

# Inspection Report

29 March 2023



## Laser Solutions Skin Clinic

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

Address: 343 Ormeau Road, Belfast BT7 3GL

Telephone number: 028 9049 1009

[www.rqia.org.uk](http://www.rqia.org.uk)

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Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>, [The Independent Health Care Regulations \(Northern Ireland\) 2005](#) and the [Minimum Care Standards for Independent Healthcare Establishments \(July 2014\)](#)

## 1.0 Service information

<b>Organisation/Registered Provider:</b> Ms Michelle Deighan	<b>Registered Manager:</b> Ms Michelle Deighan  <b>Date registered:</b> 21 September 2009
<b>Person in charge at the time of inspection:</b> Ms Michelle Deighan	
<b>Categories of care:</b> Prescribed techniques or prescribed technology: establishments using intense light source PT (IL) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers PT(L)	
<b>Brief description of how the service operates:</b> Laser Solutions Skin Clinic is registered with the Regulation and Quality Improvement Authority (RQIA) as an Independent Hospital (IH) with the following 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).  Laser Solutions Skin Clinic also provides a range of cosmetic/aesthetic treatments. This inspection focused solely on those treatments using a Class 4 laser and an intense pulse light (IPL) machine that fall within regulated activity and the categories of care for which the establishment is registered with RQIA.  <b>Equipment available in the service:</b>  <b>Laser equipment:</b> Manufacturer: Alma Model: Soprano Ice Serial Number: SI2ICE Laser Class: Class 4 Wavelength: 810nm  <b>IPL equipment:</b> Manufacturer: Ellipse Model: Light SPT Intense Pulsed Light System Serial Number: 05030347	

**Types of laser treatments provided:** Hair removal

**Types of IPL treatments provided:** Hair removal, skin rejuvenation, facial thread veins, skin pigmentation and acne treatment.

## 2.0 Inspection summary

This was an announced care inspection undertaken by two care inspectors on 29 March 2023 from 10:00 am to 1.00 pm.

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 staff recruitment; safeguarding; management of medical emergencies; infection prevention and control (IPC); adherence to best practice guidance in relation to COVID-19 and effective communication between clients and staff.

Additional areas of good practice identified included maintaining client confidentiality, ensuring the core values of privacy and dignity were upheld and providing the relevant information to allow clients to make informed choices.

Three areas for improvement were identified against the regulations; to ensure the laser and IPL registers are completed each time the laser and IPL equipment are operated; to ensure that client care records are completed contemporaneously and are available for inspection and to ensure each client's general practitioner contact details are recorded within the client's record.

Two areas for improvement were also identified against the standards; one to verify that the authorised operator has completed skin pigmentation application training and the other to ensure that client treatment records are maintained in line with best practice guidance at all times.

## 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**

Posters were issued to Laser Solutions Skin Clinic 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 Laser Solutions Skin Clinic was undertaken on 25 March 2022; no areas for improvement were identified.

#### **5.2 Inspection outcome**

##### **5.2.1 How does the service ensure that staffing levels are safe to meet the needs of clients?**

Ms Deighan told us that laser and IPL treatments are carried out by her as the authorised operator. A register of authorised operators for the laser and IPL equipment was in place and was up to date.

A review of training records evidenced that Ms Deighan had completed core of knowledge and basic life support training. There were no records to evidence that Ms Deighan had completed refresher training in safeguarding adults at risk of harm; infection prevention and control (IPC) or fire safety in line with the RQIA training guidance. This was discussed with Ms Deighan who stated she would provide these training certificates following the inspection. On 2 May 2023 RQIA received copies of Ms Deighan's training certificates which evidenced that she had completed; IPC, fire safety awareness training and formal level 2 training in safeguarding adults at risk of harm.

