

Inspection Report

16 September 2024



Face Therapy NI Ltd

Type of service: Independent Hospital - Cosmetic Laser \ Intense Pulsed Light
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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

Organisation / Registered Provider: Face Therapy NI Limited	Registered Manager: Ms Lisa Waring
Responsible Individual Ms Lisa Waring	Date registered: 30 November 2023
Person in charge at the time of inspection: Ms Lisa Waring	
Categories of care: Independent Hospital (IH) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers PT(L) and/or Prescribed techniques or prescribed technology: establishments using intense light sources PT(IL)	
Brief description of how the service operates: Face Therapy NI Ltd 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 PT(IL) Prescribed techniques or prescribed technology: establishments using intense light sources. Face Therapy NI Ltd 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. Since the previous inspection, a new laser has been installed in a second treatment room. Prior to the inspection, RQIA received a variation to registration application to include AH (DS) - Acute hospitals (day surgery only) and PD – Private Doctor category of care. This variation to registration application is incomplete and did not form part of this inspection. This is discussed further in section 5.2.1.	
Equipment available in the service: Laser equipment: Manufacturer: Cynosure Model: Elite iQ Serial Number: RL221716 Laser Class: 4 Wavelength: 755nm, 1064 nm	

Multi-platform equipment:

Manufacturer: Sciton
 Model: mJOULE
 Serial Number: 51722
 Laser Class: 4
 Wavelengths: 1927nm (laser) and 300-1400nm (Broadband Light- BBL)
 Hand pieces: MOXI laser and BBL Hero

The mJOULE is a multi-platform machine that is capable of operating as a MOXI laser and as BBL by changing the hand piece.

Types of laser treatments provided:

Hair reduction
 Skin rejuvenation

Types of IPL (BBL) treatments provided:

Hair reduction
 Skin rejuvenation
 Acne scarring reduction

2.0 Inspection summary

This was an announced inspection, undertaken by a care inspector on 19 September 2024 from 9.30 am to 1.00 pm.

The inspection was facilitated by one of the directors for Face Therapy NI Limited and the designated lead for the laser service.

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; authorised operator training; staff recruitment; safeguarding; management of medical emergencies; infection prevention and control; 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; providing the relevant information to allow clients to make informed choices; and seeking the views and opinions of clients on the quality of service provided.

An area for improvement has been identified against the standards to ensure the laser protection supervisor (LPS) regularly reviews the laser safety file to ensure it contains accurate and up to date laser and IPL safety documentation.

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 client satisfaction surveys completed by Face Therapy NI Ltd.

Posters were issued to Face Therapy NI Ltd 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 Face Therapy NI Ltd was undertaken on 17 October 2023; 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 and that staff are appropriately trained?

The director told us there are sufficient staff in the various roles to fulfil the needs of the establishment and clients and confirmed that laser and IPL treatments are only carried out by authorised operators.

A review of training records evidenced that authorised operators have up to date training in core of knowledge, basic life support, infection prevention and control, fire safety awareness and safeguarding adults and children at risk of harm in keeping with the RQIA training guidance.

The director and the laser service lead advised that all authorised operators had undertaken safe applications training for the Cynosure Elite iQ laser on 21 March 2024 however, related certificates were not available for review during the inspection. Following inspection RQIA received evidence of training for all authorised operators and assurances that these had now been retained on file.

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 staff and review of documentation confirmed that authorised users take part in appraisal on an annual basis.

Review of the staff register identified that a medical practitioner works as an authorised operator at Face Therapy NI Ltd. This was discussed with the director, who has advised that a variation to registration application has been submitted to RQIA in relation to adding a private doctor service category of care to the current registration.

It was determined that appropriate staffing levels were in place to meet the needs of clients and that staff are suitably 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, which adhered to legislation and best practice guidance for the recruitment of authorised operators. These arrangements will ensure that all required recruitment documentation has been sought and retained for inspection.

Ms Waring oversees the recruitment and selection of authorised operators and approves all staff appointments.

A review of the staff register evidenced that no new authorised operators had been recruited since the previous inspection. The director 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.

The director is aware that any new authorised operators are required to be provided with a job description and induction on commencement of employment.

Discussion with the director and laser service lead confirmed that both had a clear understanding of the legislation and best practice guidance in relation to recruitment and selection.

It was determined that the recruitment of authorised operators 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?

The laser service lead 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 laser service lead 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 Waring, as the safeguarding lead, has completed formal level two training in safeguarding adults and children in keeping with the Northern Ireland Adult Safeguarding Partnership (NIASP) training strategy (revised 2016), the Safeguarding Board for Northern Ireland (SBNI) Child Safeguarding Learning and Development Strategy and Framework 2020 – 2023) and minimum standards.

It was confirmed that copies of the regional guidance document entitled Adult Safeguarding Prevention and Protection in Partnership (July 2015) and the regional policy entitled Co-operating to Safeguard Children and Young People in Northern Ireland (August 2017) were available for reference.

It was determined that 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 written protocol in place for dealing with recognised medical emergencies.

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 (IPC) 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.

Both laser and IPL treatment rooms were clean and clutter free. A tour of the premises and discussion with one of the directors 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 confirmed that arrangements are in place to check Department of Health (DOH) and Public Health Agency (PHA) websites for advisory information, guidance and alerts with regards to IPC.

It was determined that the service had appropriate arrangements in place in relation to IPC and decontamination.

5.2.6 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 (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.

