

Announced Care Inspection Report 27 March 2018



The Cottage Health and Beauty Spa

**Type of Service: Independent Hospital (IH) - Cosmetic Intense Pulse
Light (IPL) Service**

Address: 7 Old Moy Road, Dungannon, BT71 6PS

Tel No: 028 8775 3378

Inspector: Winifred Maguire

www.rgia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is an Independent Hospital (IH) registered to provide a range of cosmetic IPL services.

IPL Equipment

Manufacturer: Energist
 Model: Energist Ultra Plus VPL System
 Serial Number: P02087

Laser Protection Advisor (LPA)

No LPA appointed at time of inspection

Laser Protection Supervisor (LPS)

Mrs Alison Blair

Medical Support Services

No medical support services appointed at time of inspection

Authorised operator

Mrs Alison Blair

Types of Treatment Provided:

- Hair removal
- Skin rejuvenation
- Vascular blemishes
- Fine thread veins

3.0 Service details

Organisation/Registered Provider: Mrs Alison Blair	Registered Manager: Mrs Alison Blair
Person in charge at the time of inspection: Mrs Alison Blair	Date manager registered: 09 February 2009
Categories of care: Independent Hospital (IH) PT(IL) Prescribed techniques or prescribed technology: establishments using intense light sources	

4.0 Inspection summary

An announced inspection took place on 27 March 2018 from 10.00 to 13.45.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, 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 (DHSSPS) Minimum Care Standards for Independent Healthcare Establishments (July 2014).

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the establishment was delivering safe, effective and compassionate care and if the service was well led.

During the previous announced inspection on 24 January 2017, it was noted that there had been a change of ownership of the IPL service and RQIA had not been notified. An area of improvement was identified against the legislation in relation to submitting an application for registration for the new entity. RQIA has not yet received a full and complete application from the new entity, Cottage Dungannon Ltd. Mr John O' Kane is the purposed responsible individual for Cottage Dungannon Ltd. RQIA have had ongoing formal contact from Mr O'Kane in the form of written correspondence and meetings in relation to the RQIA registration

application. Mrs Alison Blair has remained as the registered person and registered manager on the basis that a safe and effective IPL service was being provided.

During this inspection four areas of improvement were identified against the regulations, three in relation to IPL safety, one of which was stated for the third time; and the other area of improvement was in relation to the registration of the new entity, which has been stated for a second time. Two areas of improvement were identified against the standards in relation to updating the adult safeguarding policy, which has been stated for a second time; and undertaking adult safeguarding training. The areas of improvement were fully discussed with Mrs Blair, who acknowledged that whilst she has the legislative responsibility for the provision of the IPL service, she was not in the position to fulfil this responsibility, as the IPL service was under new ownership. Mrs Blair was strongly advised that given the areas of improvement highlighted and the lack of significant progress on the new owner’s registration application, she should consider the voluntary cancellation of registration of the IPL service.

Mr O’Kane was in attendance for the latter part of the inspection and he was fully briefed with regards to the areas of improvement and the lack of progress in respect of the registration application. He was also informed that Mrs Blair had been strongly advised to enter into the voluntary cancellation of the registration of the IPL service. Mr O’Kane gave assurances that he had submitted part of the registration application to RQIA. It was agreed that the partial application would be followed up, however it was not that a full and complete application and therefore, the registration of Cottage Dungannon Ltd with Mr O’Kane as responsible individual was some way off.

The day after the inspection on 28 March 2018, Mrs Blair confirmed via email to RQIA that it was her intention to enter into the voluntary cancellation of registration of the IPL service. She was informed she must cease and desist from providing any further IPL treatments. Mrs Blair submitted a voluntary cancellation of registration form to the RQIA registration team confirming the date of cancellation as 20 April 2018.

RQIA sought the opinions of clients as part of the inspection process and clients who submitted questionnaire responses indicated a high level of satisfaction with the services provided by The Cottage Health and Beauty Spa. Comments provided included:

- “I am happy with all my treatment and care received.”
- “Fab care and treatment.”
- “Great care and treatment.”

