Inspection Report

11 March 2026

Younique Salon Ltd

Type of service: Independent Hospital-Cosmetic Laser\Intense Pulsed Light
Address: 26 Monaghan Street, Newry, BT35 6AA
Telephone number: 028 3026 7606

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

Organisation/Provider: YOU -NIQUE SALON LTD **Responsible Individual:** Mrs Bernadine Cunningham	**Registered Manager:** Mrs Bernadine Cunningham **Date registered:** 16 December 2008
Person in charge at the time of inspection: Mrs Bernadine Cunningham	
Category of care: Independent Hospital (IH) Prescribed techniques or prescribed technology: establishments using intense light sources PT(IL)	
Brief description of how the service operates: Younique Salon Ltd is registered with the Regulation and Quality Improvement Authority (RQIA) as an Independent Hospital (IH) with the following category of care: PT (IL) Prescribed techniques or prescribed technology: establishments using intense light sources. Younique Salon Ltd also provides a range of cosmetic /aesthetic treatments. This inspection focused solely on those treatments using an intense pulse light (IPL) machine that fall within regulated activity and the category of care for which the establishment is registered with RQIA. **Equipment available in the service:** **IPL equipment:** Manufacturer: Lynton Model: Lumina Depilite Serial Number: LUM-005a Wavelength: 550-1100nm **Types of IPL treatments provided:** Acne treatment Skin rejuvenation Hair removal Vascular treatment	

2.0 Inspection summary

This was an announced inspection, undertaken by a care inspector on 11 March 2026 from 10.15 am to 1:25 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; IPL safety; management of medical emergencies; infection prevention and control (IPC); 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 identified against the standards regarding the recording of skin assessments and patch tests.

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 Younique Salon Ltd. This matter is discussed further in section 5.2.9.

Posters were issued to Younique Salon Ltd 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 Younique Salon Ltd was undertaken on 12 March 2025; 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?

Mrs Cunningham told us that IPL treatments are carried out by her as the authorised operator. The register of authorised operators for the IPL equipment reflects that Mrs Cunningham is the only authorised operator.

A review of training records evidenced that Mrs Cunningham has up to date training in core of knowledge, application training for the equipment in use, basic life support, IPC, fire safety awareness and safeguarding adults at risk of harm in keeping with the RQIA training guidance.

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. Advice and guidance was provided to Mrs Cunningham to further develop the recruitment and selection policy and procedure to ensure that it is in keeping with legislation and best practice guidance for the recruitment of authorised operators. Following the inspection, RQIA received evidence that this matter has been addressed.

There have been no authorised operators recruited since the previous inspection. During discussion Mrs Cunningham 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 Mrs Cunningham 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 actions taken following the inspection, 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?

Mrs Cunningham stated that 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 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. The relevant contact details were included for onward referral to the local Health and Social Care Trust should a safeguarding issue arise.

Review of records demonstrated that Mrs Cunningham, 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 guidance document entitled Adult Safeguarding Prevention and Protection in Partnership (July 2015) was 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?

Mrs Cunningham 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 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 IPL treatment room was clean and clutter free. Discussion with Mrs Cunningham evidenced that appropriate procedures were in place for the decontamination of equipment between uses. Hand washing facilities were available and adequate supplies of personal protective equipment (PPE) were provided. Cleaning schedules for the establishment were in place. As discussed previously, Mrs Cunningham had up to date training in IPC.

Mrs Cunningham 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.

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

It was confirmed that the fire risk assessment had been reviewed since the previous inspection.

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

5.2.7 How does the service ensure that IPL procedures are safe?

A laser safety file was in place which in the main, included the relevant information in relation to the IPL equipment. This matter was discussed with Mrs Cunningham and is addressed further in this section of the report. 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 May 2026.

Updated local rules which have been developed by the LPA were submitted to RQIA following the inspection. The updated local rules contained the relevant information about the IPL equipment being used. Following the inspection, Mrs Cunningham was provided with advice to ensure that authorised operators had signed to state that they had read and understood the local rules.

The establishment's LPA completed a risk assessment of the premises during September 2025. Mrs Cunningham confirmed that no recommendations were made by the LPA as a result of the risk assessment.

