

Independent Healthcare Inspection Report (Announced)

The Laser Company, Tredegar

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Healthcare Inspectorate Wales (HIW) is the independent inspectorate and regulator of healthcare in Wales

Our purpose

To check that healthcare services are provided in a way which maximises the health and wellbeing of people

Our values

We place people at the heart of what we do.

We are:

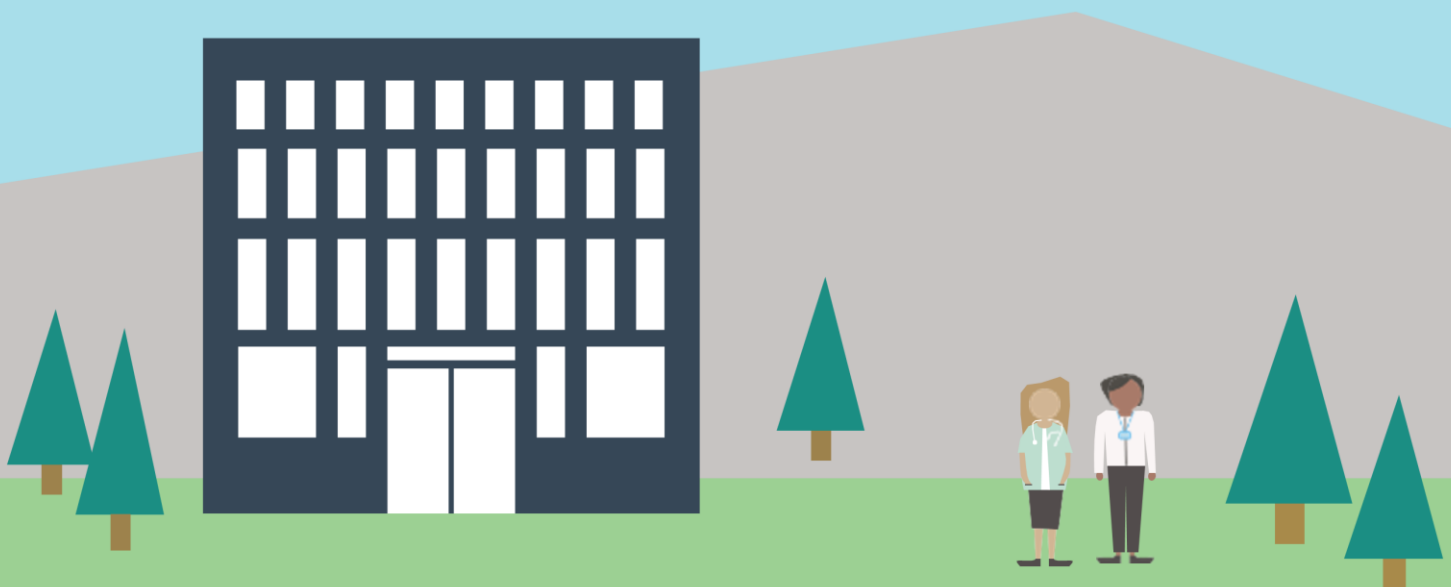
- Independent - we are impartial, deciding what work we do and where we do it
- Objective - we are reasoned, fair and evidence driven
- Decisive - we make clear judgements and take action to improve poor standards and highlight the good practice we find
- Inclusive - we value and encourage equality and diversity through our work
- Proportionate - we are agile and we carry out our work where it matters most

Our goal

To be a trusted voice which influences and drives improvement in healthcare

Our priorities

- We will focus on the quality of healthcare provided to people and communities as they access, use and move between services.
- We will adapt our approach to ensure we are responsive to emerging risks to patient safety
- We will work collaboratively to drive system and service improvement within healthcare
- We will support and develop our workforce to enable them, and the organisation, to deliver our priorities.