Training certificates were also in place to verify that Ms Deighan had completed application training for hair reduction using the Almo Soprano equipment and for hair removal, skin rejuvenation/acne, and facial thread veins using the Ellipse SPT machine. It was noted that the application training records did not include skin pigmentation treatments. This was discussed with Ms Deighan who informed us that skin rejuvenation/acne training also included the treatment of pigmented skin conditions.

Advice was provided to Ms Deighan and an area for improvement has been made against the standards to provide verification that the authorised operator has undertaken application training in the provision of skin pigmentation using the Ellipse SPT machine.

It was determined that appropriate staffing levels were in place to meet the needs of clients. Addressing the area for improvement will ensure that the authorised operator's training complies with current legislative requirements and professional guidelines.

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

There were robust recruitment and selection policies and procedures that adhered to legislation and best practice guidance should authorised operators be recruited in the future. This would ensure that all required recruitment documentation would be sought and retained for inspection. There was evidence of job descriptions and induction checklists for authorised operators.

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

It was determined that arrangements were in place to ensure the recruitment of authorised operators would comply with 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?**

Ms Deighan 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 Ms Deighan 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.

As discussed it was confirmed following the inspection that Ms Deighan, as the safeguarding lead, has completed formal training in safeguarding adults in keeping with the Northern Ireland Adult Safeguarding Partnership (NIASP) training strategy (revised 2016) and minimum standards.

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.

The service had appropriate arrangements in place to manage a safeguarding issue should it arise.

#### **5.2.4 How does the service ensure that medical emergency procedures are safe?**

Ms Deighan had up to date training in basic life support and was aware of what action to take in the event of a medical emergency. There was a resuscitation policy in place and a review of this evidenced that it was comprehensive, reflected legislation and best practice guidance.

The service had appropriate arrangements in place to manage a medical emergency.

#### **5.2.5 How does the service ensure that it adheres to infection prevention and control and decontamination procedures?**

The IPC arrangements were reviewed throughout the establishment to evidence that the risk of infection transmission to clients, visitors and staff was minimised.

There was an overarching IPC policy and associated procedures in place. A review of these documents demonstrated that they were comprehensive and reflected legislation and best practice guidance in all areas.

The laser/IPL treatment room was clean and clutter free. Discussion with Ms Deighan 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, it was confirmed following the inspection that Ms Deighan had completed refresher training in IPC.

The service had appropriate arrangements in place in relation to IPC and decontamination.

#### **5.2.6 Are arrangements in place to minimise the risk of COVID-19 transmission?**

COVID-19 has been declared as a public health emergency and we all need to assess and manage the risks of COVID-19, and in particular, businesses need to consider the risks to their clients and staff.

The management of operations in response to the COVID-19 pandemic were discussed with Ms Deighan who outlined the measures taken by Laser Solutions Skin Clinic to ensure current best practice measures are in place. Appropriate arrangements are in place in relation to maintaining social distancing; implementation of enhanced IPC procedures; and the client pathway to include COVID-19 screening prior to attending appointments.

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

#### **5.2.7 How does the service ensure the environment is safe?**

The service has one treatment room and access to storage rooms. The premises were maintained to a good standard of maintenance and décor. Cleaning schedules for the establishment were in place.

Observations made evidenced that a carbon dioxide (CO<sub>2</sub>) fire extinguisher is available which has been serviced within the last year.

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

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

A laser safety file was in place which contained the relevant information in relation to laser and IPL equipment. There was written confirmation of the appointment and duties of a certified LPA which is reviewed on an annual basis. The service level agreement between the establishment and the LPA was reviewed and this expires on 5 March September 2024.

Local rules were in place which had been developed by the LPA. The local rules had been updated and contained the relevant information about the laser and IPL equipment being used.

The establishment's LPA completed a remote risk assessment of the premises on 21 March 2023 which is to be followed up with an onsite visit within three months of that date. It was confirmed that all recommendations made in the risk assessment had been addressed.

