

# Inspection Report

7 February 2022



## Urban Beauty & Skincare Clinic

Type of service: Independent Hospital – Cosmetic Laser  
Address: 33a-33b Comber Road, Belfast, BT16 2AA  
Telephone number: 028 9048 4202

[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 the [Minimum Care Standards for Independent Healthcare Establishments \(July 2014\)](#)

## 1.0 Service information

<p><b>Registered Providers:</b> Mrs Helen Alcorn-Hayes and Mrs Lesley Alcorn</p>	<p><b>Registered Manager:</b> Mrs Helen Alcorn-Hayes</p> <p><b>Date registered:</b> 9 October 2019</p>
<p><b>Person in charge at the time of inspection:</b> Mrs Helen Alcorn-Hayes</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)</p>	
<p><b>Brief description of how the service operates:</b> Urban Beauty &amp; Skincare Clinic 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.</p> <p>Urban Beauty &amp; Skincare Clinic provides a range of cosmetic/aesthetic treatments. This inspection focused solely on those treatments using a Class 4 laser 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: Cynosure  Model: Elite Plus  Serial Number: ELM+ 1065  Laser Class: 4  Wavelength: 1064nm</p> <p><b>Laser protection advisor (LPA):</b> Mr Irfan Azam</p> <p><b>Laser protection supervisor (LPS):</b> Mrs Helen Alcorn-Hayes</p> <p><b>Medical support services:</b> Dr Paul Myers</p>	

**Authorised operators:**

Mrs Helen Alcorn-Hayes  
 Ms Grainne Dalzelle-Sheppard  
 Ms Lee McGregor

**Types of laser treatments provided:**

Vascular  
 Hair Removal  
 Skin rejuvenation  
 Pigmented lesions

**2.0 Inspection summary**

This was an announced inspection, undertaken by a care inspector on 7 February 2023 from 10.00 am to 1.00 pm.

The purpose of the inspection was to assess progress with any 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 safety; 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 patient satisfaction surveys undertaken by Urban Beauty & Skincare Clinic. All clients indicated that they were very satisfied with the care and treatment provided.

Posters were issued to 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 service done to meet any areas for improvement identified at or since last inspection?**

The last inspection to Urban Beauty & Skincare Clinic was undertaken on 14 July 2021; 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 Alcorn-Hayes told us there are sufficient staff in the various roles to fulfil the needs of the establishment and clients.

Mrs Alcorn-Hayes confirmed that laser treatments are only carried out by authorised operators. A register of authorised for the laser is maintained and kept up to date.

Authorised operators are required to have up to date training in core of knowledge training, application training for the equipment in use, basic life support, infection prevention and control, fire safety awareness and safeguarding adults at risk of harm, in keeping with RQIA's training guidance. A review of training records evidenced that all authorised operators had up to date training in core of knowledge training, application training for the equipment in use and infection prevention control and one authorised operator also had training records for basic life support, fire safety awareness and safeguarding adults at risk of harm. It was observed on inspection that the basic life support training record for one authorised operator and the fire safety awareness and safeguarding adults at risk of harm training records for two of the authorised operators, were out of date. Following the inspection RQIA received confirmation that fire safety awareness, safeguarding adults at risk of harm and basic life support training for the authorised operators had been completed.

All other staff employed at the establishment, but not directly involved in the use of the laser equipment, had received laser safety awareness training.

As a result of the actions taken following the inspection, it was determined that Mrs Alcorn-Hayes had appropriate arrangements in place to ensure that staff are appropriately trained.

### **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 however this was not reviewed during this inspection. Mrs Alcorn-Hayes confirmed that there have been no authorised operators recruited since the previous inspection.

Discussion with Mrs Alcorn-Hayes determined 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.

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

Mrs Alcorn-Hayes 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 with an adult. 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 Alcorn-Hayes 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.

As discussed in 5.2.1 all authorised operators have now completed formal 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 a copy of the regional guidance document entitled Adult Safeguarding Prevention and Protection in Partnership (July 2015) was available for reference.

Mrs Alcorn-Hayes 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?**

As discussed in 5.2.1 all authorised operators now have had up to date training in basic life support. There was a resuscitation policy in place and a review of this evidenced that it was comprehensive, reflected legislation and best practice guidance. Discussion with one authorised operator confirmed that this staff member was aware of what action to take in the event of a medical emergency.

As a result of the actions taken following the inspection 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 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 room was clean and clutter free. Discussion with an authorised operator 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.

It was determined that appropriate arrangements were 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 in response to the COVID-19 pandemic were discussed with an authorised operator who outlined the measures that will be taken by Urban Beauty & Skincare Clinic to ensure current best practice measures remain in place.

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 treatments are provided in one treatment room. The premises have other treatment rooms and access to storage rooms. 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 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 however review of the service level agreement between the establishment and the LPA highlighted that this expired in August 2022. Mrs Alcorn-Hayes was advised to consult with the LPA and request a copy of the most recent service level agreement. Following the inspection RQIA received confirmation that the service level agreement had been renewed and is due to expire in August 2023.

Up to date local rules were in place which had been developed by the LPA. The local rules contained the relevant information about the laser equipment being used and are due to expire at the end of February 2023.

The establishment's LPA completed a risk assessment of the premises during February 2022 and all recommendations made by the LPA have been addressed.

Mrs Alcorn-Hayes 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. 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 Alcorn-Hayes, as the LPS, has overall responsibility for safety during laser 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 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 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 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 equipment is in use and removed when not in use.

The laser is 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.

Urban Beauty & Skincare Clinic has a laser register. An Authorised operator told us that they complete the relevant section of the register every time the equipment is operated, the register includes:

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

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

As a result of the actions taken following the inspection it was determined that 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. Written information is provided to the client pre and post treatment which outlines the treatment provided, side-effects, risks, complications and expected outcomes. Information is accessible and includes the cost of the treatment.

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 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 involvement in the decision making process?**

Discussion with Mrs Alcorn-Hayes 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 Alcorn-Hayes told us that she encourages clients to complete a satisfaction survey when their treatment is complete and that the results of these are collated to provide a summary report which is made available to clients and other interested parties. Mrs Alcorn-Hayes confirmed that an action plan would be developed to inform and improve services provided, if appropriate.

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 Alcorn-Hayes 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.

The arrangements for the management of complaints and incidents were reviewed and discussed with Mrs Alcorn-Hayes 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 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.

An incident policy and procedure was in place which includes the reporting arrangements to RQIA. Mrs Alcorn-Hayes 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 Alcorn-Hayes demonstrated understanding of her role and responsibility in accordance with legislation. Information requested by RQIA has been submitted within the specified timeframes. Mrs Alcorn-Hayes confirmed that the statement of purpose and client's guide are kept under review, revised and updated when necessary and available on request. 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 completed.

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 Alcorn-Hayes, registered person, as part of the inspection process and can be found in the main body of the report.



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