line with the manufacturer's guidance. The most recent service report of the lasers was reviewed.

It was determined that, in the main, appropriate arrangements were in place to operate the laser 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.

In relation to laser hair removal written information was available to review that is provided to the client pre and post treatment which outlines the treatment provided, any risks, complications and expected outcomes and a list of fees for each laser hair removal procedure. However, written information was not available to review in relation to laser tattoo removal treatments. This was discussed with Mr O'Neill and an area for improvement against the standards has been identified.

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.

Four client care records were reviewed. Some of the records reviewed did not include the patch test or an accurate record of treatment delivered. An area for improvement against the regulations has been identified. Mr O'Neill was advised that an accurate and up to date treatment record should be maintained for every client that includes:

- client details
- medical history
- signed consent form
- skin assessment
- patch test (where appropriate)
- record of treatment delivered including the number of shots and fluence settings (where appropriate)

Observations made evidenced that client records were securely stored. A policy and procedure was available which included the creation, storage, recording, retention and disposal of records and data protection.

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 Mr O'Neill regarding the consultation and treatment process confirmed that clients are treated with dignity and respect. The consultation and treatments are provided in a private room with the client and authorised operator present.

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

Mr O'Neill told us that he encourages clients to leave comments on the Abrade Tattoo Removal Facebook page when their treatment is complete. Mr O'Neill has agreed to ensure that the results of these comments are collated to provide a summary report which will be made available to clients and other interested parties and an action plan would be developed to inform and improve services provided, if appropriate.

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

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

Mr Marshall 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 treatments. Observations made confirmed that policies and procedures were indexed, dated and systematically reviewed on a three yearly basis or more frequently if required.

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

Mr O'Neill confirmed that a system was in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies as appropriate.

Mr O'Neill demonstrated a clear understanding of his role and responsibility in accordance with legislation. Mr O'Neill was reminded to ensure that the statement of purpose and client's guide are kept under review, revised and updated when necessary and available on request.

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

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

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

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

6.0 Conclusion

Based on the inspection findings and discussions held we are satisfied that this service provides laser treatments in a caring and compassionate manner.

Two areas for improvement against the regulations have been identified. These are to ensure that the laser registers are updated every time the laser machines are used; and to ensure that an accurate and up to date treatment record is maintained for every client.

Four areas for improvement were identified against the standards. These were to ensure that; laser safety awareness training has been provided to staff who are not directly involved in the use of the lasers; the register of authorised operators is kept up to date; all authorised operators sign to indicate that they accept and understand the local rules and medical treatment protocols; and to ensure that written information is available regarding laser tattoo removal treatments to allow clients to make informed choices.

7.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with [The Independent Health Care Regulations \(Northern Ireland\) 2005](#) and the [Minimum Care Standards for Independent Healthcare Establishments \(July 2014\)](#)

| | Regulations | Standards |
|--|-------------|-----------|
| Total number of Areas for Improvement | 2 | 4 |

Areas for improvement and details of the QIP were discussed with Mr O'Neill as part of the inspection process. The timescales for completion commence from the date of inspection.

| Quality Improvement Plan | |
|--|--|
| Action required to ensure compliance with The Independent Health Care Regulations (Northern Ireland) 2005 | |
| <p>Area for improvement 1</p> <p>Ref: Regulation 39 (2)</p> <p>Stated: First time</p> <p>To be completed by: 6 July 2021</p> | <p>The registered persons shall ensure that the laser registers are updated to include the information listed below every time the laser machines are used:</p> <ul style="list-style-type: none"> • the name of the person treated • the date • the name of the operator • the actual treatment given and area of the body • the precise exposure • any accident or adverse incident <p>Re: 5.2.8</p> |
| | Response by registered person detailing the actions taken: |

| | |
|--|---|
| <p>Area for improvement 3</p> <p>Ref: Regulation 39 (2)</p> <p>Stated: First time</p> <p>To be completed by: 6 July 2021</p> | <p>The registered persons shall ensure that an accurate and up to date treatment record is maintained for every client that includes:</p> <ul style="list-style-type: none"> • client details • medical history • signed consent form • skin assessment • patch test (where appropriate) • record of treatment delivered including the number of shots and fluence settings (where appropriate) <p>Re: 5.2.9</p> <p>Response by registered person detailing the actions taken:</p> |
| <p>Action required to ensure compliance with the Minimum Care Standards for Independent Healthcare Establishments (July 2014)</p> | |
| <p>Area for improvement 1</p> <p>Ref: Standard 48.13</p> <p>Stated: First time</p> <p>To be completed by: 6 August 2021</p> | <p>The registered persons shall ensure that staff who are not directly involved in the laser service, have laser safety awareness training and a record is maintained and available for inspection.</p> <p>Ref: 5.2.1</p> <p>Response by registered person detailing the actions taken:</p> |
| <p>Area for improvement 2</p> <p>Ref: Standard 48.2</p> <p>Stated: First time</p> <p>To be completed by: 6 August 2021</p> | <p>The registered persons shall ensure that the register of authorised operators is kept up to date.</p> <p>Ref: 5.2.8</p> <p>Response by registered person detailing the actions taken:</p> |
| <p>Area for improvement 3</p> <p>Ref: Standard 48.6</p> <p>Stated: First time</p> <p>To be completed by: 6 August 2021</p> | <p>The registered persons shall ensure that all authorised operators sign to indicate that they accept and understand the local rules and medical treatment protocols.</p> <p>Ref: 5.2.8</p> <p>Response by registered person detailing the actions taken:</p> |

| | |
|---|---|
| <p>Area for improvement 4</p> <p>Ref: Standard 1.1</p> <p>Stated: First time</p> <p>To be completed by: 6 August 2021</p> | <p>The registered person shall ensure that in respect of laser tattoo removal treatments written information is provided to the client pre and post treatment which outlines the treatment provided, any risks, complications and expected outcomes.</p> <p>Ref: 5.2.9</p> <p>Response by registered person detailing the actions taken:</p> |
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