

# **Independent Healthcare Inspection (Announced)**

## **Claire Price Beauty Clinic, Abergavenny**

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## Contents

1.	Introduction .....	2
2.	Methodology.....	3
3.	Context.....	4
4.	Summary.....	5
5.	Findings .....	6
	Quality of patient experience .....	6
	Delivery of safe and effective care .....	8
	Quality of management and leadership .....	11
6.	Next Steps .....	13
	Appendix A .....	14

## 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 Wales<sup>1</sup>.

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.

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<sup>1</sup> 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, patient's 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 notice<sup>2</sup>. Any such findings will be detailed, along with any other improvements needed, within Appendix A 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.

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<sup>2</sup> 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

Claire Price Beauty Clinic, Abergavenny is registered as an independent hospital because it provides Intense Pulsed Light Technology (IPL)<sup>3</sup> treatments at Beechcroft House, Hereford, Mardy, Abergavenny, NP7 6LE. The service was first registered in 2005.

At the time of inspection, the staff team included the Registered Manager and five other laser operators. The service is registered to provide the following treatments to patients over the age of 18 years:

Depilex L900 IPL system for the following treatments:

- Hair removal
- Thread vein
- Pigmentation
- Photo-rejuvenation
- Unevenness of the skin's surface
- Redness and open pores
- Acne
- Rosacea

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<sup>3</sup> 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

What the service does well:

- Patients were provided with enough information to make an informed decision about their treatment
- The service is committed to providing a positive experience for patients
- The service had a system for seeking the views of patients.

What needs to be done to improve the service:

- All laser operators' enhanced Disclosure Barring Service (DBS) checks to be renewed
- Updates to the patient's guide
- Review of Medical protocols

Further details of these improvements are provided in Appendix A.

Given the findings from this inspection, some improvements are needed in the quality assurance and governance arrangements of this service to ensure compliance with the relevant regulations and standards. This is important to ensure the safety and effectiveness of the service provided.

Whilst this has not resulted in the issue of a non compliance notice, there is an expectation that the Registered Manager take meaningful action to address these matters, as a failure to do so could result in HIW taking action for non-compliance with the regulations.

## 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 discussion of the risks and benefits. Patients were asked to provide written consent to 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. However, not all records we sampled had been signed by the patient or countersigned and dated by the laser operator.

#### ***Improvement needed***

***Consent forms for each treatment and any changes or updates to patients' medical history must be signed by the patient and the laser operator.***

#### **Communicating effectively (Standard 18)**

A patients' guide document was available but this was in need of updating in accordance with the regulations. The main issues were:

- The terms and conditions in respect of services to be provided for patients, including the amount and method of payment of charges by patients for all aspects of their treatments
- A summary of the complaints procedures
- A summary of the views of patients and others obtained in accordance with the regulations

#### ***Improvement needed***

***The patients' guide must be updated in accordance with the regulations***

A statement of purpose was available that included the relevant information about the service being offered.



## **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.

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 or on their website.

Before the inspection, the clinic was asked to give out HIW questionnaires to obtain patient views of the services provided. In total, 20 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:

'Since coming to the clinic I have found all the staff professional and friendly. All treatments carried out have been conducted in an excellent manner and I have no complaints.'

'Been having IPL hair removal for past year. Really happy with results and the way I've been treated. Will be looking to start new area as so confident with the treatment and the professionalism of the salon.'

'Great staff, always smiling. Clean and tidy salon with high standards.'

'Lovely therapist and professional treatment. Really pleased with results'

## *Delivery of safe and effective care*

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

We saw evidence that the Registered Manager and all laser operators had completed up-to-date training on the use of the laser machine and Core of Knowledge<sup>4</sup> training and we saw all relevant training certificates.

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 only recently been reviewed by the Laser Protection Advisor and as such had not yet been signed by all laser operators to indicate their awareness and agreement to follow these rules. However, the Registered Manager immediately arranged for all laser operators to sign the local rules following our inspection.

