

Independent Healthcare Inspection (Announced)

Aspire Health and Beauty, Llandudno

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Copies of all reports, when published, will be available on our website or by contacting us:

In writing:

**Communications Manager
Healthcare Inspectorate Wales
Welsh Government
Rhydycar Business Park
Merthyr Tydfil
CF48 1UZ**

Or via

Phone: 0300 062 8163
Email: hiw@wales.gsi.gov.uk
Fax: 0300 062 8387
Website: www.hiw.org.uk

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1. Introduction

Healthcare Inspectorate Wales (HIW) is the independent inspectorate and regulator of all health care in Wales.

HIW's primary focus is on:

- Making a contribution to improving the safety and quality of healthcare services in Wales
- Improving citizens' experience of healthcare in Wales whether as a patient, service user, carer, relative or employee
- Strengthening the voice of patients and the public in the way health services are reviewed
- Ensuring that timely, useful, accessible and relevant information about the safety and quality of healthcare in Wales is made available to all.

HIW inspections of independent healthcare services seek to ensure services comply with the Care Standards Act 2000 and requirements of the Independent Health Care (Wales) Regulations 2011 and establish how services meet the National Minimum Standards (NMS) for Independent Health Care Services in Wales¹.

This report details our findings following the inspection of an independent health care service. HIW is responsible for the registration and inspection of independent healthcare services in Wales. This includes independent hospitals, independent clinics and independent medical agencies.

We publish our findings within our inspection reports under three themes:

- Quality of patient experience
- Delivery of safe and effective care
- Quality of management and leadership.

¹ The National Minimum Standards (NMS) for Independent Health Care Services in Wales were published in April 2011. The intention of the NMS is to ensure patients and people who choose private healthcare are assured of safe, quality services. <http://www.hiw.org.uk/regulate-healthcare-1>

2. Methodology

During the inspection we gather information from a number of sources including:

- Information held by HIW
- Interviews with staff (where appropriate) and Registered Manager of the service
- Conversations with patients and relatives (where appropriate)
- Examination of a sample of patient records
- Examination of policies and procedures
- Examination of equipment and the environment
- Information within the service's statement of purpose, patients' guide and website (where applicable)
- HIW patient questionnaires completed prior to inspection.

At the end of each inspection, we provide an overview of our main findings to representatives of the service to ensure that they receive appropriate feedback.

Any urgent concerns that may arise from an inspection will be notified to the registered provider of the service via a non-compliance notice². Any such findings will be detailed, along with any other improvements needed, within an appendix of the inspection report.

Inspections capture a snapshot on the day of the inspection of the extent to which services are meeting essential safety and quality standards and regulations.

² As part of HIW's non-compliance and enforcement process for independent healthcare, a non-compliance notice will be issued where regulatory non-compliance is more serious and relates to poor outcomes and systemic failing. This is where there are poor outcomes for people (adults or children) using the service, and where failures lead to people's rights being compromised. A copy of HIW's compliance process is available upon request.

3. Context

Aspire Health and Beauty is registered as an independent hospital because it provides Intense Pulsed Light Technology (IPL)³ treatments at 2 Victoria Buildings, Mostyn Avenue, Craig Y Don, Llandudno, LL30 1YU. The service was first registered in 2014.

At the time of inspection, the staff team included the Registered Manager as the sole laser operator and two other staff members. The service is registered to provide the following treatments to patients over the age of 18 years old:

Luminette IPL system for the following treatments:

- Hair removal
- Skin rejuvenation
- Acne treatment
- Vascular lesion removal
- Tattoo removal
- Skin pigmentation

³ IPL is a broad spectrum light source technology and is used by cosmetic and medical practitioners to perform various skin treatments for aesthetic and therapeutic uses.

4. Summary

There were no areas of non compliance identified at this inspection.

This is what we found the service did well:

- The service is committed to providing a positive experience for patients
- The service was clean and tidy
- Staff were polite, caring and listened to patients
- Patients were provided with enough information to make an informed decision about their treatment
- We saw evidence that patients were satisfied with their treatments and services provided
- The service had a system in place for seeking the views of patients
- Systems for governance and monitoring the quality of the service against the requirements of the regulations and standards
- Staff had up to date training in the use of IPL machine, Core of Knowledge and Adult Safeguarding
- Policies and procedures regularly reviewed with version controls.