Ms Deighan told us that laser and IPL procedures are carried out following medical treatment protocols produced by a named registered medical practitioner. The medical treatment protocols contained the relevant information about the laser and IPL equipment in place and the treatments being provided. It was noted that systems are in place to review the medical treatment protocols when due to expire.

Ms Deighan, as the laser protection supervisor (LPS) and sole authorised operator, has overall responsibility for safety during laser and IPL treatments and an authorised operator list is maintained. Ms Deighan as an authorised operator, had signed to state that she had read and understood the local rules and medical treatment protocols.

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

The environment in which the laser and IPL equipment is used was found to be safe and controlled to protect other persons while treatment is in progress.

The 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 or IPL equipment is in use but can be opened from the outside in the event of an emergency.

The laser machine is operated using a key and the IPL machine is operated using a passcode.

Arrangements are in place for the safe custody of the key and the passcode when the laser and IPL equipment is not in use.

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

Ms Deighan was aware that the laser safety warning signs should only be displayed when the laser or IPL equipment is in use and removed when not in use.



In accordance with the Minimum Care Standards for Independent Healthcare Establishments (2014) a laser register should be in place and maintained every time the laser or IPL machine is operated. It was observed that there were two separate registers named 'skin' and 'hair'. Ms Deighan was advised to name each register in respect of the laser and IPL machines as both machines can be used for hair removal.

A review of both registers evidenced that the following information was recorded;

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

However, it was identified that entries were not being recorded contemporaneously or in chronological order. This was discussed with Ms Deighan and an area for improvement has been made against the regulations in this regard.

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

Addressing the area for improvement will strengthen the arrangements to ensure laser and IPL procedures are safe.

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

Clients are provided with an initial consultation to discuss their treatment and any concerns they may have. Written information is provided to the client pre and post treatment which outlines the treatment provided, any risks, complications and expected outcomes. The service has a list of fees available for each laser and IPL procedure.

Fees for treatments are agreed during the initial consultation and may vary depending on the type of treatment provided and the individual requirements of the client.

During the initial consultation, clients are asked to complete a health questionnaire. However, it was identified that there are no arrangements in place to contact the client's general practitioner (GP), with their consent, for further information if necessary. This area was discussed with Ms Deighan and an area for improvement has been made in this regard against the regulations.

A random sample of three client care records was requested for review however these records were not available as Ms Deighan stated that she had taken these home to update them. Ms Deighan was advised that client's records should be available for inspection at all times. An area for improvement has been made against the regulations in this regard. Ms Deighan was also advised that client care records should be completed contemporaneously in accordance with good practice.



A review of three client's care records, provided by Ms Deighan, demonstrated that a treatment record was in place for each client and 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)

However it was identified that some client's records had not been signed by the client to confirm that their health status was up to date. It was also noted that the consent form completed for laser hair removal referred to the IPL equipment. These areas were discussed with Ms Deighan and an area for improvement has been made against the standards in this regard.

A policy and procedure was available which included the creation, storage, recording, retention and disposal of records and data protection. As previously discussed Ms Deighan was provided with advice regarding the arrangements for storing and maintaining client records.

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

Addressing the identified areas for improvement will strengthen the arrangements to ensure that each client's treatment is recorded in keeping with best practice and that they have been provided with sufficient information to consent to treatment.

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

Discussion with Ms Deighan 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. Ms Deighan demonstrated that appropriate measures are in place to maintain client confidentiality.

Ms Deighan told us that she encourages clients to complete a satisfaction survey when their treatment is complete. A number of completed client questionnaires were available for review and demonstrated that these clients were highly satisfied with the care and treatment they had received in the clinic. Ms Deighan confirmed that the questionnaire findings will be collated to provide a summary report which will be made available to clients and other interested parties.

It was confirmed that an action plan would be developed to inform and improve services provided, if appropriate. On 3 April 2023 RQIA received a copy of the summative report of the client questionnaires findings which demonstrated a very positive outcome and an action plan was not required.

It was determined that appropriate arrangements were in place to ensure that clients are treated with dignity and respect and are involved in the decision making process.

