

# Announced Focused Inspection Report: Independent Healthcare

**Service:** Edinburgh Medical Aesthetics, Edinburgh

**Service Provider:** Terry Ann Stenhouse

22 June 2021

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First published August 2021

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## 1 A summary of our inspection

We carried out an announced inspection to Edinburgh Medical Aesthetics on Tuesday 22 June 2021. 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 (practitioner) during the inspection. This was our first inspection to this service.

The inspection team was made up of two inspectors.

We did not request a self-evaluation from the service before the inspection.

### What we found and inspection grades awarded

For Edinburgh Medical Aesthetics, 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 carried out the necessary COVID-19 risk assessments, and developed relevant policies and procedures. The care environment and patient equipment were clean and well maintained. A regular programme of infection prevention and control audits should be introduced.	✓✓ 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](http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/ihc_inspection_guidance/inspection_methodology.aspx)

## **What action we expect Terry Ann Stenhouse 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](http://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 Edinburgh Medical Aesthetics for their assistance during the inspection.

## 2 What we found during our inspection

### Service delivery

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 carried out the necessary COVID-19 risk assessments, and developed relevant policies and procedures. The care environment and patient equipment were clean and well maintained. A regular programme of infection prevention and control audits should be introduced.**

We reviewed documents which showed that the service had carried out the necessary COVID-19 risk assessments, and had policies and procedures in place to minimise the risk from COVID-19. The service's COVID-19 policies and documentation we reviewed included:

- infection prevention and control policy
- operational guide, which explained how the service would operate to minimise the risk of COVID-19 transmission
- patient information, and
- arrangements for dealing with emergencies, including a resuscitation policy.

We saw the information provided to patients after booking an appointment. This included clear instructions for patients about COVID-19 procedures in place at the clinic. Patients were asked to arrive for their appointment on time, on their own and with minimal belongings. The clinic main door was locked and access was controlled by the service manager (practitioner) to prevent members of the public from entering the clinic unattended and without an appointment. We were told that, if patients arrived early to their appointment, they were asked to wait outside before entering the clinic. Alcohol-based hand rub and a face mask was provided to each patient before entry to the treatment room.

Patients were required to complete a COVID-19 screening questionnaire which included confirmation that they did not have any symptoms of COVID-19 before treatment. We looked at five patient care records and found all the appropriate assessments, medical history and consent to treatment forms had been documented.

Hand hygiene facilities were available, with hand soap and paper towels. Alcohol-based hand rub dispensers were located at the clinic entrance and inside the treatment room for use by the practitioner and patients.

The care environment and patient equipment were clean and well maintained. Appointment times were staggered to enable the treatment room and equipment to be appropriately cleaned between patients. This included increased cleaning of the environment, patient equipment and high touch areas such as door handles and card payment machines. Waste was appropriately disposed of and stored.

An appropriate supply of personal protective equipment was available, such as face masks, gloves and aprons. The service had sufficient stocks of personal protective equipment and stock levels were monitored regularly. Personal protective equipment was stored appropriately, close to where patient care was delivered.

We were told that the practitioner changed into their uniform in the clinic to help reduce the spread of infection. Uniforms were laundered at home at the highest temperature recommended for the material.

### **What needs to improve**

We saw no evidence of any infection prevention and control audits being carried out to assess and manage the risk of infection. Infection prevention and control audits would help the service to identify and take action to reduce the risks of the spread of COVID-19 (recommendation a).

- No requirements.

### **Recommendation a**

- The service should carry out infection prevention and control audits. Audits should be documented and improvement actions implemented.

## 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	
Recommendation	
a	<p>The service should carry out infection prevention and control audits. Audits should be documented and improvement actions implemented (see page 7).</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](http://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](http://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](mailto:his.ihcregulation@nhs.scot)

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