

Announced Focused Inspection Report: Independent Healthcare (online inspection)

Service: Bella Derma, Glasgow

Service Provider: Bella Derma

16 November 2020

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1 A summary of our inspection

We carried out an announced inspection to Bella Derma on 16 November 2020. The purpose of the inspection was to make sure the service was delivering care safely to patients, in light of the COVID-19 pandemic. We reviewed the service's infection prevention and control policies and procedures, and spoke with the service manager and one member of staff during an online video conferencing call. This was our first inspection to this service.

The inspection team was made up of two inspectors.

As part of the inspection process, we asked the service to submit a self-evaluation. The questions in the self-evaluation are based on our Quality Framework and ask the service to tell us what it does well, what improvements could be made and how it intends to make those improvements. The service submitted a satisfactory self-evaluation.

What we found and inspection grades awarded

For Bella Derma, the following grade has been applied to the key quality indicator inspected.

Key quality indicators inspected		
Domain 5– Delivery of safe, effective, compassionate and person-centred care		
Quality indicator	Summary findings	Grade awarded
5.1 - Safe delivery of care	The service had responded to the challenges presented by COVID-19 and introduced effective measures to minimise the risk of transmission between staff and patients. Training specific to COVID-19 had been carried out by all staff. The provider should ensure electronic patient care records contain the appropriate information relating to the service provider.	✓✓ Good

Grades may change after this inspection due to other regulatory activity. For example, if we have to take enforcement action to improve the service or if we investigate and agree with a complaint someone makes about the service.

More information about grading can be found on our website at:
http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/ihc_inspection_guidance/inspection_methodology.aspx

What action we expect Bella Derma to take after our inspection

This inspection resulted in one recommendation (see Appendix 1).

An improvement action plan has been developed by the provider and is available on the Healthcare Improvement Scotland website:

www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx

We would like to thank all staff at Bella Derma for their assistance during the inspection.

2 What we found during our inspection

Outcomes and impact

This section is where we report on how safe the service is.

Domain 5 – Delivery of safe, effective, compassionate and person-centred care

High performing healthcare organisations are focused on safety and learning to take forward improvements, and put in place appropriate controls to manage risks. They provide care that is respectful and responsive to people's individual needs, preferences and values delivered through appropriate clinical and operational planning, processes and procedures.

Our findings

Quality indicator 5.1 - Safe delivery of care

The service had responded to the challenges presented by COVID-19 and introduced effective measures to minimise the risk of transmission between staff and patients. Training specific to COVID-19 had been carried out by all staff. The provider should ensure electronic patient care records contain the appropriate information relating to the service provider.

The service had two members of staff, the service manager and a beautician. The service also engaged the services of a doctor through a practicing privileges arrangement (staff not employed by the provider but given permission to work in the service).

One of the service's treatment rooms was used for aesthetic treatments, the other two were used for beauty treatments. Each member of staff had a dedicated room to use, which were on different days, where possible. A staggered appointment schedule was in operation. This helped to minimise the number of people in the premises and control the risk of virus transmission to staff and patients.

The service offered IPL (intensed pulsed light) treatments to patients. We saw appropriate signage on the treatment room door to indicate treatment was in progress and staff should not enter, and other precautions were taken place to ensure staff and patient safety. We saw there was a local protection advisor and local rules in place. Staff had completed core knowledge to ensure they had appropriate skills for delivering IPL treatments.

We reviewed the service's policies and procedures which had been amended to reflect the management of COVID-19 pandemic. These included:

- Covid-19 infection prevention & control policy
- Covid-19 operational guide
- Covid-19 patient information
- medical questionnaire, and
- clinical waste contract

All policies and procedures contained enough detail to capture the relevant risks and described appropriate control measures the service would take. These control measures included:

- social distancing measures
- removal of the waiting area
- removal of unnecessary items and clutter such as magazines and refreshments
- increased cleaning of the environment, including patient equipment and high touch areas such as door handles, card payment machine, and
- personal protective equipment for patients and staff.

