

Inspection Report

1 October 2024



KMK Beauty, Aesthetic And Laser

Type of service: Independent Hospital-Cosmetic Laser / Intense Pulsed Light
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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>Organisation/Provider: KMK Beauty, Aesthetic And Laser Ltd</p> <p>Responsible Individual: Ms Kathleen McKenna</p>	<p>Registered Manager: Ms Kathleen McKenna</p> <p>Date registered: 04 July 2022</p>
<p>Person in charge at the time of inspection: Ms Kathleen McKenna</p>	
<p>Categories of care: 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>Brief description of how the service operates: KMK Beauty, Aesthetic And Laser 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>KMK Beauty, Aesthetic And Laser 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>Equipment available in the service:</p> <p>Laser equipment: Manufacturer: Lynton Lasers Model: Luminette Q Serial Number: LETQ-113-22 Laser Class: 4 Wavelength: 532nm and 1064nm</p> <p>IPL equipment: Manufacturer: Lynton Model: Excelight Serial Number: EXC-608-22</p>	

Types of laser treatments provided:

Tattoo removal
Fungal nail
Carbon peel

Types of IPL treatments provided:

Hair removal
Skin rejuvenation
Vascular lesion
Pigmentation lesion
Acne

2.0 Inspection summary

This was an announced inspection, undertaken by a care inspector on 1 October 2024 from 10.00 am to 1.45 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; laser and IPL safety; management of medical emergencies; infection prevention and control; adherence to best practice guidance in relation to COVID-19; 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.

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 KMK Beauty, Aesthetic And Laser.

Posters were issued to KMK Beauty, Aesthetic And Laser by RQIA prior to the inspection inviting clients and staff to complete an electronic questionnaire.

Eight clients submitted responses. Seven 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. Of the eight client responses received, seven indicated that they were either satisfied or very satisfied with each of these areas of their care. One client's response indicated that they felt their care was not safe and effective, that they were not treated with compassion or that the service was well led. The client indicated that they were very dissatisfied with each of these areas of their care. Six client responses included positive comments pertaining to the pleasantness and professionalism of staff and the service they had received.

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 KMK Beauty, Aesthetic And Laser was undertaken on 14 November 2023; 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?

Ms McKenna told us there are sufficient staff in the various roles to fulfil the needs of the establishment and clients.

Ms McKenna confirmed that laser and IPL treatments are only carried out by authorised operators. A register of authorised operators for the laser and IPL is maintained and kept up to date.

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

This was discussed with Ms McKenna and, following the inspection, RQIA received confirmation that this matter had been addressed.

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?

There have been no authorised operators recruited since the previous inspection. During discussion, Ms McKenna 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.

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

It was 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?

Ms McKenna stated that laser and IPL treatments are not provided to persons under the age of 18 years.

A policy and procedure was 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 Ms McKenna 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.

Review of records demonstrated that Ms McKenna, 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 (August 2017) 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?

All authorised operators had up to date training in basic life support and Ms McKenna was 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/ IPL treatment room was clean and clutter free. Discussion with Ms McKenna evidenced that appropriate procedures were in place for the decontamination of equipment between use. Hand washing facilities were available however, Ms McKenna was advised to ensure that disposable hand towels were available in the clinic. Ms McKenna gave assurances that this matter would be addressed. Adequate supplies of personal protective equipment (PPE) were provided. As discussed previously, authorised operators had up to date training in IPC.

As a result of the assurances received, it was determined that 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?

The management of operations to minimise the risk of COVID-19 transmission were discussed with Ms McKenna who outlined the measures that taken by KMK Beauty, Aesthetic And Laser to ensure current best practice measures are in place.

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

5.2.7 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 (CO₂) fire extinguisher is available which has been serviced within the last year. It was identified that the fire risk assessment required to be reviewed.

This was discussed with Ms McKenna and, following the inspection, RQIA received evidence that this matter had been addressed. Ms McKenna gave assurances that all recommendations as outlined in the fire risk assessment would be addressed.

