

Announced Focused Inspection Report: Independent Healthcare

Service: SKM Aesthetics, Philpstoun

Service Provider: SKM Aesthetics Ltd

18 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 SKM Aesthetics on Friday 18 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 a number of staff during the inspection. This was our first inspection to this service.

The inspection team was made up of two inspectors (one of whom was observing the inspection).

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 SKM Aesthetics, the following grade has been applied to the key quality indicator inspected.

Key quality indicators inspected		
Quality indicator	Summary findings	Grade awarded
Domain 5 – Delivery of safe, effective, compassionate and person-centred care		
5.1 - Safe delivery of care	Effective measures had been introduced to minimise the risk of COVID-19 transmission between staff and patients when delivering care. The environment and patient equipment were clean. Infection prevention and control audits were completed which helped the service to identify and manage risk of infection.	✓✓ 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 SKM Aesthetics Ltd to take after our inspection

This inspection resulted in no requirements and no recommendations.

We would like to thank all staff at SKM 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

Effective measures had been introduced to minimise the risk of COVID-19 transmission between staff and patients when delivering care. The environment and patient equipment were clean. Infection prevention and control audits were completed which helped the service to identify and manage risk of infection.

The service manager is a doctor. The clinic also engaged the services of another doctor through a practising privileges arrangement (staff not employed by the provider but given permission to work in the service). The service offered a range of non-surgical aesthetic treatments.

The service had one treatment room which both doctors used on different days. This helped to minimise the number of people in the premises and control the risk of virus transmission to themselves and patients.

We saw that the service had carried out the necessary COVID-19 risk assessments. The service's policies and procedures were comprehensive and described the actions the service is took to minimise the risks from COVID-19. These included:

- COVID-19 infection prevention and control policy
- COVID-19 working policy, which explains how the eservice will operate to minimise the risk of COVID-19 transmission
- COVID-19 patient consent form, and
- policy and procedure manual for staff at SKM Aesthetics

Adjustments had been made to the environment and the movement of patients and staff through the clinic to reduce any potential spread of the virus. These included:

- social distancing measures
- suitable gaps between appointments to allow rooms and equipment to be appropriately cleaned, and
- removal of the waiting area and unnecessary items, such as magazines.

Appointments could be made either online or through telephoning the service. Once an appointment was made, COVID-19 screening questions and a COVID-19 consent form were e-mailed to the patient to complete and return. Patients were advised not to attend if they had any symptoms of COVID-19. Instructions for attending their appointment on the day was also contained in the e-mail. This included arriving on time, on their own, with minimal belongings and to wear a face mask.

Appointment times were extended to avoid unnecessary contact with other patients and for the enhanced cleaning of equipment and the treatment room. Reception staff controlled access to the service. The reception desk had a perspex screen in place.

On arrival at the clinic entrance, a member of staff greeted the client and repeated the COVID-19 screening questions. We saw evidence of other screening measures designed to protect patients and staff, including symptom checking and temperature-checking all patients before they entered the clinic. Symptomatic or suspected COVID-19 patients were not admitted into the service. Patients were required to use alcohol-based hand rub and were provided with a fluid-resistant surgical facemask before being escorted directly to the treatment room.

Once at the treatment room, the clinician clarified the screening questions with the patient before the face-to-face consultation. These precautions helped support the effective screening of patients before their face-to-face consultation.

Hand hygiene facilities were available, with hand soap and paper towels, and alcohol-based hand rub dispensers located at the clinic entrance and in the treatment room for staff and patients to use.

Posters with information about hand washing and COVID-19 were displayed at the clinic entrance. The treatment room contained a poster with information about hand washing as well as wearing PPE.

We looked at treatment room and found that the care environment and patient equipment was clean and well maintained. Increased cleaning of the environment, including patient equipment and high-touch areas, such as door handles and card payment machines had been implemented. Cleaning checklists were complete and up to date. Cleaning items were colour-coded and single-use mops were available. We also saw that clinical waste was segregated properly in clinical waste bags and sharps bins. The clinical hand wash sink was cleaned with 1,000ppm available chlorine, in line with national guidance.

An appropriate supply of personal protective equipment was available, such as face masks, face visors, gloves and aprons. This was stored correctly, close to where patient care was delivered.

Staff changed into a uniform when entering the building and changed back into their own clothes before leaving. They told us they laundered their uniforms at home in line with guidance, at the highest temperature recommended for the material.

During our inspection, we reviewed the service's infection prevention and control audit. The audit and the action plan based on it were up to date.

Staff had completed training on infection prevention and control and COVID-19, including how to safely apply, remove and dispose of personal protective equipment. They had also completed life support training, including arrangements for personal protective equipment.

Consultation and patient care records were stored electronically. We looked at five patient care records and found that they were fully and accurately completed with:

- appropriate assessments, including the outcome of COVID-19 screening questions
- COVID consent form
- consent to treatment
- evidence of aftercare, and
- medical history.

■ No requirements.

■ No recommendations.

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.

This inspection resulted in no requirements and no recommendations.

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:

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1 South Gyle Crescent
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