

# Inspection Report

28 May 2025



## Dr Emma Clinics

Type of service: Independent Hospital-Cosmetic Laser\Intense Pulsed Light

Address: 11F Old Warrenpoint Road, Newry, BT34 2PF

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[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 [Minimum Care Standards for Independent Healthcare Establishments \(July 2014\)](#)

## 1.0 Service information

<p><b>Organisation/Provider:</b> Dr Emma Clinics Ltd</p> <p><b>Responsible Individual:</b> Ms Emma Cunningham-Idowu</p>	<p><b>Registered Manager:</b> Ms Emma Cunningham-Idowu</p> <p><b>Date registered:</b> 8 February 2022</p>
<p><b>Person in charge at the time of inspection:</b> Ms Emma Cunningham-Idowu</p>	
<p><b>Categories of care:</b> Independent Hospital (IH) 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)</p>	
<p><b>Brief description of how the service operates:</b></p> <p>Dr Emma Clinics is registered with the Regulation and Quality Improvement Authority (RQIA) 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.</p> <p>Dr Emma Clinics 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.</p> <p><b>Equipment available in the service:</b></p> <p>The Sciton Joule X is a multi-platform machine that is capable of operating as a laser and an IPL by changing the hand piece.</p> <p><b>Multi- platform equipment</b> Manufacturer: Sciton Model: Joule X Serial Number:1 926-00008 Laser Class: 4 N/A-(IPL)</p>	

**Hand Pieces:****Halo**

Serial number: 1277 RevB  
Wavelength: 1470nm

**Profractional III TRL**

Serial Number: 6640RevA  
Wavelength: -2940nm

**TRL**

Serial Number: 4416RevA  
Wavelength: 2940nm

**BBL - IPL (attached to main machine)**

Wavelength: 300nm-1400nm

**Types of laser treatments provided:**

Halo: skin resurfacing, deep pigmentation, peri-oral treatment

Profractional III TRL: acne scarring

TRL: deep skin resurfacing, peri-oral treatment

**Types of IPL treatments provided:**

BBL: rosacea, acne, pigmentation, redness, vascular, skin rejuvenation

## 2.0 Inspection summary

This was an announced inspection, undertaken by two care inspectors on 28 May 2025 from 10.00 am to 2.00 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; authorised operator training; safeguarding; management of medical emergencies; infection prevention and control; the management of clinical records; 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.

Four areas of improvement were identified against the minimum standards with regards to the completion of laser and IPL client records and registers, the medical treatment protocols and providing support staff with laser awareness training.

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**

Clients were not present on the day of the inspection and client feedback was assessed by reviewing the most recent client satisfaction surveys completed by Dr Emma Clinics and is further discussed in section 5.2.9 of this report.

Posters were issued to Dr Emma Clinics 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 Dr Emma Clinics was undertaken on 14 February 2024; no areas for improvement were identified.

#### **5.2 Inspection outcome**

##### **5.2.1 How does this service ensure that staffing levels are safe to meet the needs of clients and staff are suitably trained?**

Dr Cunningham-Ildowu told us there are sufficient staff in the various roles to fulfil the needs of the establishment and clients.

Dr Cunningham-Ildowu confirmed that laser and IPL treatments are only carried out by authorised operators. A register of authorised operators for the laser and IPL machine is maintained and kept up to date.

A review of completed induction programmes evidenced that induction training is provided to new staff on commencement of employment.

A review of training records evidenced that authorised operators have up to date training in core of knowledge training, 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.

It was identified that all other staff employed at the establishment, but not directly involved in the use of the laser and IPL equipment, had not received formal laser safety awareness training. An area for improvement against the standards has been made in this regard.

Evidence was available that staff who have a professional registration undertake continuing professional development (CPD) in accordance with their professional body's recommendations. Discussion with Dr Cunningham-Idowu and review of documentation confirmed that authorised operators take part in appraisals on an annual basis.

It was determined that appropriate staffing levels were in place to meet the needs of clients and that staff are suitably trained.

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

Recruitment and selection policies and procedures were in place, which largely adhered to legislation and best practice guidance for the recruitment of authorised operators. Advice was provided on minor amendments to the recruitment and selection policies and procedures. Dr Cunningham-Idowu provided assurances on this matter. These arrangements will ensure that all required recruitment documentation has been sought and retained for inspection.

There have been no authorised operators recruited since the previous inspection. During discussion Dr Cunningham-Idowu confirmed 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 would be sought and retained for inspection.

There was evidence of job descriptions and induction checklists for authorised operators.

Discussion with Dr Cunningham-Idowu confirmed that she had a clear understanding of the legislation and best practice guidance in relation to recruitment and selection.