As a result of the action taken following the inspection and the assurances received, 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?

The laser safety file reviewed did not contain up to date information regarding the laser and IPL equipment in place. This was discussed with Ms McKenna and following the inspection, RQIA received confirmation that this matter had been addressed.

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 during September 2025.

Two sets of local rules were in place; one for the laser machine and one for the IPL machine. The 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 September 2024. Ms McKenna was advised to ensure all recommendations made by the LPA have been addressed. Following the inspection, RQIA received confirmation that this matter had been addressed.

Ms McKenna confirmed 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. It was demonstrated that the protocols contained the relevant information about the treatments being provided and are due to expire during August 2025. It was established that systems are in place to review the medical treatment protocols when due.

Ms McKenna, as the laser protection supervisor (LPS) and authorised operator, has overall responsibility for safety during laser and IPL treatments and a list of authorised operators is maintained. It was identified that authorised operators had not signed to state that they had read and understood the local rules and medical treatment protocols. This was discussed with Ms McKenna and following the inspection, RQIA received confirmation that this matter had been addressed.

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

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

The laser and IPL machines are operated using a key. Arrangements are in place for the safe custody of the key when not in use. Protective eyewear is available for the client and operator as outlined in the local rules. Ms McKenna was advised to ensure that the protective eyewear for client and operator have been clearly labelled. Following the inspection, RQIA received evidence that this matter had been addressed.

KMK Beauty, Aesthetic And Laser has a laser register and a separate IPL register.

Ms McKenna 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

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 laser and IPL were reviewed and it was identified that both the laser and IPL were due to be serviced. This was discussed with Ms McKenna and following the inspection, RQIA received confirmation that arrangements were in place to address this matter.

As a result of the action taken following the inspection, 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?

Ms McKenna confirmed that clients are provided with an initial consultation to discuss their treatment and any concerns they may have. Following the inspection, RQIA received evidence that there is written information for clients that provides a clear explanation of any treatment and includes effects, side-effects, 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 each client's personal information is recorded including their general practitioner (GP) details in keeping with legislative requirements and clients are asked to complete a health questionnaire.

Two client care records were reviewed. There was 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)

In one of the client care records it was identified that GP details were not recorded and that the health questionnaire in place had been completed for a treatment not related to the laser or IPL. These matters were discussed with Ms McKenna who gave assurances that these matters would be addressed following the inspection.

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.

As a result of the assurances received, it was determined that appropriate arrangements were in place to ensure that clients have a planned programme of care and have 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 McKenna 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 McKenna told us that clients would be provided with the opportunity to complete a satisfaction survey when their treatment is complete. The results of these will be collated to provide an anonymised summary report which will be made available to clients and other interested parties. Ms McKenna confirmed that an action plan would be developed to inform and improve services provided, if appropriate.

It was determined that appropriate arrangements were in place to ensure that clients are treated with dignity, respect and are involved in decisions regarding their choice of treatment.

5.2.11 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 establishment, 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.

Ms McKenna was in day to day management of the establishment therefore the unannounced quality monitoring visits by the registered provider are not applicable.

Policies and procedures were available, however Ms McKenna was advised to ensure that policies and procedures referred to both laser and IPL treatments. Following the inspection, RQIA received confirmation that this matter had been addressed. Observations made confirmed that policies and procedures were indexed. Ms McKenna was advised to ensure that all policies and procedures are dated and systematically reviewed on a three yearly basis or more frequently if required. Following the inspection, RQIA received confirmation that this matter had been addressed.

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 clients 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 Ms McKenna confirmed that an incident policy and procedure was in place which includes the reporting arrangements to RQIA. Ms McKenna 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.

Ms McKenna demonstrated a clear understanding of her role and responsibility in accordance with legislation.

Ms McKenna 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.

As a result of the action taken, following the inspection, it was determined that suitable arrangements are in place to enable the responsible individual to assure themselves of the quality of the services provided.

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 McKenna.

6.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Ms McKenna, Responsible Individual, as part of the inspection process and can be found in the main body of the report.



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