

# Review of compliance

Mary Anne Whitehead Laserase Croydon	
<b>Region:</b>	London
<b>Location address:</b>	Brigstock Medical Practice 141 Brigstock Road Thornton Heath Surrey CR7 7JN
<b>Type of service:</b>	Doctors consultation service Doctors treatment service
<b>Date of Publication:</b>	February 2012
<b>Overview of the service:</b>	Laserase Croydon is located in a General Practitioners practice and offers laser and intense pulsed light treatment for hair removal, tattoo removal, acne treatment and thread vein removal.

# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Laserase Croydon was meeting all the essential standards of quality and safety.**

The summary below describes why we carried out this review, what we found and any action required.

### Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

### How we carried out this review

We reviewed all the information we hold about this provider, talked to staff and talked to people who use services.

### What people told us

A person who uses the service told us that staff were always friendly. Their treatment was explained to them and they had been consulted at each appointment about the cost of the treatment. They told us they received very good aftercare. They told us their privacy was always respected and the practice was always comfortable and clean and tidy. They told us they were aware of the services complaints procedure however had never had call to use it.

### What we found about the standards we reviewed and how well Laserase Croydon was meeting them

#### **Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run**

The registered manager had ensured that people who used the service were clear about the treatment options available to them and they were involved and consulted at every stage.

#### **Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights**

The registered manager demonstrated that people's needs were assessed appropriately and that planning and delivery of treatment met their needs and protected their welfare.

#### **Outcome 07: People should be protected from abuse and staff should respect their human rights**

The registered manager had ensured that patients were cared for in a manner that safeguarded them and protected their rights.

**Outcome 08: People should be cared for in a clean environment and protected from the risk of infection**

The registered manager had ensured that people who use the service received care and treatment in a safe and hygienic environment.

**Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills**

The registered manager demonstrated that staff operating different types of lasers and other equipment used at the service had the skills, qualifications and experience to meet the needs of people who use the service.

**Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care**

The registered manager demonstrated that laser equipment was regularly serviced, risks were being appropriately assessed and managed and that the quality of the service was effectively monitored.

**Other information**

Please see previous reports for more information about previous reviews.

**What we found  
for each essential standard of quality  
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

**Compliant** means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

## Outcome 01: Respecting and involving people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

- \* Understand the care, treatment and support choices available to them.
- \* Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- \* Have their privacy, dignity and independence respected.
- \* Have their views and experiences taken into account in the way the service is provided and delivered.

### What we found

#### Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

#### Our findings

##### What people who use the service experienced and told us

A person who uses the service told us that staff were always friendly. Their treatment was explained to them and they had been consulted at each appointment about the cost of the treatment. They told us they received very good aftercare. They told us their privacy was always respected and the practice was always comfortable and clean and tidy. They told us they were aware of the services complaints procedure however had never had call to use it.

##### Other evidence

The registered manager is a General Practitioner. They showed us a Clients Guide to services at Laserase. The guide included information on terms and conditions, consent, a clinical procedures price list, the complaints procedure and clients surveys. They showed us some completed patient satisfaction questionnaires.

##### Our judgement

The registered manager had ensured that people who used the service were clear about the treatment options available to them and they were involved and consulted at every stage.

## Outcome 04: Care and welfare of people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

### What we found

#### Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

#### Our findings

##### What people who use the service experienced and told us

A person who uses the service spoke very positively about the attitude of staff and the care and treatment provided to them.

##### Other evidence

The registered manager showed us some patient's notes held on a computer system, they were able to show us recent and historical notes. The notes included assessments, treatment plans and reviews and evidenced that people had been consulted about their treatment, potential side effects were explained and they had agreed consent to treatment.

The registered manager showed us post treatment advice sheets provided to people following treatment.

##### Our judgement

The registered manager demonstrated that people's needs were assessed appropriately and that planning and delivery of treatment met their needs and protected their welfare.

## Outcome 07: Safeguarding people who use services from abuse

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

### What we found

#### Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

#### Our findings

##### What people who use the service experienced and told us

On this occasion we did not speak to people about this outcome area.

##### Other evidence

The registered manager told us that all staff had attended training on safeguarding children from abuse and they were aware of their responsibilities in relation to safeguarding adults from abuse. We advised the registered manager to obtain a copy of the London multi-agency policy and procedures to safeguard adults from abuse for use at the service.

The registered manager told us that all staff had obtained Criminal Records Bureau checks.

There was a complaints procedure and a whistle blowing policy in place.

##### Our judgement

The registered manager had ensured that patients were cared for in a manner that safeguarded them and protected their rights.



## Outcome 08: Cleanliness and infection control

### What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

### What we found

#### Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

#### Our findings

##### What people who use the service experienced and told us

A person who uses the service told us the practice was always comfortable clean and tidy.

##### Other evidence

The registered manager showed us the services infection control policy. They told that they followed the Department of Health's Code of Practice on the prevention and control of infections.

The treatment room was observed to be very clean and hygienically maintained. The registered manager showed us the practice's procedure for decontamination.

There were adequate hand washing facilities which were clean and in good condition. Staff had access to disposable gloves, aprons, face and eye protection.

##### Our judgement

The registered manager had ensured that people who use the service received care and treatment in a safe and hygienic environment.

## Outcome 14: Supporting staff

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are safe and their health and welfare needs are met by competent staff.

### What we found

#### Our judgement

The provider is compliant with Outcome 14: Supporting staff

#### Our findings

##### What people who use the service experienced and told us

On this occasion we did not speak to people about this outcome area.

##### Other evidence

The registered manager told us that two nurses and a therapist were employed at the service. They had been provided with an employee handbook. They showed us that the nurses and the therapist had received training on the different types of lasers and equipment used at the service, they had also completed core of knowledge training, clinical training and training on basic life support.

The registered manager told us there were team meetings every three months were they discussed service issues and performance.

##### Our judgement

The registered manager demonstrated that staff operating different types of lasers and other equipment used at the service had the skills, qualifications and experience to meet the needs of people who use the service.

## Outcome 16: Assessing and monitoring the quality of service provision

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

### What we found

#### Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

#### Our findings

##### What people who use the service experienced and told us

On this occasion we did not speak to people about this outcome area.

##### Other evidence

A Laser Protection Adviser contract was in place. The registered manager is General Practitioner and the Expert Medical Practitioner overseen by the Laser Protection Adviser.

The registered manager showed us a report from a Laser Protection Adviser completed on the 17/03/11. The Laser Protection Adviser recorded that the management of laser and Intense Pulse-Light safety was excellent, as is compliance with the relevant outcomes of the Care Quality Commission essential standards of quality and safety, other legislation and with guidance given in MHRA Device Bulletin DB2008(03).

The registered manager showed us risk assessments and control measures for laser equipment used at the service. Laser equipment servicing records showed that all equipment was up to date with servicing.

The registered manager also showed evidence that weekly fire safety checks and fire alarm servicing had been carried out at the premises.

##### Our judgement

The registered manager demonstrated that laser equipment was regularly serviced, risks were being appropriately assessed and managed and that the quality of the

service was effectively monitored.

# What is a review of compliance?

By law, providers of certain adult social care and health 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 Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

**Improvement actions:** These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action:** These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

## Information for the reader

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