As a result of the assurances provided by Dr Cunningham-Idowu, it is determined that the recruitment of authorised operators complies with the 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?**

Dr Cunningham-Idowu stated that laser and IPL treatments are not provided to persons under the age of 18 years.

A policy and procedure were in place for the safeguarding and protection of adults and children at risk of harm. The policy 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 confirmed Dr Cunningham-Idowu 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 Dr Cunningham-Idowu as the safeguarding lead, has completed formal level two 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 a copy of the regional policy entitled Co-operating to Safeguard Children and Young People in Northern Ireland (November 2024) and the regional guidance document entitled Adult Safeguarding Prevention and Protection in Partnership (July 2015) were available for reference.

It was determined that 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?**

Authorised operators had up to date training in basic life support and were aware of what action to take in the event of a medical emergency. There was a written protocol in place for dealing with recognised medical emergencies.

It was determined that 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 (IPC) 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.

The laser and IPL treatment room was clean and clutter free. Discussion with Dr Cunningham-Idowu 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 IPC.

Dr Cunningham-Idowu is aware that the Department of Health (DOH) and Public Health Agency (PHA) websites provide advisory information, guidance and alerts with regards to IPC.

It was determined that the service had appropriate arrangements in place in relation to IPC and decontamination.

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

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.

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

A laser safety file was in place which contained most of the relevant information in relation to laser and IPL equipment. There was written confirmation of the appointment and duties of a certified laser protection advisor (LPA) which is reviewed on an annual basis. The service level agreement between the establishment and the LPA was reviewed and this expires on 4 October 2025.

Up to date, local rules were in place which have been developed by the LPA. The local rules contained most of the relevant information about the laser and IPL equipment being used.

However, the local rules did not outline full details of the protective eyewear. Following the inspection confirmation was provided that action had been taken to address this matter and that authorised operators had signed to state that they had read and understood the updated local rules.

The establishment's LPA completed a risk assessment of the premises during January 2025 and all recommendations made by the LPA have been addressed.

Dr Cunningham-Ildowu confirmed that laser and IPL procedures will be carried out following medical treatment protocols. The medical treatment protocols had been produced by Dr Cunningham-Ildowu. A review of the protocols identified that they required further development to ensure they contain all relevant information as set out in the legislation and minimum care standards in relation to each type of laser and IPL treatment provided. Guidance was provided to Dr Cunningham-Ildowu in this regard. An area for improvement against the standards has been made in this regard. It was established that systems are in place to review the medical treatment protocols when due.

Dr Cunningham-Ildowu, as the laser protection supervisor (LPS) has overall responsibility for safety during laser and IPL treatments and a list of authorised operators is maintained.

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 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 and IPL equipment is in use but can be opened from the outside in the event of an emergency. Authorised operators were aware that the laser safety warning sign should only be displayed when the laser and IPL equipment is in use and removed when not in use.

The laser and IPL machine is operated using a keypad code. Arrangements are in place for the safe custody of the keypad code when not in use. Protective eyewear is available for the client and operator as outlined in the local rules, following amendments to the local rules as a result of this inspection.

Dr Emma Clinics has two separate registers for the laser and IPL treatments.

Authorised operators told us that they complete the relevant section of the register every time the equipment is operated. The registers reviewed included:

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

It was identified that full details of the treatment provided was not always recorded in the registers. An area for improvement against the standards has been made 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 for the IPL and laser equipment was reviewed.

Addressing the areas for improvement will ensure that appropriate arrangements are in place to operate the laser and IPL equipment.

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

Dr Cunningham-Idowu confirmed that clients are provided with an initial consultation to discuss their treatment and any concerns they may have. There is written information for clients that provides a clear explanation of any treatment and includes pre and post treatment information.

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 each client's personal information is recorded and clients are asked to complete a health questionnaire. Advice was provided on including the client's general practitioner (GP) details in keeping with legislative requirements and Dr Cunningham-Idowu was receptive to this advice.

Three client care records were reviewed. There was largely an accurate and up to date treatment record for each 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)

The consent form was noted to be of the generic type and did not have exact details of the treatment to be provided nor a counter signature for the authorised operator. It was also noted that the patch test was not clearly identified in the client record. Advice was provided on the content and completion of the consent form; and the recording of the patch test. Dr Cunningham-Idowu was receptive to the advice. An area for improvement against the standards has been made in this regard.

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.

The service has a policy for advertising and marketing.

Addressing the area for improvement will ensure that appropriate arrangements are in place to ensure that clients have a planned programme of care and have sufficient information to consent to treatment.

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

Discussion with Dr Cunningham-Idowu and an authorised operator 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.

