

Announced Care Inspection Report 20 October 2016



Pretty Woman

**Type of Service: Independent Hospital (IH) –
Cosmetic Laser/IPL Service**
Address: 16B Church Street, Dromore, BT25 1AA
Tel No: 02892699065
Inspector: Winnie Maguire

1.0 Summary

An announced inspection of Pretty Woman took place on 20 October 2016 from 09.50 to 13.00

The inspection sought to determine if the cosmetic intense pulsed light (IPL) service was delivering safe, effective and compassionate care and if the service was well led.

Is care safe?

Observations made, review of documentation and discussion with Miss Lorraine Jones, registered person/manager demonstrated that systems and processes were in place to ensure that care to patients was safe and avoids and prevents harm. Areas reviewed included staffing, recruitment and selection, safeguarding, laser safety, management of medical emergencies, infection prevention control and decontamination, and the general environment. No requirements or recommendations have been made.

Is care effective?

Observations made, review of documentation and discussion with Miss Jones demonstrated that systems and processes were in place to ensure that care provided in the establishment was effective. Areas reviewed included care pathway and communication. No requirements or recommendations have been made.

Is care compassionate?

Observations made, review of documentation and discussion with Miss Jones demonstrated that arrangements are in place to promote patients' dignity, respect and involvement in decision making. No requirements or recommendations have been made.

Is the service well led?

Information gathered during the inspection evidenced that there was effective leadership and governance arrangements in place which creates a culture focused on the needs clients in order to deliver safe, effective and compassionate care. Areas reviewed included organisational and staff working arrangements, the arrangements for policy and risk assessment reviews, the arrangements for dealing with complaints, incidents and alerts, insurance arrangements and the registered person's understanding of their role and responsibility in accordance with legislation. No requirements or recommendations have been made.

This inspection was underpinned by The Independent Health Care Regulations (Northern Ireland) 2005, The Regulation and Improvement Authority (Independent Health Care) (Fees and Frequency of Inspections) (Amendment) Regulations (Northern Ireland) 2011 and The Department of Health, Social Services and Public Safety (DHSPPS) Minimum Care Standards for Independent Healthcare Establishments (July 2014).

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Ms Jones, registered person/manager as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

1.2 Actions/enforcement taken following the most recent care inspection

There were no further actions required to be taken following the most recent inspection.

2.0 Service details

Registered organisation/registered person: Pretty Woman Miss Lorraine Jones	Registered manager: Miss Lorraine Jones
Person in charge of the establishment at the time of inspection: Miss Lorraine Jones	Date manager registered: 10 February 2010
Categories of care: PT(IL) Prescribed techniques or prescribed technology: establishments using intense light sources	

IPL equipment

Manufacturer: Laser SOS Aesthetics
Model: The Sapphire System
Serial Number: 0351

Laser protection advisor (LPA) - Irfan Azam (Lasernet)

Laser protection supervisor (LPS) - Miss Lorraine Jones

Medical support services - Dr Paul Myers

Authorised user - Miss Lorraine Jones

Types of treatment provided - hair removal

3.0 Methods/processes

Questionnaires were provided to clients prior to the inspection by the establishment on behalf of the RQIA. Miss Jones is the sole authorised user and confirmed she does not employ any staff in connection with the delivery of the IPL service. Prior to inspection we analysed the following records: complaints declaration and returned completed client questionnaires.

During the inspection the inspector met with Miss Lorraine Jones, the registered person/manager. A review of the IPL treatment room was also undertaken.

Records were examined during the inspection in relation to the following areas:

- staffing
- recruitment and selection
- safeguarding
- laser safety
- management of medical emergencies
- infection prevention and control
- information provision
- care pathway
- management and governance arrangements
- maintenance arrangements

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 2 September 2015

The most recent inspection of the establishment was an announced care inspection. The completed QIP was returned and approved by the care inspector.

4.2 Review of requirements and recommendations from the last care inspection dated 02 September 2015

Last care inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 5 Stated: First time	It is recommended that completed client questionnaires are retained in the establishment and available for review on inspection.	Met
	Action taken as confirmed during the inspection: Miss Jones confirmed she has arrangements in place to carry out a client survey in the coming weeks and the client questionnaires will be retained for review on inspection.	

4.3 Is care safe?

Staffing

Discussion with Miss Jones confirmed that she continues to be the sole authorised user of the IPL machine.

A register of the authorised users for the IPL is maintained and kept up to date.

A review of training records evidenced that the authorised user has 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 and protection of adults at risk of harm.

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

Recruitment and selection

As outlined Miss Jones is the sole authorised user. It was confirmed that should staff be recruited in the future, robust systems and processes have been developed to ensure that all recruitment documentation as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005 will be sought and retained for inspection.

A recruitment policy and procedure was in place which was comprehensive and reflected best practice guidance.

Safeguarding

Miss Jones was aware of the types and indicators of abuse and the actions to be taken in the event of a safeguarding issue being identified.

It was confirmed Miss Jones had received training in safeguarding adults as outlined in the Minimum Care Standards for Independent Healthcare Establishments July 2014

A policy and procedure was in place for the safeguarding and protection of adults. The 'Adult Safeguarding, Prevention and Protection in Partnership' guidance and details for the onward referrals were forwarded to Miss Jones following inspection. Miss Jones agreed to reflect the information in the establishment's safeguarding and protection of adult's policy

Laser safety

A laser safety file was in place which contained all of the relevant information in relation to 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 expires on 1 March 2017.

Laser procedures are carried out by a trained operator in accordance with a medical treatment protocol produced by Dr Paul Myers and revalidated on 20 October 2016. Systems are in place to review the medical treatment protocol on an annual basis. The medical treatment protocol contained the relevant information pertaining to the treatment being provided.

