Inspection Report

27 August 2026



Nulase Clinic

Type of service: Independent Hospital-Cosmetic Laser \ Intense Pulsed Light
Address: 1 Old Grange Green, Carrickfergus, BT38 7UG
Telephone number: 078 0336 5417

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: Ms Sarah Dougherty	**Registered Manager:** Ms Sarah Dougherty **Date registered:** 25 November 2024
Person in charge at the time of inspection: Ms Sarah Dougherty	
Categories of care: Prescribed techniques or prescribed technology: establishments using Class 3B or Class 4 lasers PT(L) and/or Prescribed techniques or prescribed technology: establishments using intense light sources PT(IL)	

Brief description of how the service operates:
Nulase Clinic 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.

Nulase Clinic also provides a range of cosmetic and 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.

Equipment available in the service:

Manufacturer: Skyncare
Model: Solaris HS-910
Serial Number: 2501NU005
Laser Class: 4
Wavelength: 532, 810 and 1064nm

The Skyncare Solaris is a multi-platform machine that is capable of operating as a laser and an IPL by changing the hand piece. There are four handpieces: Diode, Erbium, Nd Yag laser and IPL.

Types of laser treatments provided:
Tattoo/semi-permanent make up (SPMU) removal
Hair reduction
Vascular
Skin rejuvenation

Types of IPL treatments provided:
Hair reduction
Skin rejuvenation
Vascular
Pigmentation
Acne scarring

2.0 Inspection summary

This was an announced inspection, undertaken by a care inspector on 27 August 2026 from 9.30 am to 11.00 am.

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 (IPC); 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 Nulase Clinic. This matter is discussed further in section 5.2.9.

Posters were issued to Nulase Clinic by RQIA prior to the inspection inviting clients and staff to complete an electronic questionnaire.

Eleven 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 either satisfied or very satisfied with each of these areas of their care. Ten client responses included comments. They commented on the professionalism and expertise of staff and the efficient and clean service.

No staff submitted questionnaire responses.

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 Nulase Clinic was undertaken on 7 August 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?

Ms Dougherty told us that laser and IPL treatments are carried out by her as the authorised operator. The register of authorised operators for the laser and IPL equipment reflects that Ms Dougherty is the authorised operator.

A review of training records evidenced that Ms Dougherty 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, which adhered to legislation and best practice guidance for the recruitment of authorised operators.

There have been no authorised operators recruited since the previous inspection. During discussion, Ms Dougherty 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 Dougherty 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 Dougherty stated that IPL treatments are provided to persons 16-17 years of age.

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 Dougherty 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 Dougherty, as the safeguarding lead has completed formal level two training in safeguarding adults and children in keeping with the Northern Ireland Adult Safeguarding Partnership (NIASP) training strategy (revised 2016) and minimum standards / the Safeguarding Board for Northern Ireland (SBNI) Child Safeguarding Learning and Development Strategy and Framework 2020 – 2023 (July 2021).

It was confirmed that copies of the regional guidance document entitled Adult Safeguarding Prevention and Protection in Partnership (July 2015) and regional policy entitled Co-operating to Safeguard Children and Young People in Northern Ireland (November 2024) were 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?

Ms Dougherty 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 laser and IPL treatment room was clean and clutter free. Discussion with Ms Dougherty 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. Cleaning schedules for the establishment were in place. As discussed previously, Ms Dougherty had up to date training in IPC.

Ms Dougherty 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.

It was evidenced that a carbon dioxide (CO2) fire extinguisher was available and had been serviced within the last year.

Ms Dougherty was advised to review the fire risk assessment on an annual basis and gave assurances that this would be actioned following the inspection.

As a result of the assurances given, 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 the relevant information in relation to Skyncare Solaris multi-platform equipment.

There was written confirmation of the appointment and duties of a certified laser protection advisor (LPA). The service level agreement between the establishment and the LPA was reviewed and this expires during May 2028.

Up to date, local rules were in place which have been developed by the LPA. The local rules contained the relevant information about the multi-platform equipment being used.

It was confirmed that the establishment's LPA last completed a risk assessment of the premises in July 2025. A review of this risk assessment identified that a number of recommendations made by the LPA were required to be reviewed and actioned. These matters were discussed with Ms Dougherty who gave assurances that they would be addressed following the inspection.

Ms Dougherty 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 March 2027. It was established that systems are in place to review the medical treatment protocols when due.

As discussed, laser and IPL treatments are offered to persons 16 and 17 years of age, namely laser hair reduction on non-intimate areas and IPL acne treatment. It was confirmed that the treatment protocols in place are produced by a named registered medical practitioner and are applicable to persons aged 16 and 17 years. A clinic policy is in place detailing the arrangements relating to consent and escort of persons under 18, by a person with parental rights and responsibilities.

Ms Dougherty, as the laser protection supervisor (LPS) has overall responsibility for safety during laser and IPL treatments and a list of authorised operators is maintained. Ms Dougherty had signed to state that they had read and understood the local rules and medical treatment protocols.

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

The environment in which the multi-platform 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 multi-platform equipment is in use but can be opened from the outside in the event of an emergency. Ms Dougherty is aware that the laser safety warning sign should only be displayed when the multi-platform equipment is in use and removed when not in use.

The Skyncare Solaris multi-platform machine is 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.

Nulase maintains two registers, one for laser and one for IPL treatments respectively.

Ms Dougherty told us authorised operators complete the relevant section of the registers 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 multi-platform equipment in line with the manufacturer's guidance. The most recent service report of the multi-platform equipment was reviewed.

As a result of the assurances given regarding the laser risk assessment, it was determined that appropriate arrangements were in place to operate the multi-platform 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?

Ms Dougherty 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. This includes their general practitioner (GP) details in keeping with legislative requirements and clients are also asked to complete a health questionnaire.

A sample of 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 were available which included the creation, storage, recording, retention and disposal of records and data protection.

The service has a policy for advertising and marketing.

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.

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

Discussion with Ms Dougherty 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 Dougherty 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. Ms Dougherty confirmed that an action plan would be developed to inform and improve services provided, if appropriate.

Review of the most recent client satisfaction report, dated June 2026, found that clients were highly satisfied with the quality of treatment, information and care received.

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.

Ms Dougherty 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 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 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 complaint register. All relevant records would be retained including details of any investigation undertaken, all communication with complainants, the outcome of the complaint and the complainant's level of satisfaction.

Discussion with Ms Dougherty and a review of records confirmed that no complaints had been received since the previous inspection.

Ms Dougherty confirmed that a complaints audit would be undertaken to identify trends, drive quality improvement and to enhance service provision, when required.

Discussion with Ms Dougherty confirmed that an incident policy and procedure was in place which includes the reporting arrangements to RQIA. Ms Dougherty 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.

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

Ms Dougherty confirmed that the statement of purpose and client 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 the registered person 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 Ms Dougherty.

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 Dougherty, Registered Person, as part of the inspection process and can be found in the main body of the report.



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