

Inspection Report

20 July 2021



Therapie Ltd

Type of service: Independent Hospital (IH) – Cosmetic Laser Service
Address: 33 Market Street, Omagh, BT78 1EE
Telephone number: 07519 751 905

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

1.0 Service information

<p>Organisation/Registered Provider: Therapie Clinic Ltd</p> <p>Responsible Individual: Mr Phillip McGlade</p>	<p>Registered Manager: Miss Gemma Knightly</p> <p>Date registered: 3 August 2020</p>
<p>Person in charge at the time of inspection: Miss Gemma Knightly</p>	
<p>Categories of care: Independent Hospital (IH) PT(L) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers and/or PT(IL) Prescribed techniques or prescribed technology</p>	
<p>Brief description of how the service operates: Therapie Ltd is registered with the Regulation and Quality Improvement Authority (RQIA) as an Independent Hospital (IH) with the following category of care: PT (L) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers. Therapie Ltd also 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>Therapie Clinic Ltd is the registered provider and Mr Phillip McGlade is the responsible individual. Mr McGlade is also the responsible individual for three other services registered with RQIA.</p> <p>Equipment available in the service:</p> <p>Laser equipment: Manufacturer:Cynosure Model:Elite+ Serial Number: ELM +1979 Laser Class: 4 Wavelength: 755nm -1064nm</p> <p>Manufacturer:Cynosure Model:Elite+ Serial Number: ELM +1947 Laser Class: 4 Wavelength: 755nm -1064nm</p> <p>Laser protection advisor (LPA): Mr Alex Zarneh</p>	

Laser protection supervisor (LPS):

Miss Gemma Knightly

Medical support services:

Dr Paul Reddy

Authorised operators:

Miss Gemma Knightly

Ms Catriona Knox

Ms Yadira Nugent

Ms Clare O'Doherty

Ms Bronagh Conneely

Ms Saiorse Cassidy

Ms Richella Timoney

Ms Gemma McKenna

Types of treatment provided:

Hair removal

2.0 Inspection summary

This was an announced inspection, undertaken by a care inspector on 20 July 2021 from 11.00 am to 2.00 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 during the 2020-21 inspection year.

The purpose of the inspection was to assess progress with areas for improvement identified during the pre registration 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 safety; management of medical emergencies; infection prevention and control (IPC); the management of clinical records; the clinic's adherence to best practice guidance in relation to COVID-19; 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 consulted on the day of the inspection and client feedback was assessed by reviewing a recent report generated by Therapie Ltd from completed client satisfaction surveys. The report dated July 2021 evidenced clients were highly satisfied with the quality of treatment, information and care received.

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

One client submitted a response that indicated that they felt their care was safe and effective, that they were treated with compassion and that the service was well led. The client indicated that they were very satisfied with each of these areas of their care and included a positive comment indicating that the clinic was spotless.

One staff member submitted questionnaire responses that indicated they felt client care was safe, effective, compassionate and that the service was well led. The staff member indicated that they were very satisfied with each of these areas of client care and included positive comments indicating that they felt supported and enjoyed working in the practice.

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 Therapie Ltd was a pre registration inspection undertaken on 21 July 2020; 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?

Miss Knightly told us there are sufficient staff in the various roles to fulfil the needs of the establishment and clients and confirmed that laser treatments are only carried out by authorised operators. A register of authorised operators for the lasers is maintained and kept up to date.

A review of completed induction programmes evidenced that induction training is provided to new staff on commencement of employment.

A review of training records evidenced that the authorised operators 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 the RQIA training guidance. The training certificate to evidence that one of the authorised operators had completed core of knowledge was not available for review however, this training certificate was submitted following the inspection.

Discussion with Miss Knightly and review of documentation confirmed that authorised operators take part in appraisal on an annual basis.

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.

Miss Knightly told us that five authorised operators had been recruited since the previous inspection. A review of the personnel files of two of the authorised operators recently recruited and discussion with Miss Knightly confirmed that new staff have been recruited as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005.

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

Miss Knightly 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, distinct referral pathways in the event of a safeguarding issue arising and the relevant contact details for onward referral to the local Health and Social Care Trust should a safeguarding issue arise.

Discussion with staff confirmed that they were 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 the safeguarding lead for Therapie Clinic Ltd, has 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 copies 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 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. Discussion with authorised operators 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 Miss Knightly who outlined the measures that will be taken by Therapie Ltd 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 which are used for laser treatment. 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 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 dated 1 April 2021 was reviewed and this expires during April 2022.

Up to date, local rules were in place which have been developed by the LPA. The local rules contained the relevant information about the laser and IPL equipment being used.

The establishment's LPA completed a risk assessment of the premises during October 2020 and all recommendations made by the LPA have been addressed.

Miss Knightly told us that laser procedures are carried out following medical treatment protocols produced by a named registered medical practitioner. The medical treatment protocols are due to expire during March 2022 and systems are in place to review these when due. The medical treatment protocols contained the relevant information about the treatments being provided.

Miss Knightly, 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 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.

The lasers are operated using a key and 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 a treatment is being carried out.

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.

Therapie Ltd has two laser registers and authorised operators told us that they complete the relevant section of the registers every time the equipment is operated, the registers include:

- 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 of the lasers was undertaken during July 2021.

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, any 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, 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 each 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 which is in line with legislation.

Therapie Ltd is registered with the Information Commissioner's Office (ICO). A review of the current registration certificate evidenced that registration is due to expire during August 2021.

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

Discussion with Miss Knightly 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. 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 lockable storage area.

Miss Knightly 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. Miss Knightly confirmed that an action plan would be developed to inform and improve services provided, if appropriate.

As discussed in section 4.0 review of the most recent client satisfaction report dated July 2021 found that clients were highly satisfied with the quality of treatment, information and care received.

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.

Miss Knightly has overall responsibility for the day to day management of the establishment and is responsible for reporting to the registered provider. Therapie Ltd is operated by Therapie Clinic Ltd and Mr Phillip McGlade is the responsible individual for Therapie Clinic Ltd. He nominates a member of the senior management team to monitor the quality of services and undertake a visit to the premises at least every six months in accordance with legislation.

The most recent unannounced monitoring visit had been undertaken on 7 July 2021 and the report was available for inspection. Miss Knightly confirmed that all reports are sent to the registered provider to enable them to monitor progress with the identified actions.

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.

Miss Knightly confirmed that a system was in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies as appropriate.

Miss Knightly demonstrated a clear understanding of her role and responsibility in accordance with legislation. Information requested by RQIA has been submitted within the specified timeframes. Miss Knightly also 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.

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 patients and the importance of staff being aware of equality legislation and recognising and responding to the diverse needs of patients was discussed with Miss Knightly.

6.0 Conclusion

Based on the inspection findings and discussions held this service is providing safe and effective care in a caring and compassionate manner; and the service is well led.

7.0 Quality Improvement Plan/Areas for Improvement

	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 Miss Gemma Knightly, Registered Manager as part of the inspection process and can be found in the main body of the report.



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