

***We are the regulator:** Our job is to check whether hospitals, care homes and care services are meeting essential standards.*

Waterside Aesthetics

60 Bridge House, Waterside, Shirley, Solihull,
B90 1UD

Tel: 01217336195

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We inspected the following standards as part of a routine inspection. This is what we found:

Consent to care and treatment	✓	Met this standard
Care and welfare of people who use services	✓	Met this standard
Safety, availability and suitability of equipment	✓	Met this standard
Supporting workers	✓	Met this standard
Assessing and monitoring the quality of service provision	✓	Met this standard

Details about this location

Registered Provider	Waterside Aesthetics Limited
Registered Manager	Mrs. Helen Hannigan
Overview of the service	Waterside Aesthetics provides skin treatments and laser hair removal treatment. The clinic is open Monday to Saturday and is staffed by the manager who is a registered nurse, a laser therapist and reception staff.
Type of services	Acute services without overnight beds / listed acute services with or without overnight beds Doctors consultation service Doctors treatment service
Regulated activity	Surgical procedures

When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

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Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 26 October 2012, observed how people were being cared for and talked with staff.

What people told us and what we found

Waterside Aesthetics clinic is based in Dickens Heath Village Centre.

The clinic is open Monday to Saturday and is staffed by the manager who is a registered nurse, a laser therapist and reception staff.

Waterside Aesthetics provides skin treatments such as botox and fillers and laser hair removal treatment.

The clinic has a welcoming reception and waiting area, and a number of treatment rooms including the laser room used for hair removal treatments.

On the day of our inspection there were no clients waiting for treatment. We spoke to staff and looked at the facilities on offer. Our findings show that the service is compliant.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Consent to care and treatment

✓ Met this standard

Before people are given any examination, care, treatment or support, they should be asked if they agree to it

Our judgement

The provider was meeting this standard.

Before people received any care or treatment they were asked for their consent and the provider acted in accordance with their wishes.

Reasons for our judgement

The clinic opened six days a week including weekends. This gave people a flexible choice of days and times that suited them for their appointment.

The clinic consisted of a number of treatment rooms for initial consultations and skin treatments. There was also a laser room used for hair removal treatment.

The waiting area was clean and comfortable. There were a number of leaflets about the service available to people in the waiting area.

People who were interested in the clinic's services were booked in for an initial consultation. This was an in depth discussion about the person's requirements from treatment and whether the clinic could meet those needs.

The manager told us there were some instances where laser treatment or skin treatments would not be suitable for some people. For example, if a person had acne or eczema, they were referred to a dermatologist for treatment. Or they may be taking medication that was photo sensitive and could react adversely to laser treatment.

A thorough assessment was then undertaken taking into account the person's current health status, past medical history, medications taken and a physical assessment of the area to be treated.

At this point people were given written information about the service and the treatment available to them. The implications of the treatments were clearly explained to them. A consent form was then signed by the person. All documentation was signed and dated. A copy was given to the person to enable them to make an informed decision about their treatment. A second copy was kept by the clinic in the person's individual treatment file.

People should get safe and appropriate care that meets their needs and supports their rights

Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

Reasons for our judgement

Treatment records were kept for people currently using the service. They contained all the relevant signed consent forms and assessments. Each treatment was noted and entered into their file; it was also entered onto the clinic's computer system.

A progress review was held to discuss how the treatment was going, if the treatment was giving the desired effect, or if alternative treatments needed to be looked at.

A full aftercare service was provided, and the clinic operated an out of hours call line where people could speak to the registered nurse with any queries they may have had.

The clinic had excellent links with a number of health professionals including doctors, where treatments and procedures could be discussed.

Although we were unable to speak to people currently undertaking treatment, the staff we spoke to were very friendly and extremely professional.

People should be safe from harm from unsafe or unsuitable equipment

Our judgement

The provider was meeting this standard.

People were protected from unsafe or unsuitable equipment.

Reasons for our judgement

The treatment rooms were clean and tidy. Treatment files and documentation were stored in locked filing cabinets.

Skin treatments such as botox were in sterile sealed and dated packs, and stored in the medication fridge. All other equipment in the treatment room was stored away in locked cupboards.

The laser was cleaned after each use, and between each person. The laser was fully serviced annually.

Supporting workers

✓ Met this standard

Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Reasons for our judgement

Staff working at the clinic received a full programme of continuous training.

Mandatory training was undertaken by all staff annually. Specialist training was undertaken by the nurse and therapists who carried out the treatments.

Training in skin treatments was undertaken annually to ensure staff were following the correct procedures safely.

The registered nurse kept professionally updated and attended conferences and workshops throughout the year to ensure her knowledge remained current.

Assessing and monitoring the quality of service provision

✓ Met this standard

The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

Our judgement

The provider was meeting this standard.

The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people who use the service and others.

Reasons for our judgement

We spoke with the manager about the systems they used to monitor the quality of the service they provided.

The clinic had over 3000 people using the services. They had people from Hong Kong and Europe who made specific visits to use the services provided.

The clinic used a client satisfaction survey to gain the views of people who used the service. All the comments received were very positive.

The registered nurse carried out monthly audits on the documentation, treatment files and laser logbook. This enabled the service to check that all documentation was completed correctly.

Staff underwent regular assessments and clinical supervisions to assess their competence, and to identify training needs.

The clinic had recently been awarded a national accolade of 'Aesthetic Clinic of the Year'. The manager was also shortlisted for 'Aesthetic Nurse of the Year'. Both of these awards were based on feedback and nominations from people using the clinic's services.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of dentists and other services at least once every two years. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. This could be a minor, moderate or major impact.

Minor impact – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

Contact us

Phone: 03000 616161

Email: enquiries@ccq.org.uk

Write to us
at: Care Quality Commission
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

Website: www.cqc.org.uk

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