When the IPL equipment is in use, the safety of all persons in the controlled area is the responsibility of the laser protection supervisor (LPS).

Mrs Cunningham, as the LPS, has overall responsibility for safety during IPL treatments and a list of authorised operators is maintained.

Mrs Cunningham confirmed that IPL procedures are carried out following medical treatment protocols. The medical treatment protocols had been approved by a named registered medical practitioner. It was demonstrated that the protocols contained the relevant information about the treatments being provided. It was established that systems are in place to review the medical treatment protocols when due. Authorised operators had signed to state that they had read and understood the medical treatment protocols.

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.

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. Mrs Cunningham was aware that the laser safety warning sign should only be displayed when the IPL equipment is in use and removed when not in use.

The IPL equipment is operated using a key. Following the inspection, RQIA received evidence of the arrangements in place for the safe custody of the key when not in use. Protective eyewear is available for the client and operator. Mrs Cunningham was advised to consult with her LPA to ensure that the protective eyewear available in the establishment, is in accordance with the local rules. Following the inspection, RQIA received evidence regarding this matter.

Younique Salon Ltd has an IPL register.

The register reviewed included:

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

Mrs Cunningham was provided with advice to update the IPL register to include the treatment given. Following the inspection, RQIA received evidence that this matter had been addressed.

There were arrangements in place to service and maintain the IPL equipment in line with the manufacturer's guidance. Following the inspection, RQIA received evidence of the most recent service report for the IPL equipment.

As a result of the evidence submitted following the inspection, it is determined that appropriate arrangements are in place to operate the 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?

Mrs Cunningham 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.

Mrs Cunningham confirmed 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.

It was noted that there was an accurate and up to date treatment record for one 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)

A review of a second client care record identified that there was accurate and up to date treatment record as outlined above, however it was it was identified that the skin assessment and patch test had not been recorded. This was discussed with Mrs Cunningham and 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 Mrs Cunningham 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.

Mrs Cunningham told us that clients are provided with the opportunity to complete a satisfaction survey when their treatment is complete. The results of these are collated to provide an anonymised summary report which is made available to clients and other interested parties. Mrs Cunningham was provided with advice to ensure that a client satisfaction summary report is completed on an annual basis.

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.

5.2.10 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, 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.

Mrs Cunningham was in day to day management of the clinic, therefore the unannounced quality monitoring visits by the registered provider are not applicable.

Policies and procedures were available outlining the arrangements associated with the IPL treatments. Observations made confirmed that policies and procedures were indexed 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 clients and staff to follow. Clients were made aware of how to make a complaint by way of the client guide.

Discussion with Mrs Cunningham confirmed that no complaints had been received since the previous inspection.

Discussion with Mrs Cunningham confirmed that an incident policy and procedure was in place which includes the reporting arrangements to RQIA. It was confirmed that incidents would be effectively documented and investigated in line with legislation and 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.

Mrs Cunningham demonstrated a clear understanding of her role and responsibility in accordance with legislation.

Mrs Cunningham was provided with advice to ensure that the statement of purpose and client guide are kept under review, revised and updated when necessary and be made available on request. Mrs Cunningham was receptive to this advice and following the inspection, RQIA received confirmation that the statement of purpose and client guide had been updated in keeping with legislative requirements.

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 Mrs Cunningham to assure herself 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 Mrs Cunningham.

6.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified were action is required to ensure compliance with the **Minimum Care Standards for Independent Healthcare Establishments (July 2014).**

	Regulations	Standards
Total number of Areas for Improvement	0	1

Areas for improvement and details of the QIP were discussed with Mrs Cunningham, Responsible Individual, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with the Minimum Care Standards for Independent Healthcare Establishments (July 2014)	
Area for improvement 1 **Ref: Standard 48.10** **Stated: First time** **To be completed by:** **11 March 2026**	The responsible individual shall ensure that prior to commencing a course of IPL treatment, there is an accurate and up to date record of a skin assessment and patch test for every client. Ref: 5.2.8
	Response by registered person detailing the actions taken: complete

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

The Regulation and Quality Improvement Authority
James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
@RQIANews