Contents

1. What we did	5
2. Summary of inspection	6
3. What we found	8
• Quality of Patient Experience.....	8
• Delivery of Safe and Effective Care.....	11
• Quality of Management and Leadership	13
4. Next steps.....	14
Appendix A - Summary of concerns resolved during the inspection	15
Appendix B - Immediate improvement plan.....	16
Appendix C - Improvement plan	17

1. What we did

Full details on how we inspect the NHS and regulate independent healthcare providers in Wales can be found on our [website](#).

Healthcare Inspectorate Wales (HIW) completed an announced inspection of The Laser Company on 14 September 2023.

The inspection was conducted by a HIW Healthcare Inspector.

During the inspection we invited patients or their carers to complete a questionnaire to tell us about their experience of using the service. A total of 17 were completed.

Where present, quotes in this publication may have been translated from their original language.

Note the inspection findings relate to the point in time that the inspection was undertaken.

This (full) report is designed for the setting, and describes all findings relating to the provision of high quality, safe and reliable care that is centred on individual patients.

A summary version of the report, which is designed for members of the public can be found on our [website](#).

2. Summary of inspection

Quality of Patient Experience

Overall summary:

It was clear that The Laser Company was committed to providing a positive experience for patients in a pleasant and well-maintained environment. Patients expressed positive feedback about the service and treatments that they had received.

This is what the service did well:

- The setting was clean, tidy, and maintained to a high standard
- The registered manager was committed to providing a professional service and positive experience for their clients
- The setting was accessible for patients with mobility difficulties.

Delivery of Safe and Effective Care

Overall summary:

It was evident that the service provided patients with safe and effective care. Suitable arrangements were in place for the maintenance and on-going safety of the IPL/laser equipment. We found that patient records were stored securely. They were well maintained, containing evidence of consent to treatment and completed medical history forms.

This is what the service did well:

- The treatment room was clean, well equipped and fit for purpose
- Patient records were stored securely and maintained to a good standard.

Quality of Management and Leadership

Overall summary:

The registered manager had the appropriate skills and relevant knowledge to deliver safe treatment to patients. We saw evidence of a comprehensive registers of policies and procedures in place which was up-to-date and annually reviewed.

This is what the service did well:

- An up-to-date complaints policy was in place and included HIW contact details

- The registered manager had completed Core of Knowledge training and manufacturer training in the use of the laser machines.

Details of the concerns for patient's safety and the immediate improvements and remedial action required are provided in [Appendix B](#).

3. What we found

Quality of Patient Experience

Patient Feedback

Before our inspection we invited the practice to hand out HIW questionnaires to patients to obtain their views on the service provided at the practice. In total, we received 17 completed questionnaires.

Some of the comments provided by patients on the questionnaires included:

“Beautiful environment, lovely and professional staff. Always have amazing results.”

“The staff made me feel extremely comfortable throughout the entire process.”

Health protection and improvement

We saw evidence of patients providing a comprehensive account of their medical history during their initial consultation. At each following appointment, patients either confirmed there were no changes to their medical history or updated the form accordingly and signed once complete.

All patients who completed questionnaires said that their medical history was checked before undertaking treatment. They also confirmed that they were given a patch test before receiving new treatment.

Dignity and respect

The Laser Company operates out of a beauty clinic, in which there is a designated room for the registered manager to conduct all consultations and treatments. This room is kept locked during all appointments and is not accessed by the other staff working at the salon. The laser provider informed us that they would leave the room prior to treatments if a patient needed to get undressed. They would then do the same to allow them to redress after their treatment.

We were informed that, should a patient require a chaperone, they would be able to attend the appointment and suitable eye wear would be provided.

The premises and the laser treatment room offered disabled access. The patient toilet was not wheelchair accessible, however we were told that this was communicated to any relevant individuals before arrival at the setting.

All questionnaire respondents felt they were treated with dignity and respect and felt staff listened to them/answered their questions.

Communicating effectively

We saw evidence of extensive information available for patients regarding the treatments provided at the setting. This was found both on the setting website, in the patient information leaflet and the statement of purpose.

Appointments could be obtained either online through social media or the setting website, via telephone or in person by visiting the premises.