5. Findings

Quality of patient experience

Patient information and consent (Standard 9)

We found evidence to indicate that patients were provided with enough information to make an informed decision about their treatment.

We were told that patients were provided with a verbal consultation prior to treatment, which included discussions of the risks and benefits. Patients were asked to provide written consent to each treatment and we saw examples of information and aftercare guidance given to patients.

We saw that patients were asked to complete medical history forms and any updates or changes were checked at each appointment.

We saw that a treatment register was maintained and kept fully up-to-date as required by the regulations.

Communicating effectively (Standard 18)

A patients' guide was available and included the required information in accordance with the regulations.

A statement of purpose was available and this included the relevant information about the service being offered. However, we found that the statement of purpose did not include details of the Core of Knowledge⁴ training undertaken and this was immediately added to the statement of purpose by the Registered Manager and a copy sent to HIW.

Citizen engagement and feedback (Standard 5)

We found that the clinic had a system in place for seeking patient feedback, as a way of monitoring the quality of service provided.

⁴ Core of Knowledge training is intended for operators using lasers and IPL systems for various skin treatments. The training includes information and guidance on the safe use of lasers and IPL systems.

Patients could provide feedback verbally after treatment, via clients' questionnaires, or via a comments box in reception. Comments and feedback could also be made anonymously. We saw that feedback was analysed annually and used internally to improve services. This is good practice in monitoring and maintaining the quality of care provided. We advised the Registered Manager of the need to make patients aware of these results and were informed that it was planned to display the results of patients' feedback in reception.

Before the inspection, the clinic was asked to give out HIW questionnaires to obtain patient views of the services provided. In total, 28 patient questionnaires were completed prior to the date of inspection. The questionnaires were unanimously positive. All patients strongly agreed or agreed with the statements that the clinic was clean and tidy and that staff were polite, caring, listened and provided enough information to patients about their treatment. The majority of patients rated the care and treatment received at the service as excellent. Patients' comments included the following:

'As a long term client I have had a range of treatments. New treatments are always explained thoroughly in advance and again during the treatment. I am always advised to contact the salon if I have any concerns either prior or after treatment. The laser hair removal treatment has been very effective and each stage of the treatment was explained in detail and I was given the opportunity to ask any questions prior to treatment. The salon has a high standard of hygiene and customer care. Thank you, I enjoy my treatments and they really are a treat'

'Following two treatments for pigmentation spot, it vanished completely. Very pleased with results'

'I have been a client of Aspire and [named staff] for 10 years and have always found her and her staff professional, honest, reliable and the salon to be spotless and an atmosphere in which you can totally relax. Keep up the great work, highly recommended'

'I have been coming to Aspire for a few years for various different treatments and I have always been 100% satisfied. Just recently I have had the laser hair removal treatment and I have been really happy with the results, and would definitely recommend them to come to [named staff] at Aspire'

Delivery of safe and effective care

Safe and clinically effective care (Standard 7) and medical devices, equipment and diagnostic systems (Standard 16)

We saw certificates showing that the Registered Manager had completed Core of Knowledge training and training in the use of the IPL machine. The Registered Manager has also completed additional qualifications in laser and IPL therapy.

We saw that there was a current contract in place with a Laser Protection Adviser and there were local rules detailing the safe operation of the machine. These rules had been recently reviewed by the Laser Protection Advisor and we saw that they had been signed by the Registered Manager which indicated their awareness and agreement to follow these rules.

A risk management policy was available for us to view on the day of inspection. The environmental risk assessments had recently been reviewed by the Laser Protection Adviser and we saw confirmation that all actions had been undertaken.

We saw that eye protection was available for patients and the laser operator. The eye protection appeared in visibly good condition and the Registered Manager confirmed that glasses were checked regularly for any damage.

We were told that the machine had been recently calibrated and serviced to ensure it was safe for use and the certificate was seen to confirm this.

