

Inspection Report

20 July 2021



Laserway Laser Clinic

Type of service: Independent Hospital – Cosmetic Laser and Intense Pulse Light (IPL)
Address: 82 Lower Mill Street, Ballymena, BT43 5AF
Telephone number: 028 2563 8209

www.rqia.org.uk

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

Organisation/Registered Provider: Cosmetic Laserworks Limited	Registered Manager: Ms Laura Wright
Responsible Individual: Ms Laura Wright	Date registered: 21 June 2016
Person in charge at the time of inspection: Ms Laura Wright	
Categories of care: (IH) Independent Hospital PT (L) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers; and PT (IL) Prescribed techniques or prescribed technology: establishments using intense light sources.	
Brief description of how the service operates: Laserway Laser Clinic is registered as an Independent Hospital (IH) with the following categories of care: PT (L) Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers and PT (IL) Prescribed techniques or prescribed technology: establishments using intense light sources. The establishment provides a range of cosmetic/aesthetic treatments. This inspection focused solely on those treatments that fall within regulated activity and the categories of care for which the establishment is registered with the Regulation and Quality Improvement Authority (RQIA).	
Equipment available in the service:	
Laser equipment	
Manufacturer:	Candella
Model:	Gentle Lase Pro
Serial Number:	9914-9015-1420
Laser Class:	Class 4
Manufacturer:	Alma
Model:	Harmony
Serial Number:	LV202322
Laser Class:	Class 4
Manufacturer:	Candella Mini
Model:	Gentlelase
Serial Number:	991408803150
Laser Class:	Class 4

IPL equipment

Manufacturer: Ellipse
 Model: Light
 Serial Number: 07060941
 Laser Class: IPL

Laser protection advisor (LPA)

Dr Godfrey Town (GCG Healthcare Ltd)

Medical support services

Dr Ross Martin

Laser protection supervisor (LPS)

Ms Laura Wright

Authorised operators

Ms Laura Wright
 Ms Emily Rowan
 Ms Rachel Hunter
 Ms Carlene McCord
 Ms Sasha Kinney

Type of laser treatments provided

- hair reduction
- photo-rejuvenation
- pigmented lesions
- tattoo removal
- skin rejuvenation including vascular and pigmented blemishes
- fractional ablative and non-ablative resurfacing
- acne

Type of IPL treatments provided

- hair reduction
- skin rejuvenation and acne treatment
- wrinkle reduction

2.0 Inspection summary

This was an announced inspection, undertaken by a care inspector on 20 July 2021 from 10:00 am to 11.45am.

Due to the COVID-19 pandemic the Northern Ireland (NI) Executive issued The Health Protection (Coronavirus, Restrictions) (No. 2) (Amendment) Regulations (Northern Ireland) 2020. These regulations specified close contact services that should close for identified periods of time; as a result of these periods of closure Laserway Laser Clinic was not inspected by RQIA during the 2020-21 inspection year.

The purpose of the inspection was to assess progress with areas for improvement identified during the last care inspection and to assess compliance with the legislation and minimum standards.

There was evidence of good practice concerning authorised operator training; safeguarding; laser and IPL safety; management of medical emergencies; infection prevention and control (IPC); the management of clinical records; the clinic's 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.

One area for improvement has been stated for a second time in relation to the completion of AccessNI enhanced disclosure checks for new authorised operators. This area is discussed in the main body of the report and detailed in the quality improvement plan (QIP) in Section 7.0.

No immediate concerns were identified regarding the delivery of front line client care.

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 Laserway Laser Clinic by RQIA prior to the inspection inviting clients and staff to complete an electronic questionnaire.

Five clients submitted responses. Client responses indicated that they felt their care was safe and effective, that they were treated with compassion and that the service was well led. All clients indicated that they were very satisfied with each of these areas of their care. Three client responses included comments demonstrating a high level of satisfaction regarding the care and treatment provided by Laserway Laser Clinic staff.