Dr Cunningham-Idowu told us that clients are provided with the opportunity to complete a satisfaction survey when their treatment is complete. Advice was provided that the results of these surveys should be collated to provide an anonymised summary report which is made available to clients and other interested parties and that an action plan be developed to inform and improve services provided, if appropriate. Dr Cunningham-Idowu was receptive to this advice and gave assurances to implement this approach.

As a result of the assurances provided by Dr Cunningham-Idowu, it is determined that appropriate arrangements are in place to ensure that clients are treated with dignity, respect and are involved in decisions regarding their choice of treatment.

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

Where the business entity operating the service is a corporate body or partnership or an individual owner who is not in day to day management of the practice, unannounced quality monitoring visits by the registered provider must be undertaken and documented every six months; as required by Regulation 26 of The Independent Health Care Regulations (Northern Ireland) 2005.

Dr Cunningham-Idowu was in day to day management of the service, therefore the unannounced quality monitoring visits by the registered provider are not applicable.

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.

The arrangements for the management of complaints and incidents were reviewed to ensure that they were being managed in keeping with legislation and best practice guidance.

The complaints policy and procedure provided clear instructions for patients and staff to follow. Clients were made aware of how to make a complaint by way of the client's guide.

Arrangements were in place to record any complaint received in a complaints register and retain all relevant records including details of any investigation undertaken, all communication with complainants, the outcome of the complaint and the complainant's level of satisfaction.

A review of records confirmed that no complaints had been received since the previous inspection.

Discussion with Dr Cunningham-Idowu confirmed that an incident policy and procedure was in place which includes the reporting arrangements to RQIA. Dr Cunningham-Idowu confirmed that incidents would be effectively documented and investigated in line with legislation. All relevant incidents are reported to RQIA and other relevant organisations in accordance with legislation and RQIA [Statutory Notification of Incidents and Deaths](#). Arrangements are in place to audit adverse incidents to identify trends and improve service provided.

Dr Cunningham-Idowu demonstrated a clear understanding of her role and responsibility in accordance with legislation.

Dr Cunningham-Idowu 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.

It was determined that suitable arrangements are in place to enable Dr Cunningham-Idowu to assure themselves of the quality of the services provided.

### 5.2.11 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 Dr Cunningham-Idowu.

## 6.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with the [Minimum Care Standards for Independent Healthcare Establishments \(July 2014\)](#)

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	0	4

Areas for improvement and details of the QIP were discussed with Dr Cunningham-Idowu, Responsible Individual and confirmed in an email 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 the <a href="#">Minimum Care Standards for Independent Healthcare Establishments (July 2014)</a></b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 48.13  <b>Stated:</b> First time  <b>To be completed by:</b> 28 July 2025	The responsible individual shall ensure that staff employed at the establishment, but not directly involved in the use of the laser and IPL equipment, receive formal laser safety awareness training.  Ref: 5.2.1  <b>Response by registered person detailing the actions taken:</b> All staff employed at Dr Emma Clinics but not directly involved in the use of the laser and IPL equipment have received formal laser safety awareness training, certificates have been forwarded to Winifred Maguire.
<b>Area for improvement 2</b>  <b>Ref:</b> Standard 48.3  <b>Stated:</b> First time  <b>To be completed by:</b> 28 July 2025	The responsible individual shall further develop the medical treatment protocols to include all relevant information as set out in the legislation and minimum care standards for each type of laser and IPL treatment provided.  Ref: 5.2.7  <b>Response by registered person detailing the actions taken:</b>

	Dr Emma has updated the medical treatment protocols to include all relevant information, as in the handbook emailed to Winifred Maguire.
<b>Area for improvement 3</b> <b>Ref:</b> Standard 48.9 <b>Stated:</b> First time <b>To be completed by:</b> 28 July 2025	The responsible individual shall ensure full details of the treatment provided is recorded in the laser and IPL registers.  Ref: 5.2.7
	<b>Response by registered person detailing the actions taken:</b> Operator's follow the laser records protocol (as previously emailed) and ensure the laser and IPL registers are recorded in detail in a laser log book and on our online Phorest system within each client's treatment records.
<b>Area for improvement 4</b> <b>Ref:</b> Standard 48.10 <b>Stated:</b> First time <b>To be completed by:</b> 28 July 2025	The responsible individual shall ensure that the consent form outlines the details of the treatment to be provided and is counter signed by the authorised operator; and the recording of the patch test is clearly identifiable in the client records.  Ref: 5.2.8
	<b>Response by registered person detailing the actions taken:</b> The Laser forms have been updated to include details of the treatment and the authorised operators details and signature. The Patch Test recording tab is now being utilised on our Phorest booking system and patients are asked to confirm their patch test within the consultation form prior to treatment.

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



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