

# Inspection Report

14 February 2024



## Dr Emma Clinics

Type of service: Independent Hospital (IH) – Dental Treatment  
Address: 11F Old Warrenpoint Road, Newry, BT34 2PF  
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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 [Minimum Care Standards for Independent Healthcare Establishments \(July 2014\)](#)

## 1.0 Service information

<p><b>Organisation/Registered Provider:</b> Dr Emma Clinics Limited</p> <p><b>Responsible Individual:</b> Dr Emma Cunningham- Idowu</p>	<p><b>Registered Manager:</b> Dr Emma Cunningham-Idowu</p> <p><b>Date registered:</b> 8 February 2022</p>
<p><b>Person in charge at the time of inspection:</b> Dr Emma Cunningham- Idowu</p>	
<p><b>Categories of care:</b> Independent Hospital (IH) – Dental Treatment (amended following inspection.) See below</p>	
<p><b>Brief description of how the service operates:</b> Dr Emma Clinics was initially registered with the Regulation and Quality Improvement Authority (RQIA) as an independent hospital (IH) with a dental treatment category of care, with one dental surgery providing private dental care and treatment, without the use of conscious sedation.</p> <p>Dr Emma Clinics Ltd submitted an application of variation to registration to remove the category of care for dental treatment and include the categories of care: 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). RQIA was informed that the dental treatment service has ceased and the dental chair has been removed from the establishment.</p> <p>Dr Emma Clinics Ltd also provides a range of cosmetic/aesthetic treatments. This inspection focused solely on those treatments that fall within regulated activity and the categories of care for which the establishment has made application to register with the Regulation Quality Improvement Authority (RQIA), that is the laser and IPL service.</p> <p><b>Laser equipment available in the service:</b></p> <p><b>Multi- platform equipment</b> Manufacturer: Sciton Model: Joule X Serial Number:1926-00008 Laser Class: 4 N/A-(IPL) Hand Pieces: Halo – 1470nm Profractional III TRL-2940nm Laser Joule x machine 2940nm BBL-300nm-1400nm</p>	

**Types of laser treatments provided:** Halo- skin resurfacing  
 Profractional III TRL- Acne scarring  
 Laser Joule x- deep skin resurfacing

**Types of IPL treatments provided:** BBL- Rosacea, Acne, Pigmentation, Redness, Vascular

## 2.0 Inspection summary

This was an announced variation to registration care inspection, undertaken by a care inspector on 14 February from 10.00 am to 2.30pm. RQIA's laser protection advisor (LPA) supported the inspection remotely by reviewing the laser and IPL equipment and the laser and intense pulse light (IPL) safety arrangements. Their findings are appended to this report.

The purpose of the inspection was to assess progress with areas for improvement identified during or since the last care inspection and to assess compliance with the legislation and minimum standards and to review the readiness of the establishment associated with the variation to registration application.

A RQIA estates inspector reviewed the variation to registration application in relation to matters relating to the premises and has confirmed approval of the application from an estates perspective.

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.

The variation to registration application in relation to change of categories of care is granted from a care and estates perspective.

## 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.

A range of information relevant to the service was reviewed. This included the following records:

- the submitted variation to registration application and associated documents
- the statement of purpose
- the patient guide

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

As this service has not commenced providing IPL/laser treatments, the proposed arrangements to obtain feedback from clients, in relation to the quality and standard of care and treatment provided, were discussed with Dr Emma Cunningham-Idowu.

Dr Cunningham-Idowu told us that following a course of treatment clients will have several different pathways they can utilise to provide feedback. This feedback will be gathered in the form of either client satisfaction surveys, social media channels or in the form of verbal feedback.

Advice was given to retain information regarding client feedback in an anonymised format. This should be summarised and an annual report generated. This report should be made available to clients and other interested parties. Dr Cunningham-Idowu agreed to implement this upon approval of variation of registration application.

#### 5.0 The inspection

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

Areas for improvement from the last inspection on 17 January 2022		
Action required to ensure compliance with The Minimum Standards for Dental Care and Treatment (2011)		Validation of compliance
<b>Area for Improvement 1</b> <b>Ref:</b> Standard 8.5 <b>Stated:</b> First time	The applicant responsible individual shall ensure that the following policies and procedures are reviewed in accordance with legislation and best practice guidance: <ul style="list-style-type: none"> <li>• Complaints</li> <li>• Recruitment and selection of staff</li> <li>• Safeguarding children and adults</li> <li>• Management of medical records</li> <li>• Records management</li> </ul>	<b>Met</b>

	<p><b>Action taken as confirmed during the inspection:</b></p> <p>It was confirmed that the above policies and procedures had been reviewed in accordance with legislation and best practice guidance. However, further minor amendments were advised. Following the inspection updated policies and procedures were submitted to RQIA which were found to be in accordance with legislation and best practice guidance. The matter is further discussed in section 5.2.13 of this report.</p>	
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## 5.2 Inspection findings

### 5.2.1. Has the statement of purpose been developed in keeping with Regulation 7 Schedule 1 of the regulations?

A review of the updated statement of purpose identified that it fully reflected the key areas and themes specified in Regulation 7, Schedule 1 of The Independent Health Care Regulations (Northern Ireland) 2005. Dr Cunningham-Idowu is aware that the statement of purpose should be reviewed and updated as and when necessary.

### 5.2.2. Has the client guide been developed in keeping with Regulation 8, of the regulations?

A review of the updated client guide identified that it fully reflected the key areas and themes specified in Regulation 8 of The Independent Health Care Regulations (Northern Ireland) 2005. Dr Emma Cunningham –Idowu is aware that the client guide should be reviewed and updated as and when necessary.

### 5.2.3 How does this service ensure that staffing levels are safe and that staff are appropriately trained to meet the needs of clients?

Dr Cunningham-Idowu told us there are sufficient staff in the various roles to fulfil the needs of the establishment and clients.

Dr Cunningham-Idowu confirmed that laser and IPL treatments are only carried out by authorised operators. A register of authorised operators for the laser and IPL equipment 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 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.

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

Evidence was available that staff who have professional registration undertake continuing professional development (CPD) in accordance with their professional body's recommendations. Discussion with Dr Cunningham-Idowu and review of documentation confirmed that authorised operators will take part in appraisal on an annual basis.

It was determined that appropriate staffing levels were in place to meet the needs of clients and that staff are suitably trained.

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

Recruitment and selection policies and procedures, which adhered to legislation and best practice guidance for the recruitment of authorised operators were in place. These arrangements will ensure that all the required recruitment documentation has been sought and retained for inspection. A review of one personnel file of an authorised operator and discussion with Dr Cunningham-Idowu confirmed that new staff have been recruited as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005.

It was determined that the recruitment of authorised operators in the future will be undertaken in accordance with legislation and best practice guidance.

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

Dr Cunningham-Idowu stated that laser and IPL treatments are not provided to persons under the age of 18 years.

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 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 Dr Cunningham-Idowu, as the safeguarding lead, has completed formal (level three) 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 both available for reference.

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

#### **5.2.6 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 written protocol in place for dealing with a recognised medical emergency.

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

#### **5.2.7 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.

The laser and IPL treatment room was clean and clutter free. Discussion with Dr Cunningham-Ildowu 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.

#### **5.2.8 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 Dr Cunningham-Ildowu who outlined the measures that will be taken by Dr Emma Clinics to ensure current best practice measures are in place.

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

#### **5.2.9 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 (CO<sub>2</sub>) fire extinguisher was available which has been serviced within the last year.

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

### **5.2.10 How does the service ensure that laser and IPL procedures are safe?**

A laser safety file was in place which contained most of 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 October 2024.

Up to date local rules were in place which had been developed by the establishment's LPA. The local rules contained most of the relevant information about the laser and IPL equipment being used. However, RQIA's LPA highlighted that the label attached to the Sciton Joule identifies the spectrum of operational wavelengths as being between 750 nm and 2940 nm while the protective eyewear used with the unit provide protection only above 900 nm. It was advised that whilst it is believed that this unit only incorporates laser outputs at 1470 nm and 2940 nm, clarification should be provided from the establishment's LPA that it is not capable of producing laser outputs outside of this range.

Following the inspection, the establishment's LPA made amendments to the local rules to fully reflect the individual hand pieces and machine wavelengths to be used and confirmed the protective eyewear in place is sufficient.

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

Dr Cunningham- Idowu confirmed that laser and IPL procedures will be carried out following medical treatment protocols. The medical treatment protocols had been produced by Dr Cunningham- Idowu. However, the protocols did not contain all relevant information as set out in the legislation and minimum care standards about the treatments proposed to be provided. Guidance was provided to Dr Cunningham-Idowu who was receptive to the advice offered on the matter. Following the inspection, a set of comprehensive medical treatment protocols were submitted to RQIA which were in line with the range of treatments to be provided. It was established that systems are in place to review the medical treatment protocols when due.

Dr Cunningham-Idowu, as the laser protection supervisor (LPS), has overall responsibility for safety during laser and IPL treatments and a list of authorised operators was maintained. All authorised operators had signed to state that they had read and understood the local rules and medical treatment protocols.

When the laser and 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 and IPL 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 and IPL equipment is in use and removed when not in use.

The laser and IPL machine is operated using a keypad code. Arrangements are in place for the safe custody of the keypad code when not in use. Protective eyewear is available for the client and operator as outlined in the local rules.

A laser and IPL register was not in place. Dr Cunningham-Idowu confirmed that laser and IPL register will be fully established which will differentiate between laser and IPL treatments. Advice was provided on the matter and Dr Cunningham- Idowu was reminded that a laser/IPL register is required under the legislation.

The register should include:

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

The establishment of the laser/IPL register was confirmed following the inspection.

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

It was determined that appropriate arrangements were in place to operate the laser and IPL equipment.

#### **5.2.11 How does the service ensure that clients have a planned programme of care and have sufficient information to consent to treatment?**

Dr Cunningham- Idowu confirmed that clients will be 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.

A treatment record template has been developed and was reviewed during the inspection.

Dr Cunningham-Ildowu confirmed this will be completed to ensure that an accurate and up to date treatment record for every client is maintained and that will include:

- 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 and discussion with Dr Cunningham-Ildowu confirmed that client records will be 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.

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

Discussion with Dr Cunningham-Ildowu regarding the consultation and treatment process confirmed that clients will be treated with dignity and respect. The consultation and treatment will be provided in a private room with the client and authorised operator present. Information will be 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.

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.

#### **5.2.13 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. Dr Cunningham-Ildowu 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 will be 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.

Review of the complaints policy and procedure confirmed it was mostly in accordance with the Department of Health (DoH) guidance on complaints handling [Health and Social Care Complaints Procedure \(Revised April 2023\)](#) and the Independent Health Care Regulations (Northern Ireland) 2005. The RQIA address was not up to date. Following the inspection an amended complaints policy and procedure was submitted to RQIA which outlined RQIA's current address. Dr Cunningham-Idowu demonstrated an understanding of complaints management.

Clients and/or their representatives are made aware of how to make a complaint by way of the client guide. Arrangements are 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. Dr Cunningham –Idowu was advised to carry out an audit of complaints in the future to identify trends, drive quality improvement and enhance service provision.

Observations made and discussion with Dr Cunningham-Idowu confirmed that an incident policy and procedure was in place which includes the reporting arrangements to RQIA. Dr Cunningham-Idowu confirmed that incidents would be effectively documented and investigated in line with legislation. Dr Cunningham-Idowu confirmed that all relevant incidents will be 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.

During discussion Dr Cunningham-Idowu demonstrated a clear understanding of her role and responsibility in accordance with legislation.

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

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

#### 5.2.14 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 Dr Cunningham- Idowu.

### 6.0 Quality Improvement Plan/Areas for Improvement

	Regulations	Standards
<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 Dr Cunningham-Idowu, as part of the inspection process and can be found in the main body of the report.

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15 February 2024

## Laser Protection Adviser's Report

Clinic Details Dr Emma Clinics Introduction an inspection of Laser Treatment Room at the above premises was carried out remotely on 14/02/2024 via the WhatsApp platform including live video in support of RQIA who were present on site. This report summarises the main laser protection aspects including any improvements which may be required.

### Laser / IPL Equipment

Make	Model	Class	Serial Number	Wavelength
Sciton	Joule X - Laser and IPL Platform	4 NA (IPL)	19261 - 00008	1470 nm, 2940 nm Broadband 300 nm - 1400 nm IPL

I can confirm that all practical aspects of laser protection including laser labelling, eyewear specifications, room signage, room security and layout were adequate and in accordance with the Minimum Care Standards. Please, however, be aware of the following comments relating to the laser output of the Sciton Joule X.

### Comments & Recommendations

The label attached to the Sciton Joule identifies the spectrum of operational wavelengths as being between 750 nm and 2940 nm while the protective eyewear used with the unit provide protection only above 900 nm. Whilst it is believed that this unit only incorporates laser outputs at 1470 nm and 2940 nm, clarification should be provided that it is not capable of producing laser outputs at any other wavelengths that would be outside the protective range of the eyewear.



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**John Kyriou**  
Laser Protection Adviser



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