The findings of this report should be shared with Mr O’Kane, the registered person applicant, to assist him to fulfil his responsibilities, enhance practice and clients experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	4	2

Details of the Quality Improvement Plan (QIP) were discussed with Mrs Alison Blair, registered person, and Mr John O’Kane, registered person applicant as part of the inspection process. The timescales for completion commence from the date of inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 24 January 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 24 January 2017.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- notifiable events since the previous care inspection
- the registration status of the establishment
- written and verbal communication received since the previous care inspection
- the returned QIP from the previous care inspection
- the previous care inspection report
- submitted complaints declaration

Questionnaires were provided to clients prior to the inspection by the establishment on behalf of RQIA. Returned completed clients questionnaires were analysed prior to and during the inspection.

Mrs Blair is the sole authorised operator and therefore staff questionnaires were not applicable.

A poster informing clients that an inspection was being conducted was displayed.

During the inspection the inspector met with Mrs Alison Blair, registered person and Mr John O’Kane registered person applicant.

The following records were examined during the inspection:

- staffing
- recruitment and selection
- safeguarding
- laser safety
- management of medical emergencies
- infection prevention and control
- information provision
- care pathway
- management and governance arrangements
- maintenance arrangements

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

The findings of the inspection were provided to Mrs Blair and Mr O’Kane at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 24 January 2017

The most recent inspection of the establishment was an announced care inspection. The completed QIP was returned and approved by the care inspector.

6.2 Review of areas for improvement from the last care inspection dated 24 January 2017

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Independent Health Care Regulations (Northern Ireland) 2005	Validation of compliance	
<p>Area of improvement 1</p> <p>Ref: Regulation 18 (2) (a)</p> <p>Stated: Second time</p>	<p>The registered person must ensure that the following authorised user training is updated:</p> <ul style="list-style-type: none"> • core of knowledge • safe use and application of the IPL equipment • basic life support 	Partially met
	<p>Action taken as confirmed during the inspection:</p> <p>A review of training records evidenced that the authorised operator had undertaken the following training :-</p> <ul style="list-style-type: none"> • core of knowledge in July 2017 • basic life support on 20 May 2017 <p>Mrs Blair confirmed she had not yet undertaken an update on safe use and application of the IPL. It was confirmed Mrs Blair was in discussions with the new owner on this matter with a view to undertaking update training as soon as possible.</p> <p>This component of the area of improvement is stated for a third time and must be undertaken prior to the registration of IPL service.</p>	

<p>Area of improvement 2</p> <p>Ref: Article 13 The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003</p> <p>Stated: First time</p>	<p>The registered provider must ensure that application for registration under the new entity is submitted to RQIA along with the associated fees.</p> <p>As the new ownership is a limited company, an application and the associated fee for registered manager must also be submitted.</p> <hr/> <p>Action taken as confirmed during the inspection: RQIA has not yet received a full and complete application for registration.</p> <p>A partial application has been submitted and the RQIA registration team is following up this matter with the applicant.</p> <p>This area of improvement is stated for a second time</p>	<p>Partially met</p>
<p>Action required to ensure compliance with The Minimum Care Standards for Independent Healthcare Establishments (July 2014)</p>		<p>Validation of compliance</p>
<p>Area of improvement 1</p> <p>Ref: Standard 13.1</p> <p>Stated: First time</p>	<p>Authorised user training should be undertaken in respect of fire safety and infection prevention and control.</p> <hr/> <p>Action taken as confirmed during the inspection: A review of training records evidenced that the authorised operator had undertaken the following training:-</p> <ul style="list-style-type: none"> • Fire safety on 25 March 2018 • Infection prevention and control on 26 March 2018 	<p>Met</p>

<p>Area of improvement 2</p> <p>Ref: Standard 3.1</p> <p>Stated: First time</p>	<p>Update the establishment's adult safeguarding policy in accordance with the regional guidance 'Adult Safeguarding Prevention and Protection in Partnership' (July 2015) and include onward referral details should an adult safeguarding issue arise; the updated policy should be signed as read and understood by the authorised users.</p>	<p>Not met</p>
<p>Action taken as confirmed during the inspection:</p> <p>The adult safeguarding policy had not been updated in accordance with the regional guidance 'Adult Safeguarding Prevention and Protection in Partnership' (July 2015).</p> <p>This area of improvement is stated for a second time</p>		
<p>Area of improvement 3</p> <p>Ref: Standard 48.3</p> <p>Stated: First time</p>	<p>Medical treatment protocols dated 12 December 2015 should be signed by the medical support officer.</p>	<p>Not met</p>
<p>Action taken as confirmed during the inspection:</p> <p>Medical treatment protocols had exceeded their review date and Mrs Blair confirmed that the medical practitioner who had devised the medical treatment protocols was no longer under contract with the establishment to provide medical support services. Mrs Blair confirmed, it was her understanding that Mr O'Kane was in the process of appointing a medical support service. However it was confirmed that at the time of inspection there was no medical support service in place</p> <p>In light of the absence of a medical support service and out of date medical treatment protocols, an area of improvement has now been identified under the regulations on this matter. This is further outlined in section 6.4 of this report.</p>		