There was a sign on the outside of the treatment room which indicated when the IPL machine is in use. The Registered Manager also confirmed that the treatment room door is locked when the machine is in use in order to prevent unauthorised access.

We were told that the machine is kept secure at all times, the activation key for the IPL machine was removed and stored securely when not in use, preventing unauthorised access.

We saw that medical protocols for the IPL machine were in place and these had been reviewed and signed by an expert medical practitioner.

Safeguarding children and vulnerable adults (Standard 11)

The service is registered to treat patients over the age of 18 years only. The Registered Manager confirmed that this was complied with.

The Registered Manager described how they would deal with any adult safeguarding issues. A safeguarding policy was in place. This needed to be updated, however, to include adult safeguarding and to provide clear written procedures to follow in the

event of an adult safeguarding concern. The Registered Manager agreed to update the policy immediately. This was done following our inspection. Staff training in the protection of vulnerable adults had also been completed.

Infection prevention and control and decontamination (Standard 13)

We saw the service was visibly very clean and tidy. We discussed the infection control arrangements in place with the Registered Manager and considered these to be appropriate to protect patients from cross infection.

Clinical waste was disposed of appropriately and we saw that the service had a contract in place with an approved waste carrier.

Managing risk and health and safety (Standard 22)

We saw evidence that Portable Appliance Testing (PAT) had been conducted, to help ensure that small electrical appliances were safe to use. We also saw evidence that there had been a building electrical wiring check within the last five years.

We looked at some of the arrangements for fire safety. The Registered Manager confirmed they had conducted fire safety training. Servicing labels on the fire extinguishers showed they were serviced annually and fire exits were clearly signposted. Fire risk assessments were in place and we saw evidence that these had been reviewed annually and the registered manager had undertaken weekly drills.

There was an emergency first aid kit available in the staff room and at least one member of staff was trained in first-aid.

Quality of management and leadership

Governance and accountability framework (Standard 1)

Aspire Health and Beauty is owned and run by the Registered Manager. We found evidence that the clinic had suitable systems in place to regularly assess and monitor the quality of service provided. This is because in accordance with the regulations, the clinic regularly sought the view of patients as a way of informing care, conducts audits of records to ensure consistency of information and assesses risks in relation to health and safety.

We looked at a sample of policies and procedures the service had in place and saw that these had been reviewed every three years. The policies and procedures contained version and / or review dates and were easily locatable. Any changes to policies or procedures are brought to the attention of staff at team meetings.

We were informed by the Registered Manager that there were clear lines of accountability at the service and staff were clear of their roles and responsibilities.

Dealing with concerns and managing incidents (Standard 23)

We saw that the service had a complaints policy in place and it provided the correct contact details of HIW in line with the regulatory requirements. Details of the complaints procedure had also been included within the statement of purpose.

We discussed with the Registered Manager the process of how concerns and complaints were captured at the service and we found that the process was in line with the service complaints procedure. We saw that the service had a complaints log in place and the Registered Manager informed us that any verbal or informal complaints would be handled in the same way as a formal complaint.

Records management (Standard 20)

We found that patient information was kept securely at the service. This is because paper records were kept in a lockable filing cabinet and stored in a locked room. The Registered Manager confirmed the records were locked when not in use.

Workforce recruitment and employment practices (Standard 24)

The Registered Manager had an enhanced Disclosure and Barring Service (DBS) check in place as required by the regulations.

The Registered Manager confirmed that suitable pre-employment checks were undertaken for any new members of staff and that staff received induction training.

Staff meetings were held regularly and annual staff appraisals were undertaken. Appraisals are important to ensure individuals have the right knowledge and skills to carry out their roles and any training is identified.

Following our inspection to Aspire Health and Beauty, no improvements have been identified. We were very satisfied with the arrangements at the clinic and the Registered Manager's knowledge and understanding of the requirements under the Independent Health Care Regulations 2011 and the National Minimum Standards.

We were able to confirm that treatments and services at the clinic were conducted in accordance with the statement of purpose and conditions of registration with HIW.

6. Next Steps

This inspection has not resulted in the need for the service to complete an improvement plan. This report will be published on HIW's website and will be evaluated as part of the ongoing inspection process.