5.2.7 How does the service ensure that laser and IPL procedures are safe?

A laser safety file was in place which contained information in relation to laser and IPL equipment. There was written confirmation of the appointment and duties of a certified laser protection advisor (LPA), dated 8 August 2024, which is reviewed on an annual basis

A review of the laser safety file identified that local rules were in place for the mJOULE MOXI-BBL however, local rules had not been retained in the laser safety file in respect of the new Elite iQ laser. This was discussed with the director and advice was given to contact the LPA immediately following the inspection to request copies of the updated local rules in respect of both machines. Following inspection, local rules dated August 2024, one for the mJOULE MOXI-BBL and one for the Elite iQ, were shared with RQIA.

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

The laser service lead told us that laser and IPL treatments are not provided to persons under the age of 18 years.

The laser service lead confirmed that laser and IPL procedures are carried out following medical treatment protocols. The medical treatment protocols had been produced by a named registered medical practitioner. Review of the protocols for the mJOULE MOXI-BBL confirmed that they contained the relevant information about the treatments being provided. However, it was noted these treatment protocols had expired on 6 September 2024. It was also identified that treatment protocols for the new Elite iQ laser had not been retained in the laser safety file.

This was brought to the attention of the director who agreed to contact the appointed medical practitioner as a priority. Following inspection, RQIA received confirmation that treatment protocols for both the Elite iQ and mJOULE MOXI-BBL machines, dated 7 September 2024, had been sought and retained in the laser safety file and that all authorised operators had signed to confirm they had read and understood them.

The director was advised to develop systems to ensure arrangements are in place for the LPS to review the laser safety file so as to ensure it contains the most recent versions of all required laser safety documentation. The documentation should reflect all makes and models of the laser and IPL equipment in use and corresponding treatments offered at Face Therapy NI. An area for improvement against the standards has been made in this regard.

The laser protection supervisor (LPS) has overall responsibility for safety during laser and IPL treatments and a list of authorised operators is maintained.

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 areas are clearly defined and not used for other purposes, or as access to other areas, when treatment is being carried out.

The door of each 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 Elite iQ laser is operated using a key. The mJOULE MOXI-BBL is operated using a key code. Arrangements are in place for the safe custody of the key and keypad code when not in use. Protective eyewear is available for the client and operator as outlined in the local rules.

Face Therapy NI Ltd had two laser registers in use, one for the MOXI and one for the BBL. The laser service lead advised that the Elite iQ laser had yet to be used clinically and that a laser register is in place for this equipment.

Authorised operators told us that they complete the relevant section of the register every time the equipment is operated.

The registers for the MOXI and BBL were reviewed and included:

- 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 and IPL equipment in line with the manufacturer's guidance. The most recent service and installation reports for the mJOULE MOXI-BBL and the Elite iQ laser, dated August and May 2024 respectively, were reviewed.

Addressing the area for improvement will strengthen arrangements in place to operate the laser and IPL equipment.

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

The laser service lead confirmed that clients are 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.

Three 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.

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.

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

Discussion with the laser service lead 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.

Clients are provided with the opportunity to complete a satisfaction survey when their treatment is complete. The results of these are collated to provide an anonymised summary report which is made available to clients and other interested parties. An action plan would be developed to inform and improve services provided, if appropriate. Review of the most recent client satisfaction report dated April 2024 found that clients were highly satisfied with the quality of treatment, information and care received.

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.

5.2.10 How does the registered provider assure themselves of the quality of the services provided?

Where the business entity operating the service is a corporate body or partnership or an individual owner who is not in day to day management of the practice, unannounced quality monitoring visits by the registered provider must be undertaken and documented every six months; as required by Regulation 26 of The Independent Health Care Regulations (Northern Ireland) 2005.

Ms Waring was in day to day management of the practice, therefore the unannounced quality monitoring visits by the registered provider are not applicable.

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.

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.

The complaints policy and procedure provided clear instructions for clients and staff to follow. 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.

A review of records and discussion with the director confirmed that no complaints had been received since the previous inspection. is aware that a complaints audit is required to be undertaken to identify trends, drive quality improvement and to enhance service provision.

It was confirmed that an incident policy and procedure was in place which includes the reporting arrangements to RQIA. One of the directors confirmed that incidents are effectively documented and investigated in line with legislation. Ms Waring is aware that all relevant incidents are required to 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.

Ms Waring is aware that the statement of purpose and client's guide are required to be 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 documentation confirmed that current insurance policies and registration with the Information Commissioners Office (ICO) 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.

5.2.11 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 the laser service lead.

6.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has been identified where action is required to ensure compliance with [Minimum Care Standards for Independent Healthcare Establishments \(July 2014\)](#)

	Regulations	Standards
Total number of Areas for Improvement	0	1

The area for improvement and details of the QIP were discussed with the director and the laser service lead as part of the inspection process and can be found in the main body of the report. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with the Minimum Care Standards for Independent Healthcare Establishments (July 2014)	
Area for improvement 1 Ref: Standard 48.21 Stated: First To be completed by: 16 September 2024	The responsible individual shall ensure that the Laser Protection Supervisor (LPS) regularly reviews the laser safety file, to ensure that it is accurate, up to date and contains all of the relevant information in relation to laser and intense light equipment. Ref: 5.2.7 Response by registered person detailing the actions taken: Designated LPS has saved RQIA File review in her monthly schedule to ensure all information is accurate and up to date.



The Regulation and Quality Improvement Authority

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