#### **5.2.11 How does the registered provider assure themselves of the quality of the services provided?**

Where the entity operating the service is a corporate body or partnership or an individual owner who is not in day to day management of the service, Regulation 26 unannounced quality monitoring visits must be undertaken and documented every six months.

Ms Deighan is in day to day charge of the service, therefore Regulation 26 unannounced quality monitoring visits do not apply.

Policies and procedures were available outlining the arrangements associated with the laser and IPL treatments. Observations made confirmed that policies and procedures were indexed, dated and systematically reviewed on a three yearly basis or more frequently if required.

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

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

Ms Deighan demonstrated a clear understanding of her role and responsibility in accordance with legislation. Information requested by RQIA has been submitted within the specified timeframes.

The RQIA certificate of registration was displayed in a prominent place.

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

#### **5.2.12 Does the service have suitable arrangements in place to record equality data?**

The arrangements in place in relation to the equality of opportunity for clients and the importance of staff being aware of equality legislation and recognising and responding to the diverse needs of clients was discussed with Ms Deighan.

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

## 6.0 Quality Improvement Plan/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 Independent Health Care Regulations \(Northern Ireland\) 2005](#).

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	3	2

Areas for improvement and details of the QIP were discussed with Ms Michele Deighan, Registered Person, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
<b>Action required to ensure compliance with <a href="#">The Independent Health Care Regulations (Northern Ireland) 2005</a></b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 21 (3) (a) Part II Schedule 3 (3)  <b>Stated:</b> First time  <b>To be completed by:</b> 29 March 2023	The registered person shall ensure that the laser and Intense Pulse Light (IPL) registers are maintained every time the laser and/or IPL are operated and are kept up to date.  Ref: 5.2.8  <b>Response by registered person detailing the actions taken:</b>  The laser and intense pulse light registers are now maintained daily in accordance with regulations.
<b>Area for improvement 2</b>  <b>Ref:</b> Regulation 21 (1) (a) (i) and (b)  <b>Stated:</b> First time  <b>To be completed by:</b> 29 March 2023	The registered person shall ensure that client care records are completed contemporaneously, retained and available for inspection.  Ref: 5.2.9  <b>Response by registered person detailing the actions taken:</b>  I am now completing client care records contemporaneously, retaining them and they are available.

<b>Area for improvement 3</b>  <b>Ref:</b> Regulation 21 (3) (a) Schedule II (1) (c)  <b>Stated:</b> First time  <b>To be completed by:</b> 29 March 2023	<p>The registered person shall ensure that client care records include the name and address of the client's general practitioner.</p> <p>Ref 5.2.9</p> <hr/> <p><b>Response by registered person detailing the actions taken:</b></p> <p>I'm currently waiting for my printing company to complete new client record cards to include name and address of their general practitioner.</p>
<b>Action required to ensure compliance with the <a href="#">Minimum Care Standards for Independent Healthcare Establishments (July 2014)</a></b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 48.12  <b>Stated:</b> First time  <b>To be completed by:</b> 29 April 2023	<p>The registered person shall provide verification that the authorised operator has undertaken application training in the provision of skin pigmentation using the Ellipse SPT machine.</p> <p>Ref: 5.2.1</p> <hr/> <p><b>Response by registered person detailing the actions taken:</b></p> <p>I am currently searching for training on skin pigmentation using Ellipse SPT machine and am awaiting a response from a company.</p>
<b>Area for improvement 2</b>  <b>Ref:</b> Standard 48.10  <b>Stated:</b> First time  <b>To be completed by:</b> 29 March 2023	<p>The registered person shall ensure that client treatment records are maintained in accordance with Standard 48.10 at all times.</p> <p>Ref: 5.2.9</p> <hr/> <p><b>Response by registered person detailing the actions taken:</b></p> <p>I will maintain client treatment records in accordance with standard 48.10 at all times.</p>

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



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