Four staff submitted questionnaire responses. Staff responses indicated that they felt client care was safe, effective, that clients were treated with compassion and that the service was well led. All staff indicated that they were very satisfied with each of these areas of client care. One staff response provided an additional comment indicating they enjoyed working in Laserway Laser Clinic.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Areas for improvement from the last inspection on 18 October 2019		
Action required to ensure compliance with The Independent Health Care Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 19 (2) schedule 2, as amended Stated: First time	The responsible individual must ensure that AccessNI enhanced disclosure checks are sought and reviewed prior to any authorised operators commencing work in the establishment.	Partially Met
	Action taken as confirmed during the inspection: This area for improvement has been assessed as partially met, further detail is provided in section 5.2.2. This area for improvement has been stated for a second time	

5.2 Inspection outcome

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

Ms Wright told us that there is sufficient staff in the various roles to fulfil the needs of the establishment and clients. It was confirmed that treatments using the laser and IPL machines are only carried out by authorised operators. A register of authorised operators for the laser and IPL machines is maintained and kept up to date.

A review of training records evidenced that all authorised operators had up to date training in core of knowledge; application training for the equipment in use; basic life support; infection prevention and control; fire safety awareness and safeguarding adults at risk of harm in keeping with the RQIA training guidance.

Laserway Laser Clinic does not employ any other support staff. Ms Wright is aware that should staff be employed that are not directly involved in the use of the laser or IPL machines they must undertake laser safety awareness training.

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

One authorised operator has been recruited since the previous inspection. The personnel file for this authorised operator was reviewed. All documents as specified in Regulation 19 (2), Schedule 2 as amended had been sought and retained. It was noted that the contract of employment was signed and dated during September 2020 and that the AccessNI enhanced disclosure check for this authorised operator was obtained on 14 January 2021, four months after the employment contract was signed. Ms Wright who told us that shortly after the identified authorised operator was recruited, Laserway Laser Clinic, as a close contact service was directed to close.

Ms Wright stated it was Laserway Laser Clinic policy that all newly recruited authorised operators must shadow an experienced authorised operator for a period of six months before they are permitted to treat clients unaccompanied. Ms Wright told us that as this authorised operator was supervised at all times and that as she had sight of a previous AccessNI enhanced disclosure check for the identified authorised operator, she had considered that it was safe for them to commence work in a shadowing capacity.

Ms Wright was advised that any authorised operator commencing work in the clinic must have an AccessNI enhanced disclosure check undertaken with the outcome recorded, prior to commencement of employment and that there are no exceptions to the legislation in this regard. Ms Wright gave assurance that she fully understood the recruitment process as advised. An area for improvement had been made at the previous inspection regarding the completion of AccessNI enhanced disclosure checks, this area for improvement has been assessed as partially met and has been stated for a second time.

There were recruitment and selection policies and procedures, that adhered to legislation and best practice to ensure suitably skilled and qualified staff work in the establishment. Adherence to these recruitment policies and procedures will ensure that all required recruitment documentation will be sought and retained for inspection. Discussion with Ms Wright evidenced that she is aware that should authorised operators be recruited in the future all recruitment documentation as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 should be sought and retained for inspection.

Ms Wright confirmed that all authorised operators recruited undertake an induction programme on commencement of employment. A completed induction programme was available for the most recently recruited authorised operator.

5.2.3 How does the service ensure that it is equipped to manage a safeguarding issue should it arise?

Ms Wright told us 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 Wright demonstrated that she was aware of the types and indicators of abuse and the actions to be taken in the event of a safeguarding issue being identified.

Review of records demonstrated that Ms Wright, 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.

Laserway Laser Clinic had appropriate arrangements in place to manage a safeguarding issue should it arise.

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

All authorised operators had up to date training in basic life support and Ms Wright 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.

Laserway Laser Clinic 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.

Two laser and IPL treatment rooms are provided, both treatment rooms were clean and clutter free. Discussion with Ms Wright evidenced that appropriate procedures were in place for the decontamination of equipment between use. Hand washing facilities were available and adequate supplies of personal protective equipment (PPE) were provided. As discussed previously, authorised operators had up to date training in infection prevention and control.

Laserway Laser Clinic 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 Wright who outlined the measures taken by Laserway Laser 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?