Area of improvement 4 Ref: Standard 48.5 Stated: First time	The local rules should be reviewed and arrangements established to ensure they are reviewed in the future in line with the review date as identified by the LPA.	Not met
	<p> Action taken as confirmed during the inspection: The local rules in place had exceeded their review date of April 2016 and Mrs Blair confirmed that the LPA who had devised the local rules was no longer under contract with the establishment to provide laser protection services. Mrs Blair confirmed it was her understanding that Mr O’Kane was in the process of appointing a LPA. However it was confirmed that at the time of inspection there was no LPA in place. </p> <p> In light of the absence of a LPA and out of date local rules, an area of improvement has now been identified under the regulations on this matter. This is further outlined in section 6.4 of this report. </p>	

6.3 Inspection findings

6.4 Is care safe?

Avoiding and preventing harm to patients and clients from the care, treatment and support that is intended to help them.

Staffing

Mrs Blair confirmed that she is carrying out IPL treatments as the authorised operator. The register of authorised operators for the IPL reflects that Mrs Blair is the only authorised operator.

It was confirmed that if any new authorised operators were recruited they would be provided with induction training.

A review of training records evidenced that the authorised operator had up to date training in core of knowledge , basic life support, infection prevention and control and fire safety.

However, Mrs Blair confirmed she had not yet undertaken an update on safe use and application of the IPL. It was confirmed Mrs Blair was in discussion with the new owners on this matter with a view to undertaking update training as soon as possible. This had been identified as part of an area of improvement against the regulations during the previous inspection for a second time and is now stated for a third time. It was strongly advised that this matter must be addressed prior to the registration of the IPL service.

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

Recruitment and selection

There have been no authorised operators recruited since the previous inspection. During discussion Mrs Blair confirmed that should staff be recruited in the future robust systems and processes will be developed to ensure that all recruitment documentation as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 would be sought and retained for inspection.

Safeguarding

Mrs Blair had some awareness of the types and indicators of abuse

Mrs Blair has not undertaken adult safeguarding training and an area of improvement has been made against the standards on this matter. Advice was given to Mrs Blair on the level of training required.

The adult safeguarding policy had not been updated in accordance with the regional guidance 'Adult Safeguarding Prevention and Protection in Partnership' (July 2015). This area of improvement against the standards is stated for a second time

IPL safety

An IPL safety file was in place.

It was noted that the local rules had exceeded their review date of April 2016 and Mrs Blair confirmed that the LPA who had devised the rules was no longer under contract with the establishment to provide laser protection services. Mrs Blair confirmed it was her understanding that Mr O'Kane was in the process of appointing Lasermet as the LPA. However it was confirmed that at the time of inspection there was no LPA in place.

The review of the local rules had been identified as an area of improvement against the standards during the previous inspection. In light of the absence of a LPA and out of date local rules, an area of improvement has now been identified against the regulations on this matter.

Medical treatment protocols had exceeded their review date and Mrs Blair confirmed that the medical practitioner who had devised the medical treatment protocols was no longer under contract with the establishment to provide medical support services. Mrs Blair confirmed it was her understanding that Mr O'Kane was in the process of appointing a medical support service to be provided by Lasermet. However, it was confirmed that at the time of inspection there was no medical support service in place.

In light of the absence of a medical support service and out of date medical treatment protocols, an area of improvement has now been identified against the regulations on this matter.

As stated previously the areas of improvement were fully discussed with Mrs Blair, who acknowledged that whilst she has the legislative responsibility for the provision of the IPL service, she was not in the position to fulfil this responsibility, as the IPL service was under new ownership. It was emphasised that without the key IPL safety measures in place such as an

appointed LPA , a medical support service , up to date local rules and medical treatment protocols, the IPL service was not complaint with the legislation and the standards.

