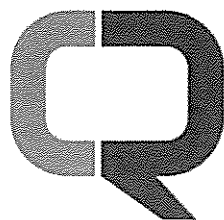


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The Regulation and
Quality Improvement
Authority

REGULATION AND QUALITY
04 NOV 2015
IMPROVEMENT AUTHORITY

Acculase Clinic
RQIA ID: 10640
c/o Lalapanzi
50 Commercial Road
Banbridge
BT32 3ES

Inspector: Winnie Maguire
Inspection ID: IN022602

Tel: 07843062077

**Announced Care Inspection
of
Acculase Clinic
14 October 2015**

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced care inspection took place on 14 October 2015 from 09.50 to 11.00. Overall on the day of the inspection the establishment was found to be delivering safe, effective and compassionate care. The outcome of the inspection found no areas for concern.

This inspection was underpinned by The Independent Health Care Regulations (Northern Ireland) 2005, The Regulation and Improvement Authority (Independent Health Care) (Fees and Frequency of Inspections) (Amendment) Regulations (Northern Ireland) 2011 and The Department of Health, Social Services and Public Safety's (DHSPPS) Minimum Care Standards for Healthcare Establishments, July 2014.

.1 Actions/Enforcement Taken Following the Last Care Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

.2 Actions/Enforcement Resulting from this Inspection

Enforcement action did not result from the findings of this inspection.

.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person: Ms Caroline Boyd	Registered Manager: Ms Caroline Boyd
Person in Charge of the Establishment at the Time of Inspection: Ms Caroline Boyd	Date Manager Registered: 23 April 2008
Categories of Care: PT(IL) Prescribed techniques or prescribed technology: establishments using intense light sources	

IPL Equipment

Manufacturer: Lynton
 Model: Luminette
 Serial Number: 0359-06

Laser Protection Advisor (LPA)	-	Ms Anna Bass (Lasernet)
Laser Protection Supervisor (LPS)	-	Ms Caroline Boyd
Medical Support Services	-	Dr Paul Myers
Authorised User	-	Ms Caroline Boyd
Type of Treatment Provided	-	Hair removal

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards have been met:

- Standard 4 – Dignity, Respect and Rights
- Standard 5 – Patient and Client Partnerships
- Standard 7 – Complaints
- Standard 48 – Laser and Intense Light Sources

Other areas inspected: Incidents, insurance arrangements and RQIA registration.

4. Methods/Process

Specific methods/processes used in this inspection include the following:

Prior to the inspection the following records were analysed: pre-inspection information and complaints return.

During the inspection the inspector met with Ms Caroline Boyd, registered person/manager and the only authorised user.

The following records were examined during the inspection:

- five client care records
- laser safety file
- laser risk assessment
- policies and procedures
- client feedback survey
- incident/accident records
- local rules
- medical treatment protocols
- equipment service records
- complaints records

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the establishment was an announced care inspection dated 14 January 2015. The QIP was returned and approved by the care inspector.

5.2 Review of Requirements and Recommendations from the Last Care Inspection Dated 14 January 2015

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 18 (2) Stated: First time	The registered person must ensure they undertake update training on the safe use and application of the IPL equipment. Action taken as confirmed during the inspection: A certificate of training dated 11 May 2015 on the safe use and application of the IPL equipment was in place for Caroline Boyd.	Met

5.3 Standard 4 – Dignity, Respect and Rights

Is Care Safe?

Discussion regarding the consultation and treatment process, with the registered person confirmed that clients' modesty and dignity is respected at all times. The consultation and treatment is provided in a private room with the client and authorised user present.

Observations and discussion confirmed that client care records were stored securely.

Is Care Effective?

It was confirmed through the above discussion and observation that clients are treated in accordance with the DHSSPS standards for Improving the Patient & Client Experience.

Clients meet with the authorised user undertaking the treatment and are fully involved in decisions regarding their treatment. Clients' wishes are respected and acknowledged by the establishment.

Is Care Compassionate?

Review of five client care records confirmed that clients are treated and cared for in accordance with legislative requirements for equality and rights.

Areas for Improvement

No areas for improvement were identified during the inspection.

Number of Requirements:	0	Number of Recommendations:	0
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5.4 Standard 5 – Patient and Client Partnership**Is Care Safe?**

Clients are asked for their comments in relation to the quality of treatment provided, information and care received.

The information from clients' comments are collected in an anonymised format, summarised and used by the establishment to make improvements to services.

Is Care Effective?

Acculase Clinic obtains the views of clients on a formal and informal basis as an integral part of the service they deliver.

The establishment issued feedback questionnaires to clients. Review of the summary report found that clients were highly satisfied with the quality of treatment, information and care received.

The information received from the client feedback questionnaires is collated into an annual summary report which is made available to clients and other interested parties to read in the waiting area for the laser room of the establishment.

It was confirmed through discussion that comments received from clients are reviewed by Ms Boyd and an action plan is developed and implemented to address any issues identified.

Is Care Compassionate?

Review of care records and discussion with Ms Boyd confirmed that treatment and care are planned and developed with meaningful client involvement; facilitated and provided in a flexible manner to meet the assessed needs of each individual client.

Areas for Improvement

No areas for improvement were identified during the inspection.

Number of Requirements:	0	Number of Recommendations:	0
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5.5 Standard 7 - Complaints

Is Care Safe?