A risk management policy was available for us to view on the day of inspection. The environmental risk assessments had 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 operators. 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 card for the IPL machine was removed and stored securely when not in use, preventing unauthorised access.

The medical protocols seen on the day of our visit for the IPL machine were in need of review. We advised the Registered Manager to review the protocols in place and arrange for these to be signed off by a GMC<sup>5</sup> registered medical professional.

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<sup>4</sup> 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.

### ***Improvement needed***

***The Registered Manager must ensure that the medical protocols are reviewed and signed by an appropriate 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 the new contact details for the local safeguarding team. 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 wiring check within the last five years and we saw the annual gas certificate evidencing that a gas safety check had recently been undertaken.

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

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<sup>5</sup> The General Medical Council (GMC) is a public body that maintains the official register of medical practitioners within the United Kingdom. Its chief responsibility is 'to protect, promote and maintain the health and safety of the public' by controlling entry to the register, and suspending or removing members when necessary.

signposted. Fire risk assessments were in place and we saw evidence that these had been reviewed annually and the Registered Manager had undertaken six monthly drills.

There was an emergency first aid kit available and three members of staff were trained in first-aid.

## *Quality of management and leadership*

### **Governance and accountability framework (Standard 1)**

Claire Price Beauty Clinic 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 Registered Manager 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 could be easily located by staff. 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 filing cabinet and the Registered manger Manager confirmed they were locked when not in use.

### **Workforce recruitment and employment practices (Standard 24)**

The Registered Manager and all five laser operators' enhanced Disclosure Barring Service (DBS) checks were due for renewal and the Registered Manager agreed to undertake these checks immediately.

### ***Improvement needed***

***Registered Manager to ensure all laser operators' enhanced DBS checks are renewed***

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 every eight weeks 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.

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.

Given the findings from this inspection, some improvements are needed in the quality assurance and governance arrangements of this service to ensure ongoing compliance with the relevant regulations and standards.

The operation of sound quality assurance and governance arrangements and a registered provider's timely response to remedy issues of concern are important indicators of a provider's ability to run their service with sufficient care, competence and skill. There is an expectation, therefore, that the Registered Manager take meaningful action to address these matters, as a failure to do so could result in HIW taking action for non-compliance with regulations.

## 6. Next Steps

This inspection has resulted in the need for the service to complete an improvement plan in respect of improvements identified within this report. The details of this can be seen within Appendix A of this report.

The improvement plan should clearly state how the improvement identified at Claire Price Beauty Clinic, Abergavenny will be addressed, including timescales.

The improvement plan, once agreed, will be published on HIW's website and will be evaluated as part of the ongoing inspection process.

## Appendix A

### Improvement Plan

**Service:** Claire Price Beauty Clinic, Abergavenny

**Date of Inspection:** 29 November 2016

Page Number	Improvement Needed	Regulation / Standard	Service Action	Responsible Officer	Timescale
<b>Quality of Patient Experience</b>					
Page 6	Consent forms for each treatment and any changes or updates to patients' medical history must be signed by the patient and the laser operator.	Regulation 9 (4) Standard 9	Standards Met Immediate action taken	Claire Price	0
Page 6	The patients' guide must be updated in accordance with the regulations	Regulation 7	In working Progress Awaiting proof from printing company	Claire Price	2 weeks
<b>Delivery of safe &amp; effective care</b>					



Page Number	Improvement Needed	Regulation / Standard	Service Action	Responsible Officer	Timescale
Page 8	The Registered Manager must ensure that the medical protocols are reviewed and signed by an appropriate expert medical practitioner	Regulation 15 Standard 7	Standards Met. Signed by medical expert 25/1/2017	Claire Price	0
<b>Quality of staffing, management &amp; leadership</b>					
Page 11	Registered Manager to ensure all laser operators' enhanced DBS checks are renewed	Schedule 2	In Working Progress – all paperwork being sent to Anagram people	Claire Price	3 weeks

### Service Representative:

**Name (print):** MR CHRIS LODGE

**Title:** PRACTICE MANAGER AT LODGE DENTAL

**Date:** 25/1/2017