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6th August 2014

Dear Ms Owen,

Re: Healthcare Inspectorate Wales (HIW) unannounced visit to New Image Beauty Clinic on 14th July 2014

As you are aware Healthcare Inspectorate Wales (HIW) undertook an unannounced visit to New Image Beauty Clinic on 14th July 2014.

Background

The inspection visit focused upon the analysis of a range of documentation, discussion with the manager, and a tour of the premises. The clinic was found to be of a modern design and clean with equipment in place.

The Statement of Purpose and Patients Guide were available and contained most of the relevant information required, however the HIW address needed to be updated. This has now been amended to include the required information. It was not possible to ascertain whether these documents were given to patients and the information was not available in the waiting areas. Patient satisfaction information was also not available, but we were told that this information had been collected and was located at the Registered Managers' home address. This was not available for review at the time of the inspection.

Patient records were viewed and contained consent forms, treatment regimes, and information about medical history which was updated at each visit. There was evidence of an annual audit of patients' records and all relevant policies were present. There was no evidence of training or updates in data management, health and safety, and infection control and the need for this was discussed at the time of the inspection. The registered manager can confirm that actions have already taken place regarding some areas of training. It is now noted down in the clinic register when fire training with a new member of staff was undertaken and when this requires updating.

Protection of Vulnerable Adults (POVA) and Basic Life Support (BLS) training are needed and this was also discussed at the time of inspection. The establishment was clean and tidy but there was no evidence of cleaning schedules or audit since 2009. Risk assessments were in place; however there was no evidence of these having been reviewed since 2010. Staff files were reviewed and Disclosure Barring Service (DBS) data was found to be in need of updating and staff appraisals had not been undertaken since 2010.

Premises, Environment and Facilities

The registered accommodation was located on the second floor of the premises, within very modern and pleasantly decorated premises.

The Ellipse Lite SPT Intense Pulsed Light (IPL) machine was registered for the procedures of hair reduction, skin rejuvenation, vascular and acne. The layout of the room appeared to be in accordance with the Local Rules. Medical protocols were available, and these had been issued on 11th February 2012 and valid until 11th February 2015. Local Rules were also available, and these had been issued on 12th February 2014, valid until 11th February 2015. The Local Rules required completion in respect of the Adverse Incident Procedure.

A Laser Protection Adviser (LPA) had been appointed for the period 12th February 2014 until 11th February 2105, but there was no copy of a report for a current site environment visit. The last report viewed was dated 28th May 2012. The last training information for the Laser Protection Supervisor was 2009/2010. It is usual to have re-training after a three year period, and the LPA should be consulted appropriately.

A treatment record book was available, and due to the restriction on one A4 leaf, there was only room for the operator's initials. Whilst there is nothing wrong with this arrangement, the initials should be cross referenced to the operators name in the preface of the book. It is not uncommon to use both leaves of the book, to run information across the two pages and provide more room.

Suitable warning signs were available to place on the outside of the door, prior to treatment, and a CO2 fire extinguisher was available in the corridor area, adjacent to the treatment room. Two pairs of protective eyewear were present in the room, one appeared to be to CE4 standard, and the other to a stronger specification. The Local Rules of February 2012, state the protective eyewear required, and this should be adhered to.

The IPL machine had been serviced in April 2014, and it was noted that there were a few errors that Ellipse hoped to fix with a software upgrade, which should refurbish the screen. There were no adequate servicing or testing records available for the fire alarm or emergency lighting systems since March 2012 and no current copies of certificates were available. Portable Appliance Testing (PAT) and gas safety

inspections appeared were last carried out in 2012, and no current copies of certificates were available. HIW have been informed that all electric equipment had a PAT test in May and all the paperwork is now available in the salon. A gas safe certificate is now available in the salon.

Fire alarm testing and lighting have also been updated and are now kept in the clinic register. The alarm and emergency lighting have been professionally serviced and the certificates are now available in the salon.

The visit highlighted areas that are noteworthy and include:

- Care is person centred, privacy, dignity, and individuality are considered
- Patients' notes were informative and contemporaneous

Concerns:

- Update training in infection control, health and safety, data protection, POVA and BLS are needed
- Cleaning schedules audit needed
- Patient satisfaction survey needed
- Risk assessments require review
- A considerable number of certificates were not available for current testing of services installations

New Requirements from this Inspection

Action Required	Regulation Number
Update training in POVA and Basic Life Support are needed	Regulation 20(1)(a)(b) and 20 (2) (a) (b)
Statement of Purpose requires updating with HIW address	Regulation 8 Completed. July 2014
Patient Guide requires updating with HIW address	Regulation 7 Completed. July 2014
Mandatory training showed no clear records of training delivered	Regulation 20(1)(a)(b) & 20 (2) (a) (b)
CRB status is required	Regulation 20(1)(a)(b)&20 (2) (a) (b)

Action Required	Regulation Number
There were no records of staff appraisals having taken place	Referred to registration team, HIW Regulation 9 (1)(n) Completed July 2014
There was no record for patients satisfaction survey results	Regulation 19(2)(b)(1)&(2)(c)(i)(ii)
A risk management system required	Regulation 9(1) (e) (k) C22 (1)(3)
Consult LPA regarding training requirements of all operators of the IPL	Regulation 45(1) Completed July 2014?
Ensure that operators initials are entered against their name in the preface of the Treatment Register	Regulation 45(2)
Adhere to the use of correct protective eyewear in accordance with specified requirements.	Regulation 45(3)
Carry out appropriate weekly and 6/12 monthly servicing of fire alarm installation	Regulation 26(4)(a) Completed July 2014
Carry out monthly and 6/12 monthly testing of emergency lighting installation	Regulation 26(4)(b) Completed July 2014
Carry out a gas servicing and safety inspection	Regulation 26(2)(a) Completed July 2014

HIW would like to thank the staff members for their time and co-operation during the visit.

Please do not hesitate to contact me should you wish to discuss the content of this letter.

Yours sincerely



Phil Price
Inspection Manager