Mrs Blair was strongly advised that given the areas of improvement highlighted and the lack of significant progress on the new owner's registration application, she should consider voluntary cancellation of registration of the IPL service. As stated following the inspection Mrs Blair has informed RQIA of her intention to enter into the voluntary cancellation of registration process and confirmed a cancellation date of 20 April 2018.

Following the inspection Mrs Blair also informed RQIA that Mr O'Kane was making arrangements for a LPA visit in the coming weeks.

Mrs Blair acted as the laser protection supervisor (LPS) and had overall responsibility for safety during IPL treatments and ensured a list of authorised operators was maintained.

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

The environment in which the IPL equipment was used was found to be controlled to protect other persons while treatment is in progress. The door to the treatment room was locked when the IPL equipment was in use but can be opened from the outside in the event of an emergency.

The IPL equipment was operated using a key. Arrangements were in place for the safe custody of the IPL key when not in use. Protective eyewear was available for the client and operator as outlined in the local rules which as stated required to be updated.

The controlled area was clearly defined and not used for other purposes, or as access to areas, when treatment is being carried out. Laser safety warning signs were displayed when the laser equipment is in use and removed when not in use.

The establishment had an IPL register which was completed every time the equipment was operated and included:

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

The most recent service report for the IPL equipment had an expiry date of September 2017. Mrs Blair confirmed that as the IPL equipment is now owned by Mr O'Kane, she was not in the position to arrange for the servicing of the IPL equipment. However, it was her understanding that Mr O'Kane was making arrangements to have the IPL equipment serviced and maintained in line with manufacturer's instructions. During the inspection Mr O' Kane also gave assurances that the IPL equipment would be serviced and maintained in line with manufacturer's instructions. An area of improvement was identified against the legislation on this matter, however on 13 April 2018 a service report and calibration certificate dated 5 April 2018 relating to the IPL equipment was submitted to RQIA. This area of improvement has therefore been met.

Management of emergencies

As discussed, the authorised operator has up to date training in basic life support. Discussion with Mrs Blair confirmed she was aware what action to take in the event of a medical emergency.

There was a resuscitation policy in place.

Infection prevention and control and decontamination procedures

The treatment room was clean and clutter free. Discussion with Mrs Blair 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, the authorised operator has up to date training in infection prevention and control.

Environment

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 was available which had been serviced within the last year.

Client and staff views

Thirteen clients submitted questionnaire responses. All indicated that they felt safe and protected from harm and were very satisfied with this aspect of care.

As stated previously Mrs Blair is the only authorised operator and therefore staff questionnaires were not applicable to this service.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to management of emergencies, infection prevention and control and the environment.

Areas for improvement

The authorised operator must undertake update training for the safe use and application of the IPL equipment

The authorised operator must undertake adult safeguarding training commensurate with her role.

Update the establishment's adult safeguarding policy in accordance with the regional guidance 'Adult Safeguarding Prevention and Protection in Partnership' (July 2015) and include onward referral details should an adult safeguarding issue arise; the updated policy should be signed as read and understood by the authorised operator.

A LPA must be appointed and a LPA site visit should be conducted to review the IPL safety arrangements and update the IPL safety documentation including the local rules.

A medical support service must be appointed and medical treatment protocols should be devised for each IPL treatment provided.

	Regulations	Standards
Total number of areas for improvement	3	2

6.5 Is care effective?

The right care, at the right time in the right place with the best outcome.

Care pathway

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.

During the initial consultation, 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.

Four client care records were reviewed. There was 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)
- record of treatment delivered including number of shots and fluence settings (where appropriate)

Observations made evidenced that client records were securely stored. A policy and procedure is available which includes the creation, storage, recording, retention and disposal of records and data protection.

The establishment is registered with the Information Commissioners Office (ICO). An electronic copy of ICO certificate was submitted to RQIA following the inspection.

Communication

As discussed, there is written information for clients that provides a clear explanation of any treatment and includes effects, side-effects, risks, complications and expected outcomes. Information is jargon free, accurate, accessible, up-to-date and includes the cost of the treatment.