Patients booked their appointments online. Patients were then emailed an initial assessment questionnaire to complete. A COVID-19 consent form was also emailed to all patients. The form was comprehensive and covered the patient's medical history, previous aesthetic treatments and any known allergies. Patients had a final assessment the day before treatment and were not accepted for treatment unless they had completed and signed this form.

Patients were given instructions for attending their appointment on the day. This included arriving on time, on their own and with minimal belongings. Appointment times were extended to avoid unnecessary contact with other patients and for enhanced cleaning of equipment.

Access to the service was controlled by staff. When patients arrived, a member of staff greeted them at the entrance, ensured they wore a facemask and asked them to use the alcohol-based hand gel provided. They were then taken directly through to the treatment room. Information posters were displayed throughout the service advising patients of hand hygiene and COVID-19.

We saw hand hygiene facilities were in place. A clinical hand wash basin, hand soap and paper towels were available and an alcohol-based hand rub dispenser had been provided.

The service had sufficient stocks of personal protective equipment and stock levels were monitored regularly. Personal protective equipment was stored correctly, close to where patient care was delivered.

Staff were required to change into their uniform on site in order to reduce the spread of infection. They told us they laundered their uniforms at home, at the highest temperature recommended for the material.

Training specific to infection control and COVID-19 had been completed by all staff. This included how to safely apply, remove and dispose of personal protective equipment, as well as enhanced cleaning and hand hygiene.

We looked at five patient care records and found all the appropriate assessments, medical history and consent to treatment forms had been documented.

What needs to improve

We saw no reference was made to the service name on the patient care records. These records were associated with an alternative online company name. We were not able to reference the patients to the service (recommendation a).

- No requirements.

Recommendation a

- The service should ensure all patient records record the name of the place where treatment was received.

Appendix 1 – Requirements and recommendations

The actions that Healthcare Improvement Scotland expects the independent healthcare service to take are called requirements and recommendations.

- **Requirement:** A requirement is a statement which sets out what is required of an independent healthcare provider to comply with the National Health Services (Scotland) Act 1978, regulations or a condition of registration. Where there are breaches of the Act, regulations, or conditions, a requirement must be made. Requirements are enforceable at the discretion of Healthcare Improvement Scotland.
- **Recommendation:** A recommendation is a statement that sets out actions the service should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.

Domain 5 – Delivery of safe, effective, compassionate and person-centred care	
Requirements	
None	
Recommendations	
a	<p>The service should ensure all patient records record the name of the place where treatment was received (see page 8).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19</p>

Appendix 2 – About our inspections

Our quality of care approach and the quality framework allows us to provide external assurance of the quality of healthcare provided in Scotland.

Our inspectors use this approach to check independent healthcare services regularly to make sure that they are complying with necessary standards and regulations. Inspections may be announced or unannounced.

We follow a number of stages to inspect independent healthcare services.

Before inspections

Independent healthcare services submit an annual return and self-evaluation to us.

We review this information and produce a service risk assessment to determine the risk level of the service. This helps us to decide the focus and frequency of inspection.



Before

During inspections

We use inspection tools to help us assess the service.

Inspections will be a mix of physical inspection and discussions with staff, people experiencing care and, where appropriate, carers and families.

We give feedback to the service at the end of the inspection.



During

After inspections

We publish reports for services and people experiencing care, carers and families based on what we find during inspections. Independent healthcare services use our reports to make improvements and find out what other services are doing well. Our reports are available on our website at: www.healthcareimprovementscotland.org

We require independent healthcare services to develop and then update an improvement action plan to address the requirements and recommendations we make.

We check progress against the improvement action plan.



After

More information about our approach can be found on our website:

www.healthcareimprovementscotland.org/our_work/governance_and_assurance/quality_of_care_approach.aspx

Complaints

If you would like to raise a concern or complaint about an independent healthcare service, you can complain directly to us at any time. However, we do suggest you contact the service directly in the first instance.

Our contact details are:

Healthcare Improvement Scotland

Gyle Square
1 South Gyle Crescent
Edinburgh
EH12 9EB

Telephone: 0131 623 4300

Email: his.ihcregulation@nhs.scot

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