As previously discussed, Laserway Laser Clinic has two treatment rooms that are equipped to meet the needs of the service. Additional rooms are provided for storage and also for staff facilities. The premises were maintained to a good standard of maintenance and décor. Cleaning schedules for the establishment were in place.

Observations made evidenced that a carbon dioxide (CO₂) fire extinguisher is available which has been serviced within the last year.

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

5.2.8 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 9 October 2021.

Up to date, Local Rules were in place which have been developed by the LPA. These Local Rules contained the relevant information about the laser and IPL equipment being used.

The establishment's LPA completed a risk assessment of the premises during June 2019 and all recommendations made by the LPA have been addressed.

Ms Wright told us that laser and IPL procedures are carried out following medical treatment protocols. The medical treatment protocols had been produced by a named registered medical practitioner and are due to expire during 9 October 2022. Systems are in place to review the medical treatment protocols when due. The medical treatment protocols contained the relevant information about the treatments being provided.

Ms Wright, as the laser protection supervisor (LPS) has overall responsibility for safety during laser and IPL treatments and a list of authorised operators is maintained. Arrangements are in place for another authorised operator, who is suitably skilled to fulfil the role, to deputise for the LPS in their absence. Authorised operators had signed to state that they had read and understood the local rules and medical treatment protocols.

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

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

Both lasers and the IPL machine are operated using a key. Arrangements are in place for the safe custody of the keys when not in use. Protective eyewear is available for the client and operator as outlined in the Local Rules.

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

Separate registers are in place for the lasers and IPL equipment. Ms Wright told us that the registers are completed every time the equipment is operated, the registers include:

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

There are arrangements in place to service and maintain the laser and IPL equipment in line with the manufacturer's guidance. The most recent service report of the Candella Gentlelase Pro laser was dated June 2021 and the service reports for the Alma Harmony, the Candella Mini Gentlelase lasers and the Ellipse Light IPL machine were dated July 2021.

It was determined that appropriate arrangements were in place to operate the laser and IPL equipment.

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. There are systems in place to contact the client's general practitioner (GP), with their consent, for further information if necessary.

Six client care records were reviewed. There was an accurate and up to date treatment record for every client which included:

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

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

Laserway Laser Clinic has a policy for advertising and marketing which is in line with legislation.

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

Discussion with Ms Wright 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.

Appropriate measures are in place to maintain client confidentiality and observations made evidenced that client care records were stored securely in a lockable storage case.

5.2.11 How does the responsible individual 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 Wright 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 Wright demonstrated a good awareness of complaints management.

Ms Wright 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 Wright demonstrated a clear understanding of her role and responsibility in accordance with legislation. Information requested by RQIA has been submitted within the specified timeframes. Ms Wright confirmed that the statement of purpose and client's guide are kept under review, revised and updated when necessary and available on request.

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

Observation of 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 Wright.

6.0 Conclusion

Based on the inspection findings and discussions held we are satisfied that in the main this service is providing safe and effective care in a caring and compassionate manner; and that, in general, the service is well led by the responsible individual.

One area for improvement was identified against the regulations to ensure that AccessNI enhanced disclosure checks are sought and reviewed prior to authorised operators commencing work in the establishment. This area for improvement has been stated for a second time.

7.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has been identified where action is required to ensure compliance with [The Independent Health Care Regulations \(Northern Ireland\) 2005](#)

	Regulations	Standards
Total number of Areas for Improvement	1*	0

The total number of areas for improvement includes one that has been stated for a second time.

The area for improvement and details of the QIP was discussed with Ms Laura Wright, Responsible Individual, as part of the inspection process. The timescale for completion commences from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Independent Health Care Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 19 (2) Schedule 2, as amended Stated: Second time To be completed by: 20 July 2021	The responsible individual must ensure that AccessNI enhanced disclosure checks are sought and reviewed prior to any authorised operators commencing work in the establishment. Ref: 5.2.2 Response by registered person detailing the actions taken: noted that enhanced disclosure checks will be in place prior to new employees commencing work.

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



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