The registered manager informed us that, any patients wishing to communicate in Welsh or another language could be accommodated, either by a translator attending the appointment or through the google translate app.

During the inspection, we recommended that the patient guide be updated to inform patients that Welsh speakers and other languages could be accommodated at the setting. We saw evidence that these changes had been made to the document during our visit.

Patient information and consent

The registered manager confirmed that patients are provided with all relevant information during their consultation. We saw evidence of completed consultation forms in patient files, whereby patients sign to confirm they had been fully informed of the treatment process, as well as the benefits, risks and the likely outcome of the treatment. We also confirmed that consent was taken prior to the initial treatment and at subsequent appointments.

All questionnaire respondents informed that they had received enough information to understand the treatment options available to them, as well as the risks and benefits. All patients also confirmed that they were given adequate aftercare instructions.

Care planning and provision

We saw evidence of a treatment register in place, which was well maintained and up to date. Our review of a sample of patient records also confirmed that these were maintained to a good standard, including skin type, consent to treatment and medical history.

Equality, diversity and human rights

The Laser Company operates out of a beauty salon. The premises offered good accessibility, with the treatment room on the ground floor and enough space for wheelchair access to treatment rooms. There was also plenty of street parking available around the setting.

The registered manager informed us that, when treating transgender patients, preferred pro nouns and names are always used during consultations and appointments.

We reviewed the equality and diversity policy. The policy was detailed, up to date and we saw evidence of annual reviews taking place.

Citizen engagement and feedback

The registered manager informed us that feedback could be provided via social media and google reviews. We confirmed that the patient guide encourages individuals to provide feedback following treatments received. The registered manager also confirmed that feedback is encouraged via the Laser Company's social media pages.

Delivery of Safe and Effective Care

Managing risk and health and safety

There was evidence of regular portable appliance testing (PAT) being carried out at the setting. We also saw evidence of an up-to-date wiring check and were provided with an in-date gas safety certificate.

We reviewed the arrangements for fire safety. The premises only had one door, which was clearly signposted as a fire exit. The practice kept a fire extinguisher in a designated space, as outlined on the fire safety plan for the building. The fire extinguisher had been purchased locally and had not yet been serviced. However, during our inspection, the registered manager purchased and collected new fire extinguisher and agreed to either buy a new one annually or arrange for an annual service. The fire risk assessment was also updated during our visit to confirm future arrangements and the receipt was kept of evidence of date purchased.

There was an emergency first aid kit available, and the contents were all suitable and in date. During the time of our inspection, the registered manager, who is the only staff member at The Laser Company, had not completed first aid training. However, we saw evidence of the registered manager having booked the training whilst we were on site. We were also provided with evidence that they had completed first aid training the day after our visit.

Infection prevention and control (IPC) and decontamination

We saw that the setting was visibly very clean and tidy. The registered manager provided us with a copy of an up-to-date infection control policy and completed and detailed cleaning schedules for the setting. We were told that cleaning is carried out in between each client, including the laser machine, bed, and any disposable razors used are placed in the designated sharps box. A contract was in place for both sharps' boxes and clinical waste disposal.

All patients who completed questionnaires felt that infection and prevention control measures were being followed and that the setting was 'very clean'.

Safeguarding children and safeguarding vulnerable adults

The setting had a comprehensive safeguarding policy in place, which was up to date and contained details of the local safeguarding team. The document also clearly outlined the procedures to follow in the event of a safeguarding concern.

We also saw evidence that the registered manager had completed level 3 adult safeguarding training. The manager confirmed that no treatments are provided to anyone under the age of 18.

Medical devices, equipment and diagnostic systems

Our findings confirmed that the laser machine had an annual service and calibration certificate in place, both of which were in date.

A contract was in place with a Laser Protection Adviser (LPA) and local rules detailing the safe operation of the machines. The local rules had been regularly reviewed by the LPA and signed by the laser operator.

Safe and clinically effective care

We inspected the protective eyewear provided for clients during appointments. All pairs were in good condition and consistent with the local rules.