The establishment has a policy for advertising and marketing which is in line with legislation.

Client views

All clients who submitted questionnaire responses indicated that they get the right care, at the right time and with the best outcome for them and were very satisfied with this aspect of care.

Areas of good practice

There were examples of good practice found in relation to the management of clinical records, and ensuring effective communication between clients and staff.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is care compassionate?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

Dignity respect and involvement with decision making

Discussion with Mrs Blair regarding the consultation and treatment process, confirmed that clients are treated with dignity and respect. The consultation and treatment is 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 electronic client care records were stored securely and are password protected.

Client satisfaction surveys are carried out by the establishment on an annual basis and the results of these are collated to provide a summary report which is made available to clients and other interested parties. An action plan is developed to inform and improve services provided, if appropriate.

Review of the completed questionnaires found that clients were highly satisfied with the quality of treatment, information and care received.

Client views

All clients who submitted questionnaire responses indicated that they are treated with dignity and respect and are involved in decision making affecting their care and were very satisfied with this aspect of care.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to 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.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.7 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

Management and governance

During the previous inspection in January 2017, Mrs Blair advised that she had sold the business on 1 October 2016; this was not notified to RQIA. As this represented a new entity, it was confirmed a new application for registration must be submitted to RQIA. In addition, an application for registered manager must also be submitted as the new ownership is a limited company. During the inspection in January 2017, Mr O’Kane was advised in detail of the registration process. The application forms for registration with RQIA were emailed to Mr O’Kane on the same day. An area of improvement was identified against Article 13 The Health and Personal Social Services, (Quality, Improvement and Regulation), (Northern Ireland) Order 2003, as a result of the inspection in January 2017.

As stated previously, RQIA has not yet received a full and complete application from the new entity, Cottage Dungannon Ltd with Mr John O’ Kane as the purposed responsible individual. RQIA have had ongoing formal contact from Mr O’Kane in the form of written correspondence and meetings in relation to the RQIA registration application. Ms Alison Blair has remained as the registered person and registered manager on the basis that a safe and effective IPL service was being provided.

However, during this inspection significant areas of improvement were identified against the regulations and standards in relation to the safe provision of the IPL service and safeguarding. The areas of improvement were fully discussed with Mrs Blair, who acknowledged that whilst she has the legislative responsibility for the provision of the IPL service, she was not in the position to fulfil this responsibility, as the IPL service was under new ownership. Mrs Blair was strongly advised that given the areas of improvement highlighted and the lack of significant progress on the new owner’s registration application, she should consider the voluntary cancellation of registration of the IPL service.

Mr O’Kane was in attendance for the latter part of the inspection and he was fully briefed with regards to the areas of improvement and the lack of progress on the registration application. He was also informed that Mrs Blair had been strongly advised to enter into voluntary cancellation of the registration of the IPL service. Mr O’Kane gave assurances that he had submitted part of the registration application to RQIA. It was agreed that the application would

be followed up however it was not a full and complete application and therefore, the registration of Cottage Dungannon Ltd with Mr O’Kane as responsible individual was some way off.

The day after the inspection on 28 March 2018, Mrs Blair confirmed via email to RQIA that it was her intention to enter into the voluntary cancellation of registration of the IPL service. She was informed she must cease and desist from providing any further IPL treatments. Mrs Blair submitted a voluntary cancellation of registration form to the RQIA registration team confirming the date of cancellation as 20 April 2018. At the time of reporting RQIA were awaiting a signed hard copy of the voluntary cancellation of registration form from Mrs Blair. This is being followed up by the RQIA registration team.

The area of improvement identified against the legislation as outlined previously in relation to submitting a full and complete registration application is stated for a second time.

Mr O’Kane has since been in contact with RQIA in relation to the process of registration and the submission of the registration application. RQIA continues to support Mr O’Kane in completing the registration process.

Mrs Blair was the only authorised operator in this establishment. Policies and procedures were available outlining the arrangements associated with IPL treatments. Observations made confirmed that policies and procedures were indexed, dated and systematically. Mrs Blair confirmed they will be reviewed as part of the registration process.

A copy of the complaints procedure was available in the establishment. Discussion with Mrs Blair demonstrated good awareness of complaints management. A complaints questionnaire was forwarded by RQIA to the establishment for completion. The returned questionnaire indicated that no complaints have been received for the period 1 April 2016 to 31 March 2017.

Discussion with Mrs Blair confirmed that a system was in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies as appropriate. A system was in place to ensure that urgent communications, safety alerts and notices are reviewed and where appropriate, made available to key staff in a timely manner.

A whistleblowing/raising concerns policy was available.

It was confirmed that the statement of purpose and client’s guide will be reviewed as part of the registration process.

The RQIA certificate of registration was up to date and displayed appropriately.

Insurance documentation submitted to RQIA following the inspection confirmed that current insurance policies were in place.

All areas of improvement identified during this inspection must be fully addressed prior to registration being granted.

Client views

All clients who submitted questionnaire responses indicated that they felt that the service is well managed and were very satisfied with this aspect of the service.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to maintaining good working relationships.

Areas for improvement

A full and complete application for registration under the new entity must be submitted to RQIA along with the associated fees and an application and the associated fee for registered manager must also be submitted.

	Regulations	Standards
Total number of areas for improvement	1	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mrs Alison Blair, registered person and Mr John O’Kane, registered person applicant as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider applicant to ensure that all areas for improvement identified within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the IPL service. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Independent Health Care Regulations (Northern Ireland) 2005 and 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 (DHSSPS) Minimum Care Standards for Healthcare Establishments (July 2014).

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan

Action required to ensure compliance with The Independent Health Care Regulations

(Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 18(2)(a) Stated: Third time To be completed by: 27 May 2018	<p>The registered person applicant shall ensure that the authorised operator undertakes update training for the safe use and application of the IPL equipment</p> <p>Ref: 6.2 and 6.4</p> <p>Response by registered person detailing the actions taken:</p>
Area for improvement 2 Ref: Regulation 25 (1) (d) Stated: First time To be completed by: 27 May 2018	<p>The registered person applicant shall ensure that a LPA is appointed and a LPA site visit is conducted to review the IPL safety arrangements and update the IPL safety documentation including the local rules.</p> <p>Ref: 6.4</p> <p>Response by registered person detailing the actions taken:</p>

<p>Area for improvement 3</p> <p>Ref: Regulation 39 (1)</p> <p>Stated: First time</p> <p>To be completed by: 27 May 2018</p>	<p>The registered person applicant shall ensure that a medical support service is appointed and that medical treatment protocols are devised for each IPL treatment provided.</p> <p>Ref: 6.4</p> <p>Response by registered person detailing the actions taken:</p>
<p>Area for improvement 4</p> <p>Ref: Article 13 The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003</p> <p>Stated: Second time</p> <p>To be completed by: 27 May 2018</p>	<p>The registered person applicant shall ensure that a full and complete application for registration under the new entity is submitted to RQIA along with the associated fees.</p> <p>As the new ownership is a limited company, an application and the associated fee for registered manager must also be submitted.</p> <p>Ref: 6.2 and 6.7</p> <p>Response by registered person detailing the actions taken:</p>
<p>Action required to ensure compliance with The Minimum Care Standards for Healthcare Establishments (July 2014)</p>	
<p>Area for improvement 1</p> <p>Ref: Standard 3.9</p> <p>Stated: First time</p> <p>To be completed by: 27 June 2018</p>	<p>The registered person applicant shall ensure that the authorised operator undertakes adult safeguarding training commensurate with her role.</p> <p>Ref: 6.4</p> <p>Response by registered person detailing the actions taken:</p>
<p>Area for improvement 2</p> <p>Ref: Standard 3.1</p> <p>Stated: Second time</p> <p>To be completed by: 27 May 2018</p>	<p>The registered person applicant shall ensure that the establishment's adult safeguarding policy is updated in accordance with the regional guidance 'Adult Safeguarding Prevention and Protection in Partnership' (July 2015) and includes onward referral details should an adult safeguarding issue arise; the updated policy should be signed as read and understood by the authorised operators.</p> <p>Ref: 6.4</p> <p>Response by registered person detailing the actions taken:</p>

Please ensure this document is completed in full and returned via Web Portal



A completed Quality Improvement Plan from the inspection of this service has not yet been returned.

If you have any further enquiries regarding this report please contact RQIA through the e-mail address info@rqia.org.uk



The Regulation and
Quality Improvement
Authority

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