

# Inspection Report

27 July 2021



## SD Microblading

Type of service: Independent Hospital (IH) – Cosmetic Laser and  
Intense Pulse Light (IPL) Service

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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

<b>Organisation/Registered Person:</b> Ms Simona Daukantiene	<b>Registered Manager:</b> Ms Simona Daukantiene  <b>Date registered:</b> 3 September 2020
<b>Person in charge at the time of inspection:</b> Ms Simona Daukantiene	
<b>Categories of care:</b> 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: establishments using intense light sources	
<b>Brief description of how the service operates:</b> SD Microblading 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/or PT(IL) Prescribed techniques or prescribed technology: establishments using intense light sources. SD Microblading also provides a range of cosmetic/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.	
<b>Equipment available in the service:</b>	
<b>Manufacturer:</b> <b>Model:</b> <b>Serial no:</b>	Shandong Brolaser technology Co Ltd UK Beauty Machines Triple Combo Multi 15 19090S01
<b>Laser Class:</b> <b>Wavelength:</b> <b>Serial No:</b>	4 Nd YAG 1064nm & 532nm L19061901SX
<b>IPL</b> <b>Serial No:</b>	
L19061901SX	
<b>Laser protection advisor (LPA)</b> Mr Simon Wharmby (Lasersafe)	
<b>Laser protection supervisor (LPS)</b> Ms Simona Daukantiene	

**Medical support services**

Dr Ross Martin

**Authorised operator**

Ms Simona Daukantiene

**Types of IPL treatment:**

- hair removal
- skin rejuvenation

**Types of laser treatment:**

- tattoo removal

**2.0 Inspection summary**

This was an announced inspection, undertaken by a care inspector on 27 July 2021 from 10:00 am to 12.00 pm.

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 and IPL 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 present on the day of the inspection and client feedback was assessed by reviewing the most recent patient satisfaction surveys completed by clients who visited SD Microblading. This is discussed further in section 5.2.10 of this report.

Posters were issued to SD Microblading by RQIA prior to the inspection inviting clients to complete an electronic questionnaire. No completed client 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 SD Microblading was a pre-registration inspection undertaken on 1 September 2020 and 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?**

Ms Daukantiene is the only person who works in SD Microblading and laser and IPL treatments are carried out by her as the sole authorised operator. The register of authorised operators for the laser and IPL machines reflects that Ms Daukantiene is the only authorised operator.

A review of training records evidenced that Ms Daukantiene has 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.

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?**

As discussed Ms Daukantiene does not employ any staff. Ms Daukantiene was advised that should authorised operators be recruited in the future robust recruitment and selection policies and procedures should be developed in keeping with legislation and best practice guidance.

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

Ms Daukantiene 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.

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

Ms Daukantiene stated that laser and IPL 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 and the relevant contact details for onward referral to the local Health and Social Care Trust in the event of a safeguarding issue arising.

Discussion with Ms Daukantiene 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 Ms Daukantiene, as the safeguarding lead, has completed formal training in safeguarding adults in keeping with the Northern Ireland Adult Safeguarding Partnership (NIASP) training strategy (revised 2016) and minimum standards.

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?**

Ms Daukantiene had up to date training in basic life support and was 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 treatment room was clean and Ms Daukantiene was advised to remove several items stored on worktops and a table to ensure the room remains clutter free and easy to clean.

Discussion Ms Daukantiene 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, Ms Daukantiene has up to date training in IPC.

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 Ms Daukantiene who outlined the measures that will be taken by SD Microblading 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 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 one treatment room and access to a toilet facility and staff area. 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 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 on 31 August 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 on 8 July 2021 and all recommendations made by the LPA have been addressed.

As discussed, Ms Daukantiene is the sole authorised operator and told us that laser and IPL procedures are carried out following medical treatment protocols produced by named registered medical practitioner. The medical treatment protocols are due to expire on 8 September 2022 and systems are in place to review these when due. The medical treatment protocols contained the relevant information about the treatments being provided.

Ms Daukantiene, as the LPS and sole authorised operator, has overall responsibility for safety during laser and IPL treatments and a list of authorised operators is maintained.



Ms Daukantiene has signed to state that she has 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 door to the treatment room is locked when the laser or IPL equipment is in use and a procedure is in place to ensure that the door can be opened from the outside in the event of an emergency.

The controlled area is clearly defined and not used for other purposes, or as access to areas, when treatment is being carried out. Ms Daukantiene was aware that the laser safety warning signs should only be displayed when the laser or IPL equipment is in use and removed when not in use.

The laser and IPL machine is 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.

SD Microblading has a laser and IPL register. Ms Daukantiene told us that she completes 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
- any accident or adverse incident

Ms Daukantiene was advised that the precise exposure should be included in the register every time the equipment is operated. Ms Daukantiene has agreed to action this with immediate effect.

There are arrangements in place to service and maintain the laser and IPL equipment in line with the manufacturer's guidance. The most recent service report was dated 20 February 2020 and the next service date was recorded as 20 February 2022.

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?**

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)

Ms Daukantiene was advised to record the exact treatment delivered including number of shots and fluence settings (where appropriate) in the clients care records. Ms Daukantiene has agreed to action this with immediate effect.

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.

#### **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 Ms Daukantiene 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 in a lockable storage area.

Ms Daukantiene 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. Ms Daukantiene 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 26 July 2021 found that clients were highly satisfied with the quality of treatment, information and care received.

#### **5.2.11 How does the registered person 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.



Ms Daukantiene 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 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.

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

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

Ms Daukantiene demonstrated a clear understanding of her role and responsibility in accordance with legislation. Information requested by RQIA has been submitted within the specified timeframes. Ms Daukantiene 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 clients and the importance of staff being aware of equality legislation and recognising and responding to the diverse needs of clients was discussed with Ms Daukantiene.

Discussion with Ms Daukantiene and review of information evidenced that the equality data collected was managed in line with best practice.

## **6.0 Conclusion**

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

## **7.0 Quality Improvement Plan/Areas for Improvement**

	<b>Regulations</b>	<b>Standards</b>
<b>Total number of Areas for Improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Ms Daukantiene, Registered Person as part of the inspection process and can be found in the main body of the report.



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