No complaints have been recorded by the establishment since the last inspection. However, systems are in place to investigate and respond to complaints within 28 working days (in line with regulations) or if this is not possible, Ms Boyd confirmed that complainants will be kept informed of any delays and the reason for this.

Is Care Effective?

It is not in the remit of RQIA to investigate complaints made by or on the behalf of individuals, as this is the responsibility of the providers. However, if there is considered to be a breach of regulation as stated in The Independent Health Care Regulations (Northern Ireland) 2005, RQIA has a responsibility to review the issues through inspection.

A complaints questionnaire was forwarded by the Regulation and Quality Improvement Authority (RQIA) to the practice for completion. The returned questionnaire indicated that no complaints have been received for the period 1 January 2014 to 31 March 2015.

The establishment operates a complaints policy and procedure in accordance with the DHSSPS guidance on complaints handling in regulated establishments and agencies and the legislation. Advice was given which lead to a minor amendment to the procedure.

Ms Boyd demonstrated a good understanding of complaints management.

The complaints procedure is contained within the client information file available in the waiting area for the laser room for clients to read.

Is Care Compassionate?

A copy of the complaints procedure is provided to clients and to any person acting on their behalf.

The complainant will be notified of the outcome and action taken by the establishment to address any concerns raised.

Areas for Improvement

No areas for improvement were identified during the inspection.

Number of Requirements:	0	Number of Recommendations:	0
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5.6 Standard 48 - Laser and Intense Light Sources

Is Care Safe?

Clients are asked to complete a health questionnaire. There are systems in place to contact the client's general practitioner, with their consent, for further information if necessary.

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 2 April 2016.

Laser procedures are carried out by a trained operator in accordance with medical treatment protocols produced by Dr Paul Myers and revalidated on 3 April 2014. Systems are in place to review the medical treatment protocols on an annual basis.

The medical treatment protocol set out:

- indications
- contraindications
- technique
- pre-treatment tests
- pre-treatment care
- post-treatment care
- recognition of treatment related problems
- procedure if anything goes wrong with the treatment
- permitted variation on machine variables
- procedure in the event of equipment failure

The establishment has local rules in place which have been developed by their LPA on 27 November 2014

The local rules cover:

- the potential hazards associated with lasers
- controlled and safe access
- authorised operator's responsibilities
- methods of safe working
- safety checks
- personal protective equipment
- prevention of use by unauthorised persons
- adverse incidents procedures

The laser protection supervisor has overall responsibility for safety during laser treatments as recorded within the local rules.

A list of authorised users is maintained and the authorised user has signed to state that they have read and understood the local rules and medical treatment protocols.

Clients are provided with written aftercare instructions following treatment.

The establishment's LPA completed a risk assessment of the premises on 2 November 2014 and no recommendations were made.

The authorised user has completed training in core of knowledge and the safe use and application of the IPL equipment.

Review of the training records confirmed that the authorised user had also undertaken the following required mandatory training in line with RQIA guidance:

- basic life support annually
- fire safety annually
- infection prevention and control annually

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

The environment in which the 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.

When the IPL equipment is in use, the safety of all persons in the controlled area is the responsibility of the LPS.

Laser safety warning signs are displayed when the IPL equipment is in use and removed when not in use, as described within the local rules.

Protective eyewear is available for the client and operator as outlined in the local rules.

The door to the treatment room is locked when the IPL equipment is in use but can be opened from the outside in the event of an emergency.

The IPL equipment is operated using a key. Arrangements are in place for the safe custody of the IPL key when not in use.

Is Care Effective?

The establishment has an IPL register which is completed every time the equipment is operated and includes:

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

Five client care records were reviewed. There is an accurate and up to date treatment record for every client which includes:

- client details;
- medical history;
- signed consent form;
- skin assessment (where appropriate);
- patch test (where appropriate); and
- record of treatment delivered including number of shots and fluence settings

There are arrangements in place to service and maintain the IPL equipment in line with the manufacturer's guidance. The most recent service report of 26 January 2015 was reviewed as part of the inspection process.

A laser safety file is in place which contains all of the relevant information in relation to laser or intense light equipment.

Is Care Compassionate?

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 establishment has a list of fees available for each 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.

Number of Requirements:	0	Number of Recommendations:	0
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5.7 Additional Areas Examined

5.7.1 Management of Incidents

The establishment has an incident policy and procedure in place which includes reporting arrangements to RQIA.

No adverse incidents have occurred within the establishment since registration with RQIA. However systems are in place to manage, document, fully investigate incidents and disseminate the outcomes.

5.7.2 RQIA registration and Insurance Arrangements

Discussion with Ms Boyd regarding the insurance arrangements within the establishment confirmed that current insurance policies were in place. The certificate of registration was displayed in the laser room of the premises.

Areas for Improvement

No areas for improvement were identified during the inspection.

Number of Requirements	0	Number Recommendations:	0
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No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	<i>Carolee Byrd</i>	Date Completed	<i>30th Oct 15</i>
Registered Person	<i>Carolee Byrd</i>	Date Approved	<i>30th Oct 15</i>
RQIA Inspector Assessing Response	<i>W. May</i>	Date Approved	<i>31/11/15</i>

Please provide any additional comments or observations you may wish to make below:

**Please ensure this document is completed in full and returned to RQIA's Office **

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.