Up to date local rules were in place which have been developed by the LPA. The local rules contained the relevant information pertaining to the IPL equipment being used.

The establishment's LPA completed a risk assessment of the premises on 19 October 2016 and no recommendations were made

The laser protection supervisor (LPS) has overall responsibility for safety during IPL treatments and that a list of authorised users is maintained. Miss Jones has signed to state that she has read and understood the local rules and the medical treatment protocol.

When the 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 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 IPL equipment is in use but can be opened from the outside in the event of an emergency.

The IPL equipment is operated using a key. Arrangements are in place for the safe custody of the IPL key when not in use. Protective eyewear is available for the client and operator as outlined in the local rules.

The controlled area is clearly defined and not used for other purposes, or as access to areas, when treatment is being carried out. Laser safety warning signs are displayed when the laser equipment is in use and removed when not in use.

The establishment has an IPL register which is completed every time the equipment is operated and includes:

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

The IPL equipment was installed in the establishment in July 2016 and it was confirmed that there are arrangements in place to service and maintain the IPL equipment in line with the manufacturer's guidance.

Management of emergencies

As discussed, the authorised user has up to date training in basic life support which was undertaken in March 2016. Discussion with Miss Jones confirmed she was aware what action to take in the event of a medical emergency.

There was a resuscitation policy in place.

Infection prevention and control and decontamination procedures

The treatment room was clean and clutter free. Discussion with Miss Jones evidenced that appropriate procedures were in place for the decontamination of equipment between client use. Hand washing facilities were available and adequate supplies of personal protective equipment (PPE) were provided. As discussed previously, the authorised user has up to date training in infection prevention and control commensurate with her role.

Environment

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 was available which has been serviced within the last year. Portable appliance testing had been carried out on 13 January 2016. Miss Jones confirmed she was making arrangements to have fixed electrical wiring installation inspection carried out.

Client views

Twenty clients submitted questionnaire responses to RQIA. All indicated that they felt safe and protected from harm. Comments provided included the following:

- “Incredibly professional in approach to client safety.”
- “I was well informed about the treatment and felt safe and had confidence in the staff.”
- “Staff are very professional and aware of environment.”

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
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4.4 Is care effective?

Care pathway

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 establishment has a list of fees available for each 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, 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 includes the creation, storage, recording, retention and disposal of records and data protection.

Following inspection Miss Jones confirmed she had contacted the Information Commissioner's Office (ICO) in relation to registering with them and she was informed the establishment did not require to register, as the service did not provide clinical services. Miss Jones agreed to make a record of the contact.

Communication

As discussed, there is written information for clients that provides a clear explanation of any treatment and includes effects, side-effects, risks, complications and expected outcomes. Information is jargon free, accurate, accessible, up-to-date and includes the cost of the treatment.

The establishment has a policy for advertising and marketing which is in line with legislation.

Client views

All of the 20 clients who submitted questionnaire responses indicated that they get the right care, at the right time and with the best outcome for them. The following comment was provided:

- "Very happy with treatment."

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
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4.5 Is care compassionate?

Dignity respect and involvement with decision making

Discussion with Miss Jones regarding the consultation and treatment process, confirmed that clients are treated with dignity and respect. The consultation and treatment is provided in a private room with the client and authorised user present. Miss Jones confirmed dignity drapes and disposable underwear are provided. The client is given the opportunity to undress in private if necessary.

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 locked cabinet

Client satisfaction surveys are carried out by the establishment on an annual basis and the results of these are collated to provide a summary report which is made available to clients and other interested parties. An action plan is developed to inform and improve services provided, if appropriate. Miss Jones confirmed the annual client survey will be undertaken in November 2016.

Client views

All of the 20 clients who submitted questionnaire responses indicated that they are treated with dignity and respect and are involved in decision making affecting their care. The following comment was provided:

- “A very dignified approach to intimate treatment.”

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
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4.6 Is the service well led?

Management and governance

Miss Jones is the only authorised user in this establishment. Policies and procedures were available outlining the arrangements associated with IPL treatments. Observations made confirmed that policies and procedures were indexed, dated and systematically reviewed on a three yearly basis.

Discussion with Miss Jones demonstrated that arrangements were in place to review risk assessments.

A copy of the complaints procedure was displayed in the treatment room. Discussion with Miss Jones demonstrated good awareness of complaints management. A complaints questionnaire was forwarded by RQIA to the establishment for completion. The returned questionnaire indicated that no complaints have been received for the period 1 April 2015 to 31 March 2016.

It was confirmed that a system was in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies as appropriate. A system was in place to ensure that urgent communications, safety alerts and notices are reviewed and where appropriate, made available to key staff in a timely manner.

Discussion with Miss Jones confirmed that arrangements were in place to monitor, audit and review the effectiveness and quality of care delivered to clients at appropriate intervals.

It was confirmed that if required an action plan is developed and embedded into practice to address any shortfalls identified during the audit process.

A whistleblowing/raising concerns policy was available, however as stated Miss Jones is the sole authorised user.

Miss Jones demonstrated a clear understanding of her role and responsibility in accordance with legislation. Information requested by RQIA has been submitted within specified timeframes. It was 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 up to date and displayed appropriately.

Observation of insurance documentation confirmed that current insurance policies were in place.

Client views

All of the 20 clients who submitted questionnaire responses indicated that they felt that the service is well managed. Comments provided included the following:

- "Informative, cohesive team."
- "Excellent therapist and great results."
- "Pretty Woman is a well -run salon and all changes are made known to me."
- "The service is well managed and very good."

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
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5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the registered provider from their responsibility for maintaining compliance with the regulations and standards.



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