There was one treatment room in the premises, which had a 'Do Not Enter' sign on the door for when treatments were being carried out. The registered manager also informed us that the key in the back of the machine would be removed and kept securely to prevent unauthorised access.

The registered manager informed us of the pre-treatment checks carried out with each client. Patch testing is carried out for every client prior to treatment, which was recorded in patient files. We also saw evidence of comprehensive medical check lists completed for each patient which included a check for any photo-sensitive medications.

Participating in quality improvement activities

The registered manager informed us that they regularly review feedback provided online. No negative feedback has been received since the business started up, however they continue to monitor this in the event any theme or trends emerge.

Records management

Patient records were kept in paper files and stored securely in a locked cupboard in the treatment room. We examined five samples of patient records and found that these were maintained to a good standard.

Quality of Management and Leadership

Governance and accountability framework

The Laser Company is overseen by the registered manager, whom is the only laser operator working at the setting.

We saw evidence of a comprehensive policies and procedures register in place. All policies reviewed were in date and included dates for annual review.

Dealing with concerns and managing incidents

We confirmed with the registered manager that there had been no concerns or complaints reported since the business has been set up.

There was a comprehensive complaints procedure in place, clearly displayed in the waiting area. The procedure was up-to-date and included contact details for HIW.

Workforce planning, training and organisational development

We saw evidence that the registered manager had completed Core of Knowledge training and manufacturer training in the use of the laser machines.

Workforce recruitment and employment practices

We confirmed that the registered manager had an in-date Disclosure and Barring Services (DBS) check in place.

4. Next steps

Where we have identified improvements and immediate concerns during our inspection which require the service to take action, these are detailed in the following ways within the appendices of this report (where these apply):

- Appendix A: Includes a summary of any concerns regarding patient safety which were escalated and resolved during the inspection
- Appendix B: Includes any immediate concerns regarding patient safety where we require the service to complete an immediate improvement plan telling us about the urgent actions they are taking
- Appendix C: Includes any other improvements identified during the inspection where we require the service to complete an improvement plan telling us about the actions they are taking to address these areas.

The improvement plans should:

- Clearly state how the findings identified will be addressed
- Ensure actions taken in response to the issues identified are specific, measurable, achievable, realistic and timed
- Include enough detail to provide HIW and the public with assurance that the findings identified will be sufficiently addressed
- Ensure required evidence against stated actions is provided to HIW within three months of the inspection.

As a result of the findings from this inspection the service should:

- Ensure that findings are not systemic across other areas within the wider organisation
- Provide HIW with updates where actions remain outstanding and/or in progress, to confirm when these have been addressed.

The improvement plan, once agreed, will be published on HIW's [website](#).

Appendix A - Summary of concerns resolved during the inspection

The table below summaries the concerns identified and escalated during our inspection. Due to the impact/potential impact on patient care and treatment these concerns needed to be addressed straight away, during the inspection.

Immediate concerns Identified		Impact/potential impact on patient care and treatment	How HIW escalated the concern	How the concern was resolved
No immediate concerns were identified on this inspection				

Appendix B - Immediate improvement plan

Service: The Laser Company

Date of inspection: 14/09/23

The table below includes any immediate non-compliance concerns about patient safety identified during the inspection where we require the service to complete an immediate improvement plan telling us about the urgent actions they are taking.

Improvement needed	Standard/Regulation	Service action	Responsible officer	Timescale
No immediate concerns were identified during this inspection				

The following section must be completed by a representative of the service who has overall responsibility and accountability for ensuring the improvement plan is actioned.

Service representative:

Name (print):

Job role:

Date:

Appendix C - Improvement plan

Service: The Laser Company

Date of inspection: 04/09/23

The table below includes any other improvements identified during the inspection where we require the service to complete an improvement plan telling us about the actions they are taking to address these areas.

Improvement needed	Standard/ Regulation	Service action	Responsible officer	Timescale
No improvements identified during this inspection				

The following section must be completed by a representative of the service who has overall responsibility and accountability for ensuring the improvement plan is actioned.

Service representative

Name (print):

Job role:

Date: