

Announced Inspection Report: Independent Healthcare

Service: Youthful You Aesthetics, Kirkintilloch

Service Provider: Youthful You Aesthetics Limited

23 November 2021



Healthcare Improvement Scotland is committed to equality. We have assessed the inspection function for likely impact on equality protected characteristics as defined by age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation (Equality Act 2010). You can request a copy of the equality impact assessment report from the Healthcare Improvement Scotland Equality and Diversity Advisor on 0141 225 6999 or email contactpublicinvolvement.his@nhs.net

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Contents

1	A summary of our inspection	4
2	What we found during our inspection	7
Ар	pendix 1 – Requirements and recommendations	12
Appendix 2 – About our inspections		14

1 A summary of our inspection

The focus of our inspections is to ensure each service is person-centred, safe and well led. Therefore, we only evaluate the service against three key quality indicators which apply across all services. However, depending on the scope and nature of the service, we may look at additional quality indicators.

About our inspection

We carried out an announced inspection to Youthful You Aesthetics on Tuesday 23 November 2021. We spoke with the owner (sole practitioner) during the Although the service issued an online survey for us before the inspection, we did not receive any responses from patients. This was our first inspection to this service.

The inspection team was made up of one inspector.

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 self-evaluation.

What we found and inspection grades awarded

For Youthful You Aesthetics, the following grades have been applied to three key quality indicators.

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	Equipment was clean and well maintained. Appropriate systems were in place for safe and secure handling of medicines and infection prevention and control. A regular programme of audits should be introduced to help the service make improvements.	✓ Satisfactory		

Key quality indicators inspected				
Domain 9 – Quality improvement-focused leadership				
Quality indicator	Summary findings	Grade awarded		
9.4 - Leadership of improvement and change	The manager maintained current best practice through training and self-directed learning. A quality improvement plan should be developed to measure the impact of service change and demonstrate a culture of continuous improvement.	✓ Satisfactory		

The following additional quality indicators were inspected against during this inspection.

Additional quality indicators inspected (ungraded)			
Domain 5 – Delivery of safe, effective, compassionate and person-centred care			
Quality indicator	Summary findings		
5.2 - Assessment and management of people experiencing care	Comprehensive patient assessments were completed and clearly documented before any treatment was provided. Next of kin details and consent should be recorded for sharing information. Written aftercare instructions should be provided.		

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 Youthful You Aesthetics to take after our inspection

This inspection resulted in five recommendations. See Appendix 1 for a full list of the recommendations.

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 Youthful You 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

Equipment was clean and well maintained. Appropriate systems were in place for safe and secure handling of medicines and infection prevention and control. A regular programme of audits should be introduced to help the service make improvements.

An infection prevention and control policy was in place and we saw good compliance with infection prevention and control procedures. This included the safe disposal of medical sharps, such as syringes and needles, clinical waste and single-use patient equipment (used to prevent the risk of cross-infection). We saw a good supply of personal protective equipment available (disposable gloves and aprons).

A safe system was in place for the procurement, prescribing, storage and administration of medicines, in line with the service's medication policy. The service had emergency medication in place, appropriate for the treatments being carried out. The registered manager had been trained to deliver advanced adult life support in the event of a medical emergency.

While no serious incidents had been reported in the service, a clear system was in place to record and manage accident and incident reporting. The manager was aware of the responsibility to report incidents that must be notified to Healthcare Improvement Scotland and under health and safety legislation.

What needs to improve

We found no evidence of audits taking place to review the safe delivery and quality of the service. For example, audits could be carried out on patient care records and medicine management. An audit programme would help the service structure its audit process, record its findings and record the improvements (recommendation a).

■ No requirements.

Recommendation a

■ The service should develop a programme of regular audits to cover key aspects of care and treatment. Audits should be documented and improvement action plans implemented.

Our findings

Quality indicator 5.2 - Assessment and management of people experiencing care

Comprehensive patient assessments were completed and clearly documented before any treatment was provided. Next of kin details and consent should be recorded for sharing information. Written aftercare instructions should be provided.

We discussed with the service how patients' needs were assessed, and treatment was planned and delivered, in line with patients' individual treatment plans. The five patient care records we reviewed showed that comprehensive assessments and consultations were carried out before treatment started. These included taking a full medical history, with details of any health conditions, medications, allergies, pregnancy and previous treatments. Any risks and benefits associated with the treatment are explained and this was carried out for all new and returning patients. Records were kept of each treatment session, including:

- a consent to treatment, including having their photograph taken
- the dosage and medicine batch numbers, and
- diagrams and photographs of the treated area helped to inform the overall plan of care.

Patients were invited to attend a free follow-up appointment. This allowed the service to make sure patients were happy with the results and provide more treatment or advice. We saw that patients were given the service's contact details in case of complications.

All patient care records we looked at were legible, signed and stored securely in line with information management protocols and legislation.

What needs to improve

Patient care records we looked at did not document next-of-kin details or patient consent for sharing information with their GP and other medical staff in an emergency, if required (recommendation b).

While patients were given verbal aftercare advice, they had not received written aftercare instructions (recommendation c).

Written aftercare instructions would allow patients to make informed choices and decisions about their care. This provision of aftercare was not documented in patient care records (recommendation d).

■ No requirements.

Recommendation b

■ The service should record next of kin details and patient consent for sharing information with their GP and other medical staff in an emergency, if required, in patients' care records.

Recommendation c

■ The service should provide written aftercare information.

Recommendation d

■ The service should formally document what aftercare has been provided to patients in the patient care record.

Vision and leadership

This section is where we report on how well the service is led.

Domain 9 – Quality improvement-focused leadership

High performing healthcare organisations are focused on quality improvement. The leaders and managers in the organisation drive the delivery of high quality, safe, person-centred care by supporting and promoting an open and fair culture of continuous learning and improvement.

Our findings

Quality indicator 9.4 - Leadership of improvement and change

The manager maintained current best practice through training and selfdirected learning. A quality improvement plan should be developed to measure the impact of service change and demonstrate a culture of continuous improvement.

An experienced nurse practitioner, independent prescriber registered with the Nursing and Midwifery Council (NMC) owned and operated the service. Every 3 years, nurses complete an ongoing professional registration-check process with the NMC. As part of the process, they demonstrate that they have met the requirements of their professional registration to an appropriate person. They maintain current best practice through ongoing training and development, and annual appraisals.

The service had a reliable system for reviewing its policies and procedures. We saw updated policies for infection control and duty of candour (where healthcare organisations have a professional responsibility to be honest with patients when things go wrong).

The service kept up to date with changes in the aesthetics industry, legislation and best practice through attending regular conferences, training days provided by pharmaceutical and aesthetics training companies and subscribing to journal and forums.

The service had informal partnerships with other experienced aesthetic practitioners. These partnerships helped to provide peer support, advice and best practice and discuss any treatments, procedures or complications.

What needs to improve

We saw no system in place to review the quality of the service delivered or evidence that lessons were learned from patient feedback or audits to help improve service delivery. A quality improvement plan would help to structure and record service improvement processes and outcomes. This would allow the service to measure the impact of change and demonstrate a culture of continuous improvement (recommendation e).

■ No requirements.

Recommendation e

■ The service should develop and implement a quality improvement plan.

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 The service should develop a programme of regular audits to cover key aspects of care and treatment. Audits should be documented and improvement action plans implemented (see page 8).
 - Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19
- **b** The service should record next of kin details and patient consent for sharing information with their GP and other medical staff in an emergency, if required, in patients' care records (see page 9).
 - Health and Social Care Standards: My support, my life. I am fully involved in all decisions about my care and support. Statement 2.14
- **c** The service should provide written aftercare information (see page 9).
 - Health and Social Care Standards: I am fully involved in all decisions about my care and support. Statement 2.9

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

d The service should formally document what aftercare has been provided to patients in the patient care record (see page 9).

Health and Social Care Standards: I am fully involved in all decisions about my care and support. Statement 2.9

Domain 9 – Quality improvement-focused leadership

Requirements

None

Recommendation

The service should develop and implement a quality improvement plan (see page 11).

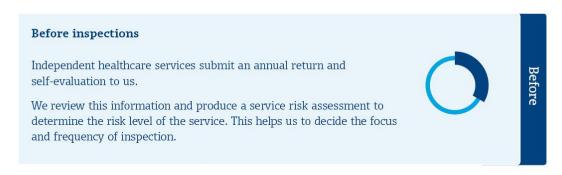
Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19

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.



During inspections

We use inspection tools to help us assess the service.

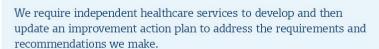
Inspections will be a mix of physical inspection and discussions with staff, people experiencing care and, where appropriate, carers and families.

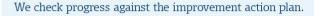


We give feedback to the service at the end of the inspection.

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







More information about our approach can be found on our website: www.healthcareimprovementscotland.org/our_work/governance_and_assurance/quality_of_care_approach.aspx

Healthcare Improvement Scotland Announced Inspection Report Youthful You Aesthetics, Youthful You Aesthetics Limited: 23 November 2021

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: hcis.ihcregulation@nhs.net

You can read and download this document from our website. We are happy to consider requests for other languages or formats. Please contact our Equality and Diversity Advisor on 0141 225 6999 or email contactpublicinvolvement.his@nhs.net

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