



The Regulation and  
Quality Improvement  
Authority

RQIA ID:11167  
Perfections Day Spa  
10 Society Street  
Coleraine  
BT52 1LA

Inspector: Jo Browne  
Inspection ID: IN021418

Tel: 028 7035 5306

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**Announced Care Inspection  
of  
Perfections Day Spa**

**2 June 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](http://www.rqia.org.uk)

## 1. Summary of Inspection

An announced care inspection took place on 2 June 2015 from 14.00 to 15.30. 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.

### 1.1 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.

### 1.2 Actions/Enforcement Resulting from this Inspection

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

### 1.3 Inspection Outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	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

<b>Registered Organisation/Registered Person:</b> Mrs Joanne Reid	<b>Registered Manager:</b> Mrs Joanne Reid
<b>Person in Charge of the Establishment at the Time of Inspection:</b> Mrs Joanne Reid	<b>Date Manager Registered:</b> 1 November 2013
<b>Categories of Care:</b> PT(IL) - Prescribed techniques or prescribed technology: establishments using intense light sources	

### IPL Equipment

Manufacturer: Ellipse  
 Model: Light SPT  
 Serial Number: 05020291  
 Class: IPL

**Laser Protection Advisor (LPA)** - Dr Anna Bass (Lasernet)

**Laser Protection Supervisor (LPS)** - Mrs Joanne Reid

**Medical Support Services** - Dr Paul Myers (Lasernet)

**Authorised User** - Mrs Joanne Reid

**Types of Treatment Provided** – Permanent hair reduction, treatment of broken facial capillaries, treatment of sun damaged skin, treatment of pigmentation areas (including brown pigment marks, freckles or age spots).

### 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 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 Mrs Joanne Reid as she is the only authorised user of the IPL equipment and one member of staff who assists in the management of the establishment.

The following records were examined during the inspection:

- |                                  |                               |
|----------------------------------|-------------------------------|
| • Six client care records        | • Incident/accident records   |
| • Laser safety file              | • Local rules                 |
| • Laser risk assessment          | • Medical treatment protocols |
| • Policies and procedures        | • Equipment service records   |
| • Client feedback questionnaires | • 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 20 May 2014. The completed QIP was returned and approved by the care inspector.

### 5.2 Review of Requirements and Recommendations from the Last Care Inspection Dated 20 May 2014.

Previous Inspection Statutory Requirement		Validation of Compliance
<b>Requirement 1</b>  <b>Ref:</b> Regulation 28 (1)	The registered person must ensure that the RQIA certificate of registration is displayed in a conspicuous place within the premises.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The RQIA certificate of registration was clearly displayed in the IPL treatment Room.	
Previous Inspection Recommendation		Validation of Compliance
<b>Recommendation 1</b>  <b>Ref:</b> Standard C10.3	The registered manager should develop a policy and procedure to ensure that RQIA is notified if the registered manager is absent for more than 28 days. The policy should also include the interim management arrangements for the establishment.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The absence of the registered manager policy was reviewed during the inspection.	

### 5.3 Standard 4 – Dignity, Respect and Rights

#### Is Care Safe?

Discussion regarding the consultation and treatment process, with Mrs Reid 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 confirmed that client care records were stored securely in locked cupboard.

#### 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?**

Discussion with Mrs Reid and review of six client care records confirmed that clients are treated and cared for in accordance with legislative requirements for equality and rights.

Staff were observed treating clients with compassion, dignity and respect. No clients wished to meet with the inspector on the day of inspection.

### **Areas for Improvement**

No areas for improvement were identified during the inspection.

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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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?**

Perfections Day Spa 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 and eight were returned and completed. Review of the completed questionnaires 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 IPL treatment room.

It was confirmed through discussion that comments received from clients are reviewed by Mrs Reid and an action plan would be developed and implemented to address any issues if identified.

### **Is Care Compassionate?**

Review of care records and discussion with Mrs Reid and one member of staff 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.

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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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, Mrs Reid confirmed that complainants will be kept informed of any delays and the reason for this.

Discussion with Mrs Reid confirmed that information from complaints would be used to improve the quality of services.

#### Is Care Effective?

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.

Mrs Reid demonstrated a good understanding of complaints management.

Systems were in place to store complaint records securely in line with data protection legislation.

The complaints procedure is contained within the Client Guide; copies of which are available in the IPL treatment 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.

Mrs Reid confirmed that the complainant would 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.

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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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 expired on 21 May 2016.

Laser procedures are carried out by trained operators in accordance with medical treatment protocols produced by Dr Paul Myers which expired on 10 May 2015. Systems are in place to review the medical treatment protocols on an annual basis. The LPA visited the premises on 22 May 2015 and the updated documentation had not been received by the establishment at the time of inspection. The LPA site visit report was reviewed and no issues were identified.

The medical treatment protocols 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 developed by their LPA which expire on 21 May 2016.

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 she has 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 20 May 2013 which is due to be reviewed on 21 May 2016. All recommendations made by the LPA had been fully addressed.

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 has 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 laser 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 keypad entry system. Arrangements are in place for the safe custody of the IPL keypad codes 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



Six 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;
- Patch test; and
- Record of treatment delivered including number of shots.

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 25 November 2014 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 the IPL 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.

## **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 Mrs Reid regarding the insurance arrangements within the establishment confirmed that current insurance policies were in place. The certificates of registration and insurance were clearly displayed in the premises.

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

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

<b>Registered Manager</b>	Joanne Reid	<b>Date Completed</b>	12/8/15
<b>Registered Person</b>	Joanne Reid	<b>Date Approved</b>	12/8/15
<b>RQIA Inspector Assessing Response</b>	Jo Browne	<b>Date Approved</b>	26/08/15

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

*\*Please complete in full and returned to [independent.healthcare@rqia.org.uk](mailto:independent.healthcare@rqia.org.uk) from the authorised email